Percent for Public Art

Notification of Artwork Completion



I,							of:
Company name:							
Address:					Postcode:		
Telephone:			Email:				
Development address:							
Approval to commence	e serial nu	mber:					
Date work completed:		Fina	al artwork cost:				
Advise that in accorda	ance with				opment and subseq en installed and con		rk project
Artist name:							
Artwork title (if applica	ble):						
Artwork description:							
Artwork dimensions:							
Final artwork cost:					Photos attached?	Yes	No
Plaque installed?	Yes	No					
Accordingly, I hereby advise that the City may inspect the site to ensure the artwork complies as approved.							
Owner/Applicant signa	ture:						
Date of notification:							
Would you like to be pr	resent at t	he artwork si	te inspection?	Yes	No		

Please forward this completed form, together with supporting documentation to:

City of Kalamunda PO Box 42 KALAMUNDA WA 6926 or by email to enquiries@kalamunda.wa.gov.au If you have any queries regarding Percent for Public Art, please visit the City's website kalamunda.

wa.gov.au or phone (08) 9257 9999 during

office hours.