



WESTERN AREA RURAL DISTRICT COUNCIL (WARDC)

STREET/DRIVE NAME APPLICATION FORM

Applicant Information

Surname: Other Names:

First Name: Sex: Male ☐ Female ☐

Current Residential Address:

Existing Street/Drive Name if (Any):

Proposed Street/Drive:

Telephone No.....

Name of Community:

Constituency: ----- Ward: -----

How was the Street/ Drive Name Developed?

- a. By Government (State Procedures):
- b. By Government or CBO:
- c. BY The Community:
- d. By Another Individual or Self (Comment on the way it was done):

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Your Personal Contribution to the Development of the Community (State if any):.....

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How would you hope to Contribution to the Development of the Community in the Near future?

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Have you gained approval from the Community and its stakeholders? (If No) why?

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What is your personal view of the Street/Drive to be named after you:

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Any additional information you may want the Council to know about the said Street/Drive please state:

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RECOMMENDATION FROM:



WESTERN AREA RURAL DISTRICT COUNCIL (WARDC)

The Headman

Name:

Community:

Signature:

Verified By: Works Engineer, WARDC

Name:

Community:

Signature:

Approved by:

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Raman Tom Farmar

Chief Administrator – WARDC