

 P. 07 4741 2900
 PO Box 274 Hughenden Q 4821

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 34 Gray St, Hughenden Q 4821

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 www.flinders.qld.gov.au



COMMUNITY BUS BOOKING FORM

Please Note: The Community Bus seats 18 people including the driver.

For Fees & Charges please contact Council Office on (07) 4741 2900 or to go our Website www.flinders.qld.gov.au

Applicant Details				
School/Community Group:				
Contact Name:				
Postal Address:				
Residential Address:				
Phone (W):			Phone (H):	
Mobile:			Fax:	
Email:				
Preferred Contact Method:	☐ Phone	☐ Mail	□ E	mail
Activity Vehicle Required for:				
Location of Activity:				
Date and time of pick up:	Time: Date:			
Date and time of return:	Time: Date:			
Driver Name:	Note: ensure driver is an approved person and has completed necessary documentation.			
Special Requirements:				

Updated: 03/02/2023

Hire Agreement						
Note:	Driver, please be aware that damage caused to vehicles will result in the user being asked to reimburse Flinders Shire Council for the costs incurred. Note: INSURANCE EXCESS IS \$500 + GST PER CLAIM					
Privacy Collection Notice:	Flinders Shire Council is collecting your name, residential address, and telephone number in accordance with the Local Government Act 2009 in order to process your application. The information will only be accessed by employees and/or Councillors of Flinders Shire Council for Council business related activities only. Your information will not be given to any other person or agency unless you have given Council permission or we are required by law.					
Applicant Signature:	acknowledge I have read and understood the contents of this form, and Council's Community Bus Policy. agree to return the bus in a clean and tidy condition. understand an inspection will be completed by council staff and if deemed not cleaned, the bus will be cleaned at the expense of the hirer. The hirer will be invoiced the standard rate of \$150.00. agree to abide by all Queensland road rules. certify that I am aware of the Flinders Shire Council Policy on payment of fines for traffic violations and parking infringements and that I accept liability for any such fines incurred while driving the vehicle described below. Date:					
Office Use Only - Quotation of Cost						
Type of Charge	Quantity	Unit Cost	Total			
Total						
Office Use Only						
Received By:	Date:					
Deposit Paid:	\$	Receipt Number:				
Approval of use of Bus:	☐ Approved	☐ Approved ☐ Not Approved				
Signed:	Date:					
Entered On Calendar:	☐ Yes ☐ No					
Driver Approved:	☐ Yes ☐	No				

Updated: 23/05/2024