

Essential Services Border Crossing Application

IMPORTANT NOTICE

Goondiwindi Regional Council is collecting this information in order to comply with its responsibilities and obligations as a Local Government. The information will only be used by Council Officers and Queensland Police Services which have a legitimate need for the information to process applications or the like. Your information will not be given to any other person or Agency until you have given us permission or if we are required to by law.

APPLICANT'S DETAILS

Surname/ Company Name:		First Name:	
Residential Address:			
Town:		Postcode:	
Mobile:		Home Phone:	
Mobile Phone Owner's Name:			
Email Address:			
Driver's Licence: (photocopy required)	Number:	State Issued:	
Approx. distance from nominated crossing:			

BORDER CROSSING LOCATION (Tick one option only)

<input type="radio"/> Talwood Boonanga Road Crossing	<input type="radio"/> Yelarbon Keetah Road Crossing	<input type="radio"/> Bonshaw Weir Road Crossing
<input type="radio"/> Cunningham Weir Road Crossing	<input type="radio"/> Riverton Road Hynes Bridge Crossing	

REASON FOR APPLICATION (Tick one box only)

DATES (QPS Requirement)

Reason	Tick	From	To
Essential Services Worker (please specify and attach supporting documents)			
Ongoing Medical Condition (please attach letter from your General Practitioner)			
Primary Producer (please attach letter including purpose and access period)			
Other: (please attach letter including purpose and access period, please note general convenience will not be considered as a valid reason)			

DOCUMENTATION REQUIRED

<input type="radio"/> Copy of Individual's Driver's Licence (unless an Emergency Services Worker) <input type="radio"/> Copy of current, valid Queensland Entry Pass <input type="radio"/> Letter from General Practitioner (if relevant)

APPLICANT'S SIGNATURE

Applicant Signature:		Date:	
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Please note: If approved, all occupants of the vehicle must have in their possession a copy of a current, valid, Queensland Entry Pass and a copy of an Essential Services Border Crossing Access Permit Approval when using this service.

OFFICE USE ONLY

GRC Approval Initials	QPS Approval Initials	CSO Initials:	Customer Code Issued:
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Border Crossing Self – Assessment Checklist

Before submitting this form, ensure the following items are marked as completed and if required, included with your application.

- Do you own a smart phone or device with Bluetooth capability?
- Have you provided a day-time telephone contact number?
- Have you provided an email address that has not been submitted by another applicant?
- Have you included a photocopy of your Driver's Licence?
(Photos will not be accepted as resolution does not meet requirements)
- Have you included a photocopy of your Current, Valid, Qld Entry Pass?
(Photos will not be accepted as resolution does not meet requirements)
- If required, have you included a photocopy of the letter from your employer or general practitioner?
- Have you nominated only one border crossing point in your application?
- Have you or your business been significantly impacted by the closure of the nominated border crossing?
Queensland Police Service will contact you for an interview, and will assess if your application is for essential travel or convenience.
- Have you, or anybody you have been in contact with, visited a current COVID-19 Hotspot in the last 14 days? YES ___ NO ___
- I understand that:
 - the application process may take 3 – 5 business days to assess, dependant on volume of applications;
 - if this application is incomplete or missing attachments the application may not be processed within the specified timeframe: or
 - if I am unable to receive phone calls from a member of the Queensland Police Service.

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