

Details of Organisation (App	licant)				
Community Organisation					
Contact Person					
Contact Number			Mobile		
Address					
Postal Address					
Email					
Signature of Applicant			Date		
Details of Community Project (To be Completed by Applicant)					
Community Project/Event					
Location					
Description of Works Require	ed				
Date of Project/Event		Start 1	Time (If Event)		
Details of Council Operator a	nd Council Plant	(To Be Com	pleted By Coun	cil Staff)	
Operator Name*					
Operator Position					
Plant Description					
Plant Number			Depot		
*Operator must be an employee of Greater Hume Council with the competency/qualifications to operate the plant in use and must also be volunteering their services.					
	olunteer my time to	•		For th	
above mentioned community plant. I will perform the works	-		• •	-	
including conducting relevant return any associated documer					will
Signature of Operator	Date				
Council Endorsement					
Approved	Denied		Operator's	Credentials Check	ed
Comments/Conditions					
Signature of Director Engineering Date					
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