

GRAVEL EXTRACTION RECORD FORM

Office Use Only



Please complete and return this form to the Council before:

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Consent Number:

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Consent Holder details

Full name/s of Consent Holder This is the name/s that the consent was issued in.				
Consent Holder postal address				
Primary contact person/s				
Email address				
Phone number/s	Home:		Business:	
	Mobile:		Fax:	

DATE		NAME OF CONTRACTOR OR SUBCONTRACTOR	LOCATION	NUMBER OF TRUCKLOADS / VOLUME
YEAR	MONTH			

More forms can be downloaded from the website or phone a member of the Consents & Compliance team at the Council.



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