

Roadside Memorial Registration Form

Objective ID: A11231786



Details of person registering roadside memorial	
Full name of person responsible for the roadside memorial	
Contact phone number	
Email address	
Details of the roadside memorial	
Full name of the individual/s for which the roadside memorial commemorates	
Date of accident (if known)	
Address or location of roadside memorial	
Please specify type of memorial	<input type="checkbox"/> Flowers <input type="checkbox"/> Crosses or similar <input type="checkbox"/> Personalised memorial Other: _____
Declaration	
I confirm the roadside memorial meets the criteria of the Public Memorials Policy	YES / NO (circle)
Registration Date	

Registrations can be submitted as follows:

Email: governanceteam@mornpen.vic.gov.au

Mail: Governance Unit
Mornington Peninsula Shire Council
Private Bag 1000, Rosebud, Vic, 3939

In Person: Any Shire office.

Privacy statement

The information on this form is being collected by the Mornington Peninsula Shire in accordance with its Privacy Policy and the *Privacy and Data Protection Act 2014* for the primary purpose of registering a roadside memorial in accordance with its Public Memorials Policy, Item 5.7. The Shire may use this information for a related secondary purpose that you would reasonably expect. You may access personal information you have provided to the Shire and make corrections by contacting the Shire's FOI Officer foi@mornpen.vic.gov.au.