

**Appendix B – Annual Works Program Suggested Template**

Financial Year \_\_\_\_\_/\_\_\_\_\_

Park Name \_\_\_\_\_

Coordinator Name \_\_\_\_\_

Location of works

Whole of Park?            Yes                    No

Sections of Park Only?    Yes            - Please supply map of area/areas proposed – Council can assist.

What do the works involve?

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Are herbicides or diesel being applied for weed control?    Yes                    No

**If Yes please fill out page 3 of this proposal**

Weeds of priority from highest priority to lowest priority (1-10):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Other lower priority weeds

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Consumables (What additional consumables will your group need to undertake this work this financial year)?

PPE: \_\_\_\_\_

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Safety/Other: \_\_\_\_\_

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Herbicide and Associated Equipment (chemical, knapsacks, water containers, wetter, diesel) What your group require for this financial year?

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How and where will this be stored during the year?

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Training Requirements for staff?

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Will Chainsaws or any other mechanical equipment be used on this site? Yes No

Details: \_\_\_\_\_

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If YES are staff trained in the use of this equipment? Yes No

Is vehicle access required into the park in order to undertake this work? Yes No

Details of vehicle access requirements: \_\_\_\_\_

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If YES, does your group have access to an appropriate 4x4 vehicle (High and Low Range Transmission) and a driver that has been trained in 4x4 operations? Yes No N/A

What support will you need from Council during the course of this year?

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**Estimated budget breakdown**

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**TOTAL ESTIMATED EXPENDITURE: \$** \_\_\_\_\_



**Project Approval Chain**

Project submitted by \_\_\_\_\_ (name)  
\_\_\_\_\_ (day) \_\_\_\_\_ (month) \_\_\_\_\_ (year)

on behalf of the Friends of the Escarpment (Toowoomba) Inc.

Signed \_\_\_\_\_

Project endorsed by \_\_\_\_\_ (name)

Chairman of the Friends of the Escarpment Parks (Toowoomba) Inc.

\_\_\_\_\_ (day) \_\_\_\_\_ (month) \_\_\_\_\_ (year)

Signed \_\_\_\_\_

**OFFICE USE ONLY**

Project       approved       not approved

Toowoomba Regional Council representative \_\_\_\_\_ (name)

\_\_\_\_\_ (day) \_\_\_\_\_ (month) \_\_\_\_\_ (year).

Signed \_\_\_\_\_

**Additional Approval Conditions/Comments**

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