

## Temporary Shipping Container Permit Application

**Applicant Details**

|  |   |                |       |
|--|---|----------------|-------|
| Given name   |   | Family name    |       |
| Address:   |   | Postal Address |       |
| Business/Mobile No.  |   | Email          |       |
| <b>Contracted Shipping Container company</b>   |   |                |       |
| Business/Mobile No.  |   | Email          |       |
| Container Address to be placed at  |   |                |       |
| Proposed Placement   | <input type="checkbox"/> Road ( <i>to be on truck at all times</i> ) <input type="checkbox"/> Verge <input type="checkbox"/> Yard <input type="checkbox"/> Driveway |                |       |
| <p><b><u>Sketch diagram of the proposed location by the Shipping Container company doing to drop-off/pick-up</u></b></p> <p><i>* No shipping container to be placed directly on the road, road reserve, open spaces or any public areas throughout Nhulunbuy and the Industrial Estate</i></p> |   |                |       |
| Date From  | / /20   | to             | / /20 |
| maximum period fourteen days   |   |                |       |

**Conditions**

- It is the responsibility of the transport company of unloading and loading of the shipping container.
- At all times on footpaths, access for free pedestrian movement must be maintained.
- All damage to kerbing, footways, nature strips, drains or other Nhulunbuy Corporation assets must be made good on removal of shipping container.
- Removal of the shipping container to be undertaken when directed by an authorised officer.

**Declaration and Signature**

I agree to abide by the conditions and requirements imposed on the issue of this permit.

..... / /20  
**Signature of Applicant** **Date**

**Office Use Only**

- |  |   |
|--|---|
| <input type="checkbox"/> Proposed site inspected | <input type="checkbox"/> Approval refused                 |
| <input type="checkbox"/> Approval granted        | <input type="checkbox"/> Copy of permit sent to applicant |

**Site inspection comments/Special conditions**

..... / /20

|           |    |           |       |             |  |
|-----------|----|-----------|-------|-------------|--|
| Fee Paid: | \$ | Date Paid | / /20 | Receipt no. |  |
|-----------|----|-----------|-------|-------------|--|

For enquiries please contact the Development & Compliance Officer on 8939 2200 during business hours or via email to [compliance@ncl.net.au](mailto:compliance@ncl.net.au).