

ligestyle location of choice

RECORD NO :

FILE NO: 14.71.2

PO Box 396, Kadina 5554 • 51 Taylor St, Kadina 5554 • **ABN** 36 670 364 373 **Tel** 08 8828 1200 • **Email** info@coppercoast.sa.gov.au • **Web** www.coppercoast.sa.gov.au

BUSINESS DIRECTIONAL SIGNAGE

APPLICAT	ΓION FORM				
APPLICANT					
BUSINESS					
OWNER					
BUSINESS					
NAME					
ADDRESS			POSTAL		
MOBILE			ALTERNAT	E	
PHONE			NUMBER		
EMAIL					
DETAUG					
DETAILS					
TOWN	☐ KADINA	□ WALL	AROO	☐ MOONTA	☐ PASKEVILLE
LOCATION OF					
SIGNAGE					
PROPOSED					
WORDING					
DECLARATION					
-	to apply to enter into		_		advertise the above
	ne Business Advertisir		_		
	hat Council will issue		the amount list	ted in the Fees and	Charges Schedule
	able on Councils webs				
	hat the lease agreem		and returned to	Council and invoi	ce paid prior to the
signage being	ordered and installed	d.			
I agree to advi	ise Council if at any ti	me the sign is n	no longer requi	red or the busines	s name changes.
I declare that	I am the authorised p	erson for the a	bove business	and the information	on provided is true and
correct.					
SIGNATURE			DA	TE	
OFFICE USE O	NLY				
APPROVED	☐ YES	□ NO	DATE		
OFFICER			SIGNATURE		