Date	
Activity ID_	



## APPLICATION FORM FAA / PERMIT

## **Applicant's Details**

Applicant's Name (If applicant is a d	e/s company, business or Trust, p	please state company, business or Trusi	t name here)
	, ,	(Must be completed if applicant is a	,
A.C.N		(Must be completed if applicant is a	a company)
Postal Address _			
Billing Address _			
Telephone numb	ər ()	or	(Mobile)
Contact person (ç	general)		_
Contact person (a	accounts)		
E-mail address _			
Proposed Detail	<u>s</u>		
Location of area: (map/sketch mu	st be attached to applicatio	n, along with coordinates or kml file)	
Applicant type:	Community   Commercia	al 🗌 Private 🗌 Recreational 📗 Res	search
Desired term:	years/ months/ wee	eks/ day/s	
Where applicable	attach:		
COVID safe p	olan 🗌		
Certificate of	currency for liability insurance	e provided 🗌	
Other relevar	nt permits associated with pro	posed activity	
Has this event be		☐ No ☐ (if yes answer below)  ty Permit number  same location new location (atta	ach map)
Purpose of permi	t (if more room needed attach	n sheet to application)	
	Initialled	(Applicant) /	(Authorised Property Offi

I/We		hereby make applicati	on for a Forest Activit	v Assessment a
	/We acknowledge that costs			
Forest Activity Assessm	nent and this will be charge	d once the FAA is com	pleted. I/We underst	tand that this fe
contributes towards the	e costs of reviewing the p	roposed activity and is	not refundable if r	ny application i
unsuccessful:				
The applicant acknowled		onlication Sustainable Ti	mber Tasmania may f	orward details of
	nt Government Agencies for		,	
this application to releva		their comment.		
this application to releva	nt Government Agencies for	their comment.		
this application to releva	nt Government Agencies for	their comment.		
Dated thisSigned by the Applicant/	nt Government Agencies for day of	their comment.		
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