Application for inspection of road corridor



Address | PO Box 21 | EMERALD QLD 4720
P 1300 242 686 F 1300 242 687
E enquiries@chrc.qld.gov.au W www.chrc.qld.gov.au

(Part 2 Subordinate Local Law No. 1 (Administration) 2012)	fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "N/A" if the question does not apply. This application is to be mailed, delivered or emailed to council. Work must not commence until council has issued a decision for this application.	
	Company/Business Name:	
	ABN:	
	Title: □ Mr □ Mrs □ Miss	
APPLICANT DETAILS	Last Name:	
If applicant is a company or	Given Name/s:	
business, insert	Position:	
business name	Postal Address:	
and Abn	Locality/Suburb: State: Postcode:	
	Phone number: Mobile number:	
	Email:	
LOCATION DETAILS	Road Name:	
	Locality/Suburb:	
	Chainage OR distance from intersection OR GPS coordinates:	
	Tick ✓ relevant box and refer to website for fee amount	
	Works	
	• Gate	
	Grid and/or Gate	
	Bore	
	Water pipeline (or other pipeline)	
SPECIFIC	Monument	
DETAIL/S FOR	Road surface	
INSPECTION	• Footpath	
	Other (provide information)	Ш
	SUGGESTED TIMEFRAME:	

ECM #1788588 Page 1 of 2

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	Additional information of infrastructure or site (attach separately if more space is required)
	Sketch:
	A site plan/sketch (to scale) showing the location details and dimension of the proposed work must be submitted with this application. A space has been provided below to draw a sketch of the proposed location.
	Note : Inspections will be conducted in accordance with the availability of council's technical officers. Council will make every attempt to carry out the requested inspection/s by the requested timeframe. Please contact us to discuss any concerns regarding your timeframe/s.
	Please return the completed application to enquiries@chrc.qld.gov.au Attention Corridor Management. Payment of the lodgement fee is to be made: in person at any council customer service centre; or
	telephone 1300 242 686 to arrange payment; or
	 direct deposit to council's bank account (number, amount and reference to be supplied by council prior to payment).
	I declare the information provided in this application to be true and correct.
DECLARATION	
	Signature: Date: //20

ECM #1788588 Page 2 of 2