## **ROAD NAMING APPLICATION FORM**

		APPLICANT DE Company name	ETAILS				
		Contact first name		Contact surname			
		<b>Postal address</b> Street number	Street name				
		Suburb					Postcode
		Phone number		Email address			
		Applicant signature				Date	
	•••••	ROAD NAMING	<b>B</b> DETAILS				
Please provide a simple plan with street layout for notification purposes.		DA number Road name 1		ç	uburb		
A separate sheet may be attached for additional names outlining proposed name, suburb and origin.		Origin of road name 1	1				
		Road name 2		S	uburb		
See Council's adopted fees and charges at <u>penrith.city</u> . All fees subject to change		Origin of road name 2	2				
IMPORTANT							
If you are emailing payment details, please include the Credit Card Authorisation Form as a separate attachment to your Application or any other information.		<ul> <li>PAYMENT METHOD</li> <li>Application fees can be paid by cash, cheque or credit card.</li> <li>cash, cheque or credit card payments can be paid in person</li> <li>cheque or credit card payments are accepted by post</li> <li>only credit card payments are accepted by email</li> <li>PAYING BY CREDIT CARD?</li> </ul>					
Please do not merge		I ATINO DI CK					

Please complete the <u>Credit Card Authorisation Form</u> located in the list of <u>Downloadable Forms</u> and ensure that you provide the full details of the purpose of your payment on this form.

If you are sending your payment by email, please ensure the Credit Card Authorisation Form is included in your email as a separate attachment to your Application or any other information.

## CONTACT US

forms together.

A receipt can be issued

signature is required before processing.

PENRITH

**CITY COUNCIL** 

upon request. Cardholder

Penrith City Council PENRITH NSW 2750 PO Box 60 PENRITH NSW 2751 (02) 4732 7777

council@penrith.city