

# LA PEROUSE



LOCAL ABORIGINAL LAND COUNCIL

## Aboriginal Site Survey Request

Company Name			
Site Address			
Contact Name		Phone	
Email Address			
Date/s required		Time on site	
Number of LPLALC Site Officers Required			

Meeting Place: (include directions/map if required)


Site Information: (purpose of the monitoring visit) (how long will the visit go for)


Tasks to perform:

Excavation

Bush Walking

Wet Sieving

Other (please specify) \_\_\_\_\_

**Do you require a report: (please circle)** YES / NO

### **Invoice Details:**

Company			
Contact Name		Phone	
Email Address		ABN	
Postal Address			

Please email completed form to [admin@laperouse.org.au](mailto:admin@laperouse.org.au)