

Community Information Sign

Local Government and Public Property Local Law 2014

Name of association:		
Name of applicant:		
Address of applicant		
Address:		
Postcode:	Phone:	Mobile:
Event Details		
Location of proposed event:		
Date of proposed event:		
Details of event (including proposed activities):		
Details of the message to be displayed on the sign/s:		
Number of signs applied for (maximum 15):		
Proposed location of signs:		
Description of signs ie: design, material, size of lettering:		
Signed:		
Date:		

Please note: a \$30.00 non refundable fee is payable at the time of application.

Please refer to the City's Fact Sheet 'Community Information Signs - *Local Government and Public Property Law 2014*' for information on the requirements and conditions of Community Information Signs.

For further information please call City Rangers on **1300 655 860**, or visit any one of our Customer Service Centres conveniently located at Joondalup and Hillarys (Whitford Library).

Alternatively, you may wish to visit the City's website at joondalup.wa.gov.au

Credit Card Authorisation

Card Holder Authorisation

I hereby authorise the City of Joondalup to debit the credit card identified below.

For the amount of \$ _____ (total amount due)

I acknowledge that a declined payment may instigate collection proceedings by the City of Joondalup.

Personal Details

Name:

Address:

Billing Address: (if different from above)

Phone:

Signed: (to be signed by a City of Joondalup Officer if telephone authorisation)

Cardholder Signature:

City of Joondalup Officer Signature:

Date:

Office Use Only

Received by:

Authorised by:

Signature:

Date:

Invoice Number: (if applicable)

DO NOT DETACH

Credit Card Information

Credit Card Number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Expiry Date:

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
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Card Security Number:

Credit Card Type:

Visa Mastercard

Name on Card:

Signature:

(leave blank if received over the phone)