

Yarralin External Accommodation Request Form



Victoria Daly
REGIONAL COUNCIL

Visiting Department: _____

Postal Address: _____

ABN: _____

Email Address: _____

Phone Number: _____ Mobile Number: _____ Fax Number: _____

Purpose of Visit: _____

Name of all guests: 1. _____ 2. _____

3. _____ 4. _____

Time and Date of Arrival (*Time of arrival must be prior to 4:30PM*) ____ : ____ am/pm on ____ / ____ / ____

Date of Departure (Rooms must be vacated by 10am) ON ____ / ____ / ____

Accommodation Type	Room Please Tick	Number of Beds (per room)	Cost (\$ Per Room)
VOQ 1 – Self Contained 10305	1	1 x Double Bed	\$250.00 One Room \$450.00 Two Rooms
	2	2 x King Single Beds	
VOQ 2 – Self Contained 10305	1	1 x Double Bed	\$250.00 One Room \$450.00 Two Rooms
	2	2 x King Single Beds	

METHOD OF PAYMENT: CREDIT CARD PURCHASE ORDER EFTPOS
 INTERNAL REQ.

Purchase orders are to be submitted to administration staff prior to arrival in community
 Credit card details are required to secure booking/s and cover any additional costs that you may incur

Card Type: MasterCard ____ Visa ____ Bank Card ____

Card Number: _____ / _____ / _____ / _____

CCV: ____ **Expiry Date:** ____ / ____

Card Holders Name: _____

Acceptance

Our accommodation facilities are located in remote areas and we are required to accommodate a wide range of internal and external guest and does not follow the typical model in many areas, widely differing from services being offered by standard accommodation providers. On arrival to any VDRC Community we ask that you attend the Service Delivery Centre to complete our visitors log book, this is a policy requirement in every community for all individuals visiting community. Please note that you will be financially liable for any costs that may be incurred due to excessive cleaning requirements on departure, loss of inventory, damage to property, loss of keys etc. No key deposit will be charged however if the keys should not be returned on departure the company will be charged the re-replacement cost for key re-issue.

Authorised Officer: _____

Signature: _____

Date: ____ / ____ / ____

Please send completed form to YarralinAccommodation.Bookings@vicdaly.nt.gov.au

Should you have any queries after hours in relation to your accommodation, please contact the Council Service Manager. Alternatively you can see the staff in the Council Office during business hours.

All changes to accommodation or room hire must be forwarded to Regional Administration Staff ONLY.

Amendments to Booking made after the booking confirmation will be charged \$25 administration fee.

All Cancellations must be emailed to YarralinAccommodation.Bookings@vicdaly.nt.gov.au or faxed to 0889 710 856, 24 HOURS PRIOR TO EXPECTED CHECK IN.

ALL CHANGES THAT ARE MADE LESS THAN 24 HOURS BEFORE CHECK IN WILL BE CHARGED AT THE FULL RATE.

IF YOU ARE NOT WILLING TO SHARE YOUR ACCOMMODATION FACILITY WITH ANOTHER VISITING DEPARTMENT, PLEASE ENSURE YOU BOOK THE ENTIRE VOQ, HOUSE OR UNIT. IF YOU HAVE ONLY BOOKED 1 ROOM AND ARE REQUIRED TO SHARE, YOU WILL BE NOTIFIED BEFORE HAND.

Caution: Yarralin is a dry area, all Alcohol is prohibited.

Yarralin Community is actively patrolled by the Northern Territory Police with additional support of the VDRC's Night Patrol Safety Officers.

Yarralin Community is a alcohol protected area, this means consuming or obtaining alcohol within this area you could be at risk of a number of penalties.

These penalties could impose a maximum of 20 penalty units, a maximum \$50,000 fine and the confiscation of your vehicle.

Victoria Daly Regional Council will not condone or consent to any alcohol consumption with in the accommodation facilities, if you are found consuming alcohol your department will be notified and you no longer be able to make future bookings with the Council.

The Council will not take any liability if you are found to be guilty and if penalties are enforced, before entering the Community there is also a large sign stipulating that this area is a alcohol protected area.

Please be respectful of the Community guidelines and obey the law.

OFFICE USE ONLY

Booking Confirmation Date: ____ / ____ / ____

Accommodation Granted: _____

Location: _____ **Cost Per Room:** _____ **Total Booking: \$** _____

Account String: ____ -VI – 148 – 68430 **Additional Charges:** _____ **Admin Charges:** _____

Payment Method: CREDIT CARD PURCHASE ORDER EFTPOS INTERNAL REQ

Administration Officer: _____ **Date:** ____ / ____ / ____

Invoice Number : _____ **Date:** ____ / ____ / ____