

# CASSOWARY COAST REGIONAL COUNCIL

PO Box 887

INNISFAIL QLD 4860

Ph: 1300 763 903

Email: [enquiries@cassowarycoast.qld.gov.au](mailto:enquiries@cassowarycoast.qld.gov.au)

## Naming Suggestion for Council Roads

- This application should be completed following perusal and understanding of the Council Policy 'Naming of Council Assets'.
- Any decision on the naming or renaming of a road is the responsibility of Council and will be decided at a Local Government Meeting following assessment of the application by a Local Government Officer.
- Please complete this application in BLOCK LETTERS and tick boxes where applicable. If a question does not apply, please indicate by writing "n/a".

### 1. Applicant Details

Note: the applicant is the person responsible for making the application. The applicant is responsible for ensuring the information provided on all Cassowary Coast Regional Council application forms is correct. Any approval that may be issued as a consequence of this application will be issued to the applicant. The applicant may be, for example, the driver of extraordinary traffic on a local government road.

<b>Applicant's name:</b>	<b>Title</b>	<b>First name</b>	<b>Surname</b>
<b>Applicant's phone:</b>			
<b>Applicant's mobile:</b>			
<b>Applicant's email:</b>			

### 2. Description of Unnamed Road (If Currently Named Refer to Question 3)

<b>Address of Road</b>			
<b>Suburb</b>		<b>Postcode</b>	

### 3. Description of Unnamed Road (Disregard if Question 2 is Complete)

<b>Name of Road</b>			
<b>Suburb</b>		<b>Postcode</b>	

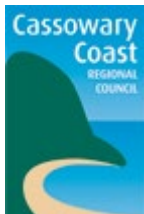
### 4. Prior Naming Convention of Suburb

Is the road located in Innisfail Estate, Kurrimine Beach, El Arish, Cardwell, Silkwood or Goondi?

<input type="checkbox"/>	<b>NO</b> – Proceed to Question 5
<input type="checkbox"/>	<b>YES</b> – Refer to Clause 6.3.4 of the Policy to ensure the proposed name meets the relevant convention

### 5. Proposed Name

<b>Suggested Name/s of Road</b>			
<b>Applicable Category (As per Policy) Please Tick</b>			
<input type="checkbox"/> Early Explorer, Pioneer or Settler	<input type="checkbox"/> Local History Related		
<input type="checkbox"/> War Related Names	<input type="checkbox"/> Commemorative Names		
<input type="checkbox"/> Aboriginal Names taken from the local Aboriginal language	<input type="checkbox"/> Thematic Names (Flora, Fauna, Ships etc)		



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## 6.Asset Images

**Have you Included Photographs and/or Satellite Images? Please Tick**

☐ **NO** – This application cannot be processed without relevant photographs and/or satellite images

☐ **YES** – Photographs and/or satellite images attached

## 7.Letters of Support (Including Effected Property Owners)

**Have you consulted with any relevant stakeholders and included letters of support? (Majority of affected property owners are required to support the proposal) Please tick**

☐ **NO** – Letters of support are not essential however favorable in considering the application

☐ **YES** – Letters of support are attached

## 8.Supporting Evidence / Additional Information

**Please provide any documentation/information to support the Proposed Name of Road? (i.e., Evidence that the proposed name satisfies the applicable category)**

*This information will be considered by Council when assessing the application (Attach any relevant documents or additional pages if necessary).*

## 8.Additional Information Checklist

*For most applications to Council, you must complete Approved Form 1.7: Application to Council (What I Want) **and** an approved form relevant to your application, provide the supporting documentation identified in the approved forms and make payment of the prescribed fee.*

☐ **I have attached the additional Approved Form required for my application.**

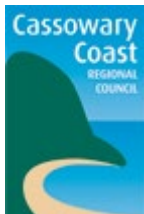
☐ **Asset Photographs and/or Satellite Images**

☐ **Letters Of Support** (not compulsory)

☐ **Additional Documentation Supporting Application**

**I/ We declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department regarding any matters relevant to this application.**

**PRINT NAME..... SIGNATURE..... DATE.....**



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### OFFICE USE

Application Number:

☐

Does the included information meet the policy criteria?

☐

Have all relevant sections of this application been completed?

The Council may, by written notice, request the applicant to provide further reasonable information or clarification of information, documents or materials to be included in the application. Council may require an application to include site plans, management plans, relevant consents, evidence of public liability insurance etc. Please note an application to Council may require approvals under another Act, for example in relation to development, building, liquor carriage of goods and business licensing etc. Should the applicant not provide information, documents or materials to be included in the application, the application may lapse.

#### Information Privacy Statement:

- Your personal information has been collected for the purpose of assessing your application. The collection of your information is authorised under the *Local Government Act 2009*. You are providing personal information which will be used for the purpose of delivering services and carrying out Council business. Your personal information is handled in accordance with the *Information Privacy Act 2009* and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given Council permission, or the disclosure is required by law.
- Council reserves their right to refuse an application if they believe it is not in line with Council's Naming Policy or for any other reason at their discretions.