PETITION

To the Mayor and Councillors of Alexandrina Council

Part 1.

Head Petitioner (contact person): ……..

Telephone: ……..

Address:.....

.....

.....

Must include full street address, suburb and postcode

Email address: ……..

Part 2.

The petition of (identify the individuals or group, e.g. Residents of Alexandrina Council)

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Part 3.

Draws the attention of the Council to (identify the circumstances of the case)

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Part 4.

The petitioners therefore request that the Council (outline the action that the petitioners are requesting Council should or should not take)

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PETITION

To the Mayor and Councillors of Alexandrina Council

Head Petitioner (contact name): .....

Telephone: .....

Outline the action that the petitioners are requesting Council should take or not take (**Copy Part 4 on the first page**);

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.....

Please use **CAPITAL LETTERS**

FULL NAME (i.e. JOHN SMITH)	**FULL ADDRESS** (i.e. 11 CADELL STREET, GOOLWA, SA, 5214)	**SIGNATURE**

This sheet may be copied and used for additional pages of the petition.