

- 2 100 Edward Street Corowa NSW 2646
- PO Box 77, Corowa NSW 2646
- **(**02) 6033 8999
- @ council@federationcouncil.nsw.gov.au

Application for Roadside Grazing Approval NB: Minimum of 2 weeks lead time required for Council approval and LLS administration



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- 1. Submit form to your Local Land Services
- 2. Local Land Services will forward the form onto Council for approval
- 3. Local Land Services will advise applicant of outcome

This approval is requested for
nereby seek (name) Council's approval for the issue of a temporary grazing permit by (name) Local Land Services
of

TO BE COMPLETED BY LLS

No of stock			
Type of stock			
(eg. cattle, sheep)			
Breed of stock			
(eg. angus, merino)			
Description of stock			
(eg. cows & calves, ewes)			
Owner of stock & holding PIC			
Have the stock had access to graze categorized noxious weed plants (as listed by Council) in the past 7 days?	Yes	No	If yes species

						7
Road	I name					
Betw num 2103	bering (eg. 969 to					-
Freq	uency of grazing					1
(Nun	nber of days/week)					
Start	Date		End date			1
maxi	imum period 1 month					
Addi	tional information					
	on/s in charge of stock times					
Daytime contact phone of person/s in charge				-		
Properties adjoining the section of road						
prope		djoining the section of road be	een advised (if ro	padside not a	djoining sto	ock owners
	Issue – Council to com	plete			Yes	No
1	Season					
2	Weather conditions					

я	Road works	
4	Weed spraying in area	
5	Significant Roadside Vegetation/Threatened species etc	
6	Road safety: (detail)	
7	Other – please state	

\$20 million Public Liability Insurance – proof pro	ovided			
Map of area to be grazed – attached (Map may	be requested if required)			
NB: Council reserves the right to revoke this approval	where road damage is occurring or is likely to occur.			
<u>Council Consent</u>				
I/We hereby agree to abide by the conditions of approval provided by the (name) LLS, (Name) Council and the <i>Local Land Services Act 2013 and Regulation 2014</i> .				
Applicants signature	Council Representative (Name)			
Date	Signature			
	Date			