

SHIRE OF GOOMALLING

Office Address: 32 Quinlan Street, Goomalling Postal Address: PO Box 118, Goomalling WA 6460 Telephone: (08) 9629 1101 Email: goshire@goomalling.wa.gov.au

APPLICATION FOR HEAVY VEHICLE PERMIT (NEW)

This form is only to be used when the applicant seeks approval to use Shire local road which ARE contained within the Main Roads WA RAV Network Permit Plan. Application for Extra Mass Permits are processed and approved by Main Roads WA, Heavy Haulage section (08) 9311 8450.

To request a road be inspected for addition to the RAV Network, contact Main Roads WA.

An administration fee of \$13.20 applies to all permit applications. If you require assistance completing the form, please contact Shire staff on (08) 9629 1101.

SECTION A – OWNER DETAILS										
Name of Applicant:										
Company Name:										
Phone:				Email:						
Depot/Parking Address:										
City:				State:		Post Code:				
Postal Address:										
City:				State:		Post Code:				
SECTION B – VEHICLE DETAILS										
Registration Number(s) of vehicle(s)										
Registration Number(s) of trailer/dolly(s)										
Weight of fully laden vehicle										
Type of vehicle (b-double etc)										
Dimension of the largest combination										
Length	Wi		dth		Height					
RAV Network (X) indicate which applies										
Network 3			Network 4		Network 5					
Duration of time permit is required (maximum 12 months expiry for all applications)										
When do you want the permit to commence?										

SECTION C – ROUTE DETAILS

Please list streets/roads which you propose to use, if several roads are used attach a plan with the proposed route(s) clearly marked with an arrow showing the direction of travel

Goomalling-Merredin Road, Goomalling-Toodyay and Northam-Pithara Road require permits from Main Roads WA.

DECLARATION

I hereby agree to abide by terms set out in the Shire of Goomalling Heavy Vehicle Permit. Noncompliance may result in loss of current and future permits without refund. I certify the information provided is true and correct.

Name of Applicant/Owner

Signature of Applicant/Owner

Date: / /

Office use only.

Received by	Receipt #	Date	Permit #	