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## **Application for Tourist and Community Facility**

(Fingerboard Sign)

## **IMPORTANT INFORMATION**

Tourist and Community Facility (fingerboard) Signs are provided in accordance with Council Policy, the Manual of Uniform Traffic Control Devices (MUTCD) and is subject to the availability of position. The time taken for the works to be carried out is dependent upon the resources of the Fraser Coast Regional Council.

An Initial application fee will apply for all Tourist and Community Facility fingerboard signs, and the applicant will be responsible for the costs of the manufacture, installation and any replacement costs. <a href="https://www.frasercoast.qld.gov.au/fees-and-charges">https://www.frasercoast.qld.gov.au/fees-and-charges</a>
Costs of any maintenance required during the life of the sign (graffiti removal, or minor damage) will be at Council's expense

PURPOSE OF FORM This form is used fo	r the following, plea	ase indicate what your request relates to:					
Requesting a new fingerboard sign							
Requesting the relocation of an existing fingerboard sign							
Requesting the replacement of an existing fingerboard sign							
APPLICANT INFORMATION							
Full Name of Applicant:							
Company or Association: (if applicable)							
Email Address:							
Address of Applicant:	Street No:						
	Street Name:						
	Suburb:		Postcode:				
Contact Phone:	Mobile:		Home:				
Preferred Response Method:	Email: Post:						
CHECKLIST							
Has the applicant read the Tourist & Community Facility (fingerboard) signs policy? Yes:  No:  *insert new link once adopted*							
Not-for-profit organisations may have their fees waived through application of the Fees and Charges Waiver or Reduction Policy.  Are you requesting a fee waiver or reduction?  Yes:  No:							
SIGN DETAILS:							
Requested Location of Sign/s:							
Requested words on Sign/s:							
Please provide a sketch of the locations for the proposed sign/s:							

DECLARATION							
I declare that I have answered all questions truthfully and that all the information I have provided is accurate.							
Applicant Signature:			Date:				
OFFICE USE ONLY							
Date Created: / / CSO Init	ials:	☐ Declaration consent s	signed Receipt No.				
	T	OFFICE USE ONLY					
Date Inspected: / /	Community:	Y	Loca	l Road:	Y 🗆 N 🗆		
Date Processed: / /	Commercial	: Y 🗆 N 🗆	State	e Road:	Y 🗆 N 🗆		
Date Ordered WR No: Meets Policy		y Specifications: Y ☐ N [	Requ	Request Approval: Y \( \simeq \n \square			
METHOD OF PAYMENT							
In Person: At a Council Office Present this form intact with cash, cheque, EFTPOS or credit card at Council offices between 8.15am-4.30pm Mon – Fri							
Over Phone:  Email form to <a href="mailto:enquiry@frasercoast.qld.gov.au">enquiry@frasercoast.qld.gov.au</a> and a Customer Service Officer will call for Credit Card payment  By Mail: Post with cheque/money order only to:							
Chief Executive Officer: Fraser Coast Regional Council, PO Box 1943, HERVEY BAY QLD 4655							