

PENRITH CITY COUNCIL
VEHICLE CROSSOVER APPLICATION - 2012/13
ROADS ACT 1993

Residential
(Owner Occ., Dual Occ.)

\$130 Each Entry
(GST Inclusive)



Medium Density
(Units, Townhouses)

\$260 Each Entry
(GST Inclusive)



Commercial/Industrial

\$260 Each Entry
(GST Inclusive)



I, EDGEWATER HOMES Phone No. 02 8602 6111
(Owner's Name - please print)

of PO BOX 269 ST MARTS Postcode 2760
(Owner's Current address)

Wish to install a:

Footpath Crossing Layback Footpath Dish Crossing Pipe Crossing

For my property at: LOT 2125 CABARINA WAY Suburb JORDAN SPRINGS

D.A. No. (if appl.): _____ Type of Finish: Plain Stencil/Coloured

(Stamped, Exposed Aggregate and Pebblecrete driveways are NOT permitted)

I acknowledge that:-

1. If the vehicular crossing is constructed in material other than plain grey concrete, Council will not be responsible for restoration or repairs in material other than plain concrete.
2. I am aware Council will not be responsible for any Public Risk Claims for accident or otherwise, arising from an incorrectly installed vehicular crossing.
3. I am responsible for contacting DIAL BEFORE YOU DIG 1100 for the location of other authorities services.
4. The proposed surface is to be non-slip finish to comply with AS/NZS 4663.2002; AS/NZS 4586.1999; AS/NZS 3661.2.1994.

Work will be carried out by: Owner Contractor

Contractor's Name PARIS CONCRETE Licence No 208195C Mobile No 0413 337 489

Contractor's Address: 7 YORKSHIRE PL CATHERINE FIELDS Postcode: 2560

I understand that I am to observe the following conditions:

1. I am responsible for protection of the Public during construction (barricades, safe lanes etc.) and for all damage caused to any Public Utility by the construction of the crossing.
2. I am to book an inspection with Council's Engineering Co-ordinator by telephone (02) 4732 7562 twenty four (24) hours prior to the required inspection time, or prior to 11am for the same day afternoon inspections (Mon to Fri), **QUOTING THE APPLICATION NUMBER** (on payment of this application, the number will be noted below).
3. For work which is not formed up and ready to pour at the requested time of Inspection, which is not cancelled prior to the Inspection, an additional charge of \$64.00 will apply.
4. This application is only valid for 12 months from receipt date.

Contractor's Sig [Signature] Date: 16.5.13 Owners' Sig [Signature] Date: 16.5.13
(Person Carrying Out Construction)

Application No. _____ Receipt No. _____ Amount \$ _____ Date Paid _____

All Credit Card Payments attract a service fee of 0.6%

Credit Card Payments: Card Type: MC / BC / Visa Credit Card No: _____

Exp. Date: _____ Name on card: _____

First Inspection _____ Final Approval _____ Not Ready _____

Signature _____ First Inspection Certificate No. _____



LIC. NO. 98093

CONTRACTOR LICENCE

Carpenter, General Concretor



Fair
Trading

Creteman Pty Ltd



NUMBER
208195C

7 Yorkshire Cl
CATHERINE FIELD NSW 2557

NSW
GOVERNMENT

EXPIRES
31/08/2014



LIC. NO. 98093



LIC. NO. 98093

CERTIFICATE OF CURRENCY



GPO BOX 3915
SYDNEY NSW 2001

CRETEMAN PTY LTD
PO BOX 606
FAIRFIELD
NSW 1860

Dear Sir/Madam,

1. STATEMENT OF COVERAGE

The following policy of insurance covers the full amount of the employer's liability under the *Workers Compensation Act 1987*.

This Certificate is valid from 30/06/2012 to 30/06/2013

The information provided in this Certificate of Currency is correct at: 19/07/2012

2. EMPLOYERS INFORMATION

POLICY NUMBER WC715853157
LEGAL NAME CRETEMAN PTY LTD
ABN/ACN 29131820089

WorkCover Industry Classification Number (WIC)	Industry	Numbers of Workers ⁺	Wages*
422120	Concrete Paving Services	6	\$130,800

⁺ Number of workers includes contractors/deemed workers

* Total wages estimated for the current period

3. IMPORTANT INFORMATION

Principals relying on this certificate should ensure it is accompanied by a statement under section 175B of the *Workers Compensation Act 1987*. Principals should also check and satisfy themselves that the information is correct and ensure that the proper workers compensation insurance is in place ie. compare the number of employees on site to the average number of employees estimated; ensure that the wages are reasonable to cover the labour component of the work being performed; and confirm that the description of the industry/industries noted is appropriate.

A principal contractor may become liable for any outstanding premium of the sub-contractor if the principal has failed to obtain a statement or has accepted a statement where there was reason to believe it was false.

Phone: 13 10 10 Fax: 1300 666 346



CERTIFICATE OF CURRENCY

Austbrokers City State PTY LTD
PO Box 1345
NOWRA NSW 2541

PO BOX Q338
QVB POST SHOP NSW
1230
LUMLEY HOUSE, L9 309
KENT STREET
SYDNEY NSW 2000

Dear Sir/Madam,

This is to certify that the following policy is current. The information provided is a summary only. For full details of all relevant terms, conditions, exclusions and definitions that affect the cover, please refer to the policy documents.

POLICY DETAILS

Policy Number : SYBP-0002-4161
Insurer : Wesfarmers General Insurance Limited
trading as Lumley Insurance
Period of Insurance : 31-Aug-2012 to 31-Aug-2013 at 4:00pm local standard time
issued on the 30-Aug-2012
Product : Commercial Business
Insured(s) : Creteman Pty Ltd Trading as Aarts Concrete
Business Description : Concreter

COVER DETAILS

THE FOLLOWING SECTION(S) APPLIES AT AND FROM EACH SITUATION(S)

Interested Parties : Wollongong City Council
Kiama City Council
Camden City Council

Section : **Insured Amount**
Broadform Liability
Limit of Liability : \$20,000,000

CERTIFICATE OF CURRENCY

SYBP-0002-4161



Signed for and on Behalf of
Wesfarmers General Insurance Limited trading as Lumley Insurance