



**APPLICATION FOR THE CONSTRUCTION OF A
PATIO/CARPORT/PERGOLA**

To: City of Gosnells
PO Box 662
GOSNELLS WA 6990

I/We hereby apply for the construction of a patio/carport/ pergola (structure) on my site. I/We are aware of the conditions that apply to the construction of the structure under the *Caravan Parks and Camping Grounds Regulations 1997*. All details provided are true and correct.

____ / ____ / ____
Date

Signature of Applicant (s)

APPLICANTS DETAILS

Name of Applicant/s (in full):		
Residential Address:		
Postal Address:		
Telephone: (Home):	(Mobile):	Fax:
(Business):	E-mail:	
	Caravan site number:	
Is the structure freestanding?		No <input type="checkbox"/> Yes <input type="checkbox"/>
Does the structure have a floor area less than 10 square metres?		No <input type="checkbox"/> Yes <input type="checkbox"/>
Is the structure less than 2.4 metres in height?		No <input type="checkbox"/> Yes <input type="checkbox"/>
Is the structure at least 1 metre from any caravan, annexe or camp on any other site?		No <input type="checkbox"/> Yes <input type="checkbox"/>
Is the structure at least 1 metre from any facility road?		No <input type="checkbox"/> Yes <input type="checkbox"/>
Is the structure at least 1 metre from the boundary of the facility?		No <input type="checkbox"/> Yes <input type="checkbox"/>
Have you attached a plan of the structure showing the dimensions?		No <input type="checkbox"/> Yes <input type="checkbox"/>
Have you attached a plan demonstrating how the structure will be built (structural certificate)?		No <input type="checkbox"/> Yes <input type="checkbox"/>
Have you attached a site plan showing the location and distances to caravans, annexes, camps, buildings, facility roads and boundaries?		No <input type="checkbox"/> Yes <input type="checkbox"/>

APPLICATION FEE	Total
Application fee (non refundable)	\$73.00

Please forward your completed form, attachments and application fees to the City of Gosnells,
2120 Albany Highway, Gosnells WA 6110 or by mail to PO Box 662, Gosnells WA 6990
[For clarification or assistance please contact City of Gosnells Health Services 9397 3000]