



Entertainment Events Permit Application

Local Law (Entertainment Venues and Events) 1999

ABN 72 002 765 795
GST does not apply
to these permits

Please read the Entertainment Venues and Events Guide before completing and submitting the application. Applications that are incomplete will not be accepted.

Prior to completing the application ensure that you have addressed all applicable health, safety and amenity issues. To assist you with the planning and preparation of an event, you are recommended to consult the publication 'A Planning Guide for Event Managers – alcohol, safety and event management' available from the Liquor Licensing Division.

These documents are also available on:
<http://www.lgtoolbox.qld.gov.au>

Lodge your completed application in person at your nearest Council Regional Business Centre

**OR mail to: Brisbane City Council
GPO BOX 1434
BRISBANE QLD 4001**

Office Use Only

DART Application No.	DART Permit No.
<input type="text"/>	<input type="text"/>

5 Who is applying for the permit?

Corporation/Incorporated Association **Go to 11**

Individual(s) **Go to next question**

6 Individual(s) name(s)

Individual 1

Mr Mrs Miss Ms Other

Family name

First and Middle name(s)

Individual 2

Mr Mrs Miss Ms Other

Family name

First and Middle name(s)

7 Business/Trading name *If applicable*

8 Individual(s) postal address

 Postcode

9 Individual(s) contact details

Phone number

Fax number

Mobile number

E-mail address

10 What is your ABN?

Any person who conducts a business is required to have an ABN.

1 What are you applying for?

New Permit Expected number of people attending the event?
 2001 - 10 000 > 10 000

2 Is this application for a listed charitable organisation and the activity is of a nature where a reduction or waiver of fee is applicable?

A listed organisation is one that is listed in Appendix A of Brisbane City Council's *Schedule of Fees and Charges*.

No
 Yes *Attach proof of status*

3 What is the official address where the activity will be carried out? *If you are unsure of the address, please confirm by contacting the landowner or alternatively Council on (07) 3403 8888.*

This address cannot be a post office box.

Unit no.	Street no.	Street
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb	Postcode	
<input type="text"/>	<input type="text"/>	

4 Real Property Description
If you are unsure of the RPD, please confirm by contacting the landowner or alternatively Council on (07) 3403 8888.

Lot	Plan
<input type="text"/>	<input type="text"/>
Lot	Plan
<input type="text"/>	<input type="text"/>

11 Is a Corporation/Incorporated Association applying for the permit? *A business name is not a legal entity, and **cannot** be a permit holder.*

No **Go to 18**

Yes **Go to next question**

12 Corporation/Incorporated Association name, e.g. *Queensland Best Pty Ltd or My Company Ltd.*

13 Business/Trading name *if applicable*

14 Contact person's name **MANDATORY**

15 Corporation/Incorporated Association postal address

 Postcode

16 Corporation/Incorporated Association contact details

Business phone number

Business fax number

Business mobile number

E-mail address

17 What is your Corporation/Incorporated Association's ABN?
Any organisation who conducts a business is required to have an ABN.

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18 What is the individual(s) or Corporation/ Incorporated Association **registered** address?

This is the address where you can receive legal documents. This may be the same address as the location of the activity.

*This address **cannot** be a post office box.*

 Postcode

19 Is an Agent/Consultant assisting you with this application?
This person will receive correspondence in relation to the application, but will not be listed as the permit holder or receive future correspondence.

No **Go to 23**

Yes **Go to next question**

20 Agent/Consultant name

21 Agent/Consultant postal address

 Postcode

22 Agent/Consultant contact details

Phone number

Fax number

Mobile number

E-mail address

23 What is the type of event proposed, e.g. *outdoor amplified music concert, festival, outdoor sport event, amusement rides or circus*

24 What activities will be conducted at the event e.g. *mechanical rides, live bands, pyrotechnic display, food stalls or camel rides?*

NOTE: *The location of these activities must be shown on the attached plans.*

25 What are the proposed operating dates for the event?
NOTE: Council must receive the application at least six weeks prior to the event.

26 What are the proposed hours of operation?

Monday to Friday

Saturday

Sunday

27 Are you applying to hold this event in a park?

NOTE: You will be invoiced separately for the fees and charges associated with park bookings.

- No **Go to 35**
Yes **Go to next question**

28 Name of park

29 Will you be erecting marquees, tents or other structures, e.g. stages or rides in the park?

- No **Go to next question**
Yes **Give details**

Number of marquee(s), tent(s), stage(s)

Size of marquee(s), tent(s), stage(s)

Types of rides

30 Will you require electricity?

- No
Yes

31 Will you be selling liquor to the public?

- No
Yes

32 Will you be selling food to the public?

- No
Yes

33 Will you be using amplified devices, e.g. speakers?

- No
Yes

34 Will you require vehicle access in the park?

- No
Yes **Give details**

Number of vehicles	Registration numbers
<input type="text"/>	<input type="text"/>
Type of vehicles, e.g. car, trucks	
<input type="text"/>	
Reason for vehicle access	
<input type="text"/>	

35 Have you ever had a permit refused, suspended or cancelled, or been found guilty of an offence under the Local Law (Entertainment Venues and Events) 1999 or corresponding law in Queensland other States and Territories?

- No **Go to next question**
Yes **Give details**

36 Completion Checklist/Plan Requirements

It is your responsibility to ensure you obtain all relevant approvals. A Permit for an Entertainment Event does NOT constitute approval of other aspects of your operation. Other approvals may include those issued by Liquor Licensing, Police, Department of Natural Resources, etc.

Plans are required to show the location of all activities.

- two copies of all plans, maximum A3 and clearly legible
- all plans drawn to scale 1:100 or 1:200, with elevations and details not more than 1:50
- site plan showing location of site in relationship to surrounding land uses and the layout of the site

Technical reports and other information such as brochures or photos can be attached as necessary to accompany the plans.

NOTE: Where you are required to attach additional information and plans, these need to conform to the requirements as listed or in the Entertainment Venues and Events Information Guide.

Tick ALL that apply

	Office Use Only
Entertainment Events Permit Application fee enclosed or paid <input type="checkbox"/>	<input type="checkbox"/>
Proof of charity status if requesting reduced fee <input type="checkbox"/>	<input type="checkbox"/>
Two sets of plans to scale - max size A3 <input type="checkbox"/>	<input type="checkbox"/>

37 Applicant Declaration

If you are supplying commercially sensitive or confidential information, please ensure you mark such information clearly. If the application is made by a corporation or an incorporated association, the person signing the form must occupy a position that is legally entitled to make an application on behalf of the corporation or incorporated association.

I understand that the information provided in and with this application may be disclosed publicly under the *Information Privacy Act 2009, Right to Information Act 2009* and the *Evidence Act 1977*.

I am aware that it is an offence to knowingly provide false or misleading information.

Applicant 1

Name of Individual/Organisation or Agent/Consultant

Name of Signatory *If applicant is an Organisation*

Position *Proprietor, Director, Manager*

Signature

Date

Applicant 2 if applicable

Name of Individual/Organisation or Agent/Consultant

Name of Signatory *If applicant is an Organisation*

Position *Proprietor, Director, Manager*

Signature

Date

Office Use Only

Date received by LAS

LAS details

Contact's name

Phone no.

Fax no.

AR Invoice no.

Fees

Bond *To be included in CARS Invoice*

Conditions attached

Invoice attached

Date sent to CARS

Notes

CARS details

Contact name

Phone no.

Fax no.

Date sent to LAS

Date received from LAS