



**TOURIST AND DIRECTIONAL SIGNAGE
APPLICATION FORM**

ESTABLISHMENT _____

APPLICANT NAME _____

ADDRESS _____

CONTACT DETAILS Ph _____ Fax _____

DESCRIPTION OF LOCATION WHERE SIGN IS REQUESTED TO BE PLACED

PLEASE TICK THE RELEVANT BOX(s)

- New sign + new post required New sign (fit to existing post)
 Replacing existing sign (fit to existing post) Single Sided
 Double Sided

SIGN INSCRIPTION (18 characters maximum including spacing)

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TOURISM SYMBOL (please tick box)

- Caravan Public Telephone Bed Cup & Saucer
 Pottery Bunch Grapes Fork & Spoon
 Other

SIGN BLADE COLOUR (please tick box)

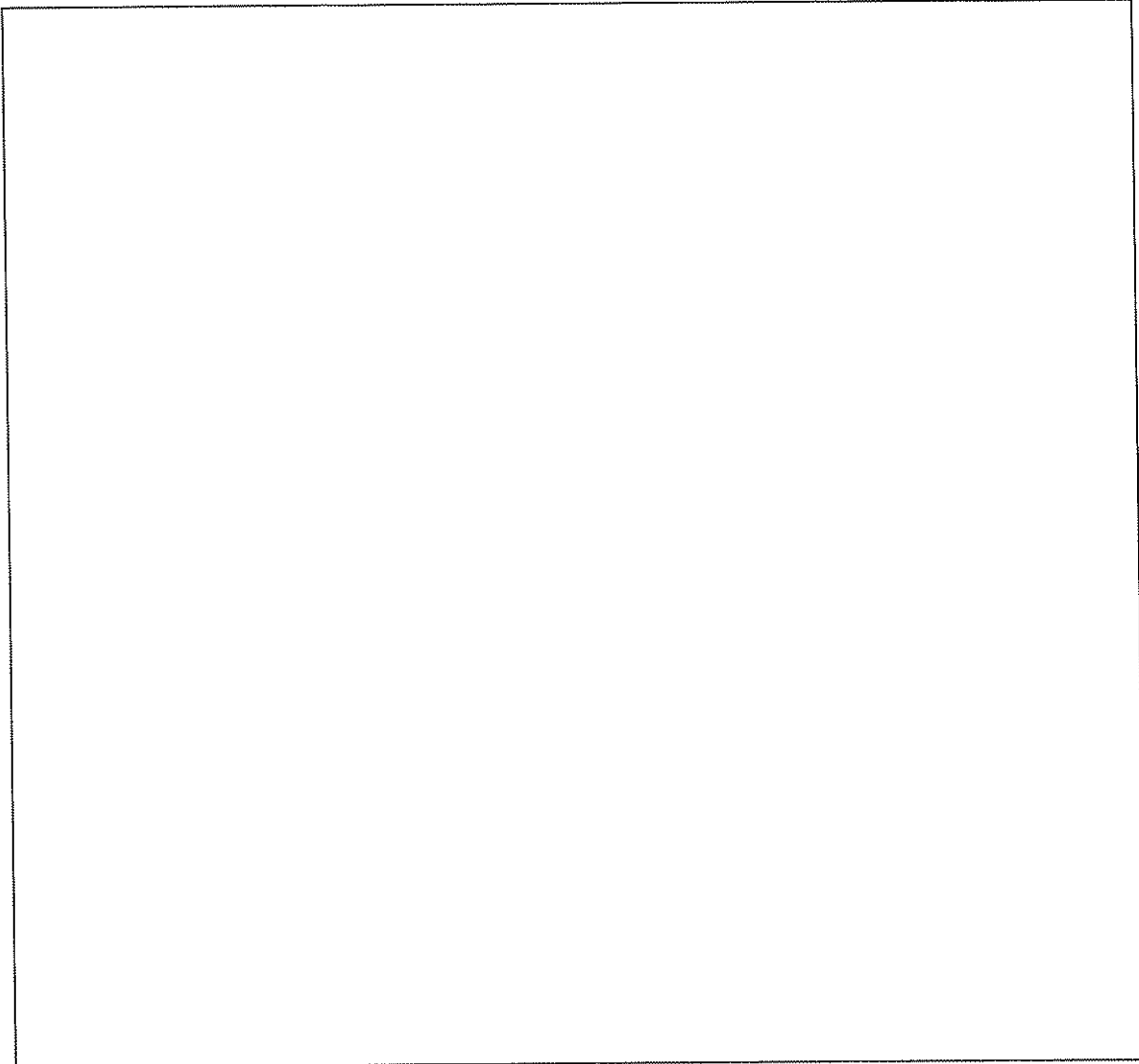
- White on blue sign blade
 White on brown sign blade (WA Tourism Commission Accreditation)

An assessment of proposed signage will be made by Shire officers. Council reserves the right to refuse an application for directional or tourist signage. Applicants will be notified of costs for installation of sign(s).

Installation of sign(s) will be made once payment has been received in full.
Please provide a sketch of proposed sign and location on this form.

Signature of Applicant _____ Date _____

LOCALITY SKETCH



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OFFICE USE ONLY:

File No. _____ Total Cost _____ Receipt No. _____