Petition to the Moreton Bay City Council COVER PAGE

Postal Address PO Box 159 Caboolture QLD 4510 Office of the CEO Ph: 07 3205 0555 Internet www.moretonbay.qld.gov.au council@moretonbay.qld.gov.au

Name and address of principal petitioner:

Name:	
Address:	
Postal address:	
Contact phone:	
Email:	
Signature:	Date:

We the undersigned residents of Queensland request that council: (state action requested)

(copy action requested to signatory page/s)

Note: This cover page, including the name of the Principal Petitioner, will be made available on Council's website as a supporting document to the minutes of the meeting at which the Petition was tabled.

Petition eligibility criteria:

To be eligible, the principal petitioner must reside within the City of Moreton Bay and only Queensland residents are acceptable signatories. Petitions must be signed by at least 10 people and must be submitted in this approved format only. Petitions received in any other format or via online platforms will not be accepted.

Ensure the request is conveyed in a clear and concise manner, is a matter which the Council has the power to act, does not contain language which is defamatory, offensive, or likely to be offensive to any member of the public, and does not breach the privacy of others.

The petition must comprise of this cover page plus as many signatory pages as can be collected.

OFFICE USE ONLY		
Date received:	Referred to Div Cr:	Date tabled:

Petition to the Moreton Bay City Council SIGNATORY PAGE/S

We the undersigned residents of Queensland request that council: (repeat action requested on all signatory pages)

Signatures of Petitioners: (Name, Address and signature must be completed - only Queensland residents eligible to sign)

Name: (please print)	Signature:
Address:	
Phone:	Email:

Name: (please print)	Signature:
Address:	
Phone:	Email:

Name: (please print)	Signature:
Address:	
Phone:	Email:

Name: (please print)	Signature:
Address:	
Phone:	Email:

Name: (please print)	Signature:
Address:	
Phone:	Email: