

## APPLICATION FOR INFORMATION BAY SIGNAGE

### Applicant Details

Name of Business:

Business Address:

Postal Address:

Contact Name:

Phone:

Email:

### Application Type

☐ New Application   ☐ Renewal (no changes to existing signage)

### Signage Details

Location of Information Bay:

☐ Southbound   ☐ Northbound

Description of signage (Please attach scale drawing):

### Supply and Installation of Sign

Businesses are responsible for supplying the sign. Roper Gulf Regional Council will install the sign.

### Fees and Charges (2025/2026)

Annual fee for Information Bay Signage: \$88.75 per annum (GST exempt).

Pro-rata fees apply for part-year applications (see Council for calculation).



## Terms and Conditions

1. Application requirements
  - Applications must include a scale drawing of the proposed sign.
  - Council reserves the right to refuse any signage that does not consider appropriate.
  - Council reserves the right to approve, revoke, or refuse signage applications and authorisations.
  - An application for a prohibited sign will not be accepted.
2. Specifications
  - Sign allocations are limited to 1m<sup>2</sup> per sign.
  - The applicant must supply the sign in accordance with approved specifications.
3. Installation and maintenance
  - Roper Gulf Regional Council will install approved signage.
  - The applicant must maintain the sign in good condition.
  - Damaged or faded signs will be removed by Council, with replacement at the applicant's expense.
4. Compliance and liability
  - The applicant must indemnify Roper Gulf Regional Council against any liability, loss, or damage caused by their sign.
  - Council may remove signage if it becomes unsafe, damaged, or non-compliant with these conditions.
5. Permit duration
  - Permits are valid for a 12-month period, commencing at the start of the financial year.
  - Renewal applications are required annually.

## Declaration

I, the undersigned, hereby apply for approval to display signage in a Roper Gulf Regional Council Information Bay and agree to abide by the conditions outlined above.

Applicant Name:

Signature:

Date:

## Office Use Only

Authorised Officer Signature:

Date of Issue:

Date of Expiry:

Receipt Number:

PO BOX 1321, Katherine NT 0850 | 08 8972 9000 | ABN 94746956090

