

PETITION

To: The Council
Organisation: City of Armadale
Address: 7 Orchard Avenue Armadale
Western Australia 6112

This petition is submitted on behalf of the listed signatories by:

Name: [Insert full name]
Contact Address: [Insert full address]
Phone No: [Insert contact No] Email: [Insert email address] (office use only – to remain confidential)

(All correspondence will be addressed to the person submitting this Petition)

[insert information on what is requested from the Council and the facts or reasons to support such action]

We the undersigned respectfully request that the Council:

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.....

.....

| Full Name | Address <i>[Number, Street & Suburb]</i> | Signature | Date |
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NOTE: The request must appear on every page of the petition.