

MASTER LOCKSMITH ASSOCIATION KEY (MLAK)



The Master Locksmith Association Key (MLAK) is a master key that fits into specially designed locks, allowing access to public toilets and enabling people with a mobility difficulty to access public toilets facilities throughout New South Wales.

The MLAK is free of charge and is available upon request to eligible residents of Liverpool Local Government Area (LGA). To be eligible for an MLAK key, you must be a person with a disability or their carer or have a written authority from your doctor or disability support organisation.

MLAK toilets in the Liverpool LGA are located at:

- The Boat Shed at Chipping Norton
- Woodward Park, Netball Courts
- Winal Reserve, Hinchinbrook
- Edwin Wheeler Reserve
- Liverpool City Council Ground Floor
- Liverpool Train Station
- Carnes Hill Library and Community Centre

The MLAK also provides access to the liberty swing at Macleod Park, Braidwood Dr, Prestons

For more information on the Master Locksmiths Association, please go to www.masterlocksmiths.com.au or call 1800 810 698.

If you would like more information on accessible toilets, please see the national public toilet map at www.toiletmap.gov.au or contact Spinal Cord Injuries Australia (SCIA) on www.scia.org.au
You can also contact Council's Community Development Worker Aged & Disability on 02 9821 7759 for further information.

MASTER LOCKSMITH ASSOCIATION KEY (MLAK) APPLICATION FORM

Please complete this application form and return it to
CONFIDENTIAL: Community Development Worker Aged & Disability
Liverpool City Council, Locked Bag 7064, Liverpool BC NSW 1871
or email sloanK@liverpool.nsw.gov.au

CONDITIONS

1. The MLAK is restricted to people who have a mobility difficulty OR who have written authority from a doctor, disability organisation, community health centre or owner or manager of a building with an accessible toilet on site.
2. The MLAK is non-transferrable and is only to be used by the person to whom it has been issued.
3. The MLAK must be returned to Liverpool City Council when it is no longer required by the applicant.

Name: _____

Address: _____

Phone: _____

Pensioner Concessioner Card No. _____

Health Care Card _____

Signature: _____

Date _____