**Subsidy is applicable to the first Vehicle Crossover and can only be claimed within (6) six months after completion.**

**The crossover shall be constructed as per Town specifications, inspected and approved by the Town Technical Officer.**

Crossover Location and Type – Concrete/brick paving/asphalt \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am/we are \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the registered owner/s of the abovementioned property and submit an application for claiming vehicle crossover subsidy.

Please find attached invoices supporting our claim for stormwater components in accordance with Town of Port Hedland policy. (If applicable)

Payment to be made to my/our Bank Account OR by cheque to the postal address.

|  |  |
| --- | --- |
| Name/s |  |
| Cheque - Postal Address  |  |
| Bank Account | BSB A/C No  |
| Bank |  |
| Owner’s signature  |  |
| Date  |  |
| Email address  |  |

**OFFICE USE ONLY**

|  |  |  |
| --- | --- | --- |
| Inspection date  | Initial  | Final |
| Crossover approved |  | Subsidy $ |
| Officers’ Name |  |  |
| Officers’ Signature  |  |  |
| Property Assessment Number |  | Date |

FINANCE SERVICES USE ONLY

|  |  |
| --- | --- |
| Creditor Number |  |
| Payment Date |  |
| Record Number |  |