

Public Submission Registration cl.5.11 of the Shire of Toodyay Standing Orders Local Law Div. 3 of the Local Government Act 1995

| Date of Council Meeting: | | | |
|---|------------------|--|---------------------------|
| Agenda Item and Name: | | | |
| Please indicate if you are speakin the recommendation listed in the | | □ For | ☐ Against |
| CONTACT DETAILS | | | |
| Name(s): | | | |
| Address: | | | |
| Postal Address (if different): | | | |
| Organisation (if applicable): | | | |
| Contact Phone No(s).: | | | |
| Email: | | | |
| Are you an elector of the | Shire of Toodyay | /: ☐ Yes | □ No |
| Privacy Statement – In accordance w information collected | | ents, the Submitter's a matters related to Pu | |
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| Signature: | | back of this form Date: | or attach another A4 page |



(08) 9574 9300

F (08) 9574 2158

Please return this form to the Shire of Toodyay

Ε records@toodyay.wa.gov.au

www.toodyay.wa.gov.au