

This form is for suggesting NEW names for the Councils Street Register. We ask that you list your suggested name on this form and include the history behind your suggestion and forward to Council either by, post, facsimile or hand deliver (to Councils Administration Building)). (additional information supporting your request may be included with the submission).

Completed forms can be sent to Council by post, hand delivered to the front counter of Wollondilly Shire Council, or email to [barbara.weber@wollondilly.nsw.gov.au](mailto:barbara.weber@wollondilly.nsw.gov.au)

### APPLICANT DETAILS

Date:
Name:
Address:
Society/Company/School/Other:
Phone Number:

Please indicate (tick ) which section your chosen road name relates to;-

<input type="checkbox"/> Aboriginal Names (A)	<input type="checkbox"/> Themes ( Flora, Fauna, discoveries) (A)
<input type="checkbox"/> Deceased (B) (commemorative-ie; such as bravery, accomplishments within community)	<input type="checkbox"/> War/Casualty lists (A)
<input type="checkbox"/> Local History (A)	<input type="checkbox"/> Other (A)
<input type="checkbox"/> Early explorers, pioneers/settlers or other eminent persons (A)	

Complete the following Part A or B depending on your selection above

### PART-A

#### PROPOSED ROAD NAME DETAILS - (HISTORICAL/HERITAGE/GEOGRAPHICAL)

<b>Proposed Road Name</b>	
<b>Type of Road</b>	Circle Public / Private / Right of Way / Strata
<input checked="" type="checkbox"/> tick and answer the following;  <input type="checkbox"/> Which Suburb is the new name related to;  _____  <input type="checkbox"/> or is the name for "General use" in the Shire  <i>(please include the suburb name it is related to i.e. Appin) or if not specific to a town just tick "general use"</i>	<b>Write Reason/explanation for choice of road name:</b>          
<b>Source of information</b> (supporting information should be attached if possible)	

**PART-B**
**PROPOSED ROAD NAME DETAILS ( COMMEMORATIVE)**

<b>Proposed Road Name</b>	
<b>Full name of person the name commemorates (deceased)</b>	
<b>What is your relationship to the deceased?</b>	
<b>Date of birth and Date of Death</b>	
<b>Occupation of Deceased</b>	
<b>Last Place of Residence</b>	
<b>Persons association with the main contribution to the local community</b>	
<b>Other reasons for choice of name</b>	
<b>Source of above information</b> (supporting information should be attached if possible)	

*Note: If the name is approved by the Geographical Names Board (GNB) they can be listed for public access on the Councils Approved Street Register under the appropriate suburb for future use. Please note that being on the register does not guarantee that they will be used as other government bodies and the public may still object to the name. However if the name is used, you will be notified.*