Flinders Shire Council

34 Gray Street, Hughenden PO Box 274, Hughenden QLD 4821



Email <u>flinders@flinders.qld.gov.au</u>

Website <u>www.flinders.qld.gov.au</u>



	website						
Local Government Act 2009	Entertainment Venues						
7101 2000	Application for Theatre or Place of Amusement Licence						
Local Law 8 (Entertainment Venues)	Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.						
	Application is for						
	⊠ Entertainment Venue Licence Fee \$						
If applicant is a company,	Applicant/s details						
insert company name and ACN / ARBN.	Company name ACN / ARBN						
	Title (eg. Mr, Mrs, Miss etc.)						
	Family name						
	Given names						
	Position Library the information provided in this application to be true and correct.						
	I declare the information provided in this application to be true and correct.						
	Signature Date						
	Title (eg. Mr, Mrs, Miss etc.)						
	Family name						
	Given names						
	Position						
	I declare the information provided in this application to be true and correct.						
	Signature Date						
	Contact details						
Select as applicable.	☐ Business ☐ Private						
	Contact person Postal address						
	Locality / Suburb State Postcode						
	Contact ph. Mobile						
	Contact fax Email						

Business name must be	Business detai	ls				
registered with Fair Trading.	Business name				BN	
	Street address					
	Locality / Suburb			State	Postcode	
Enter postal address if different from street address.	Postal address					
	Locality / Suburb			State Postcode		
	Contact ph.		Mobile			
Real property description - refer to Rates Notice.	Contact fax		Email			
	Lot no.		Reg. plan no.		Parish	
	Nature of entertainment to be provided					
	Days of operation	Hours of op	eration			
	Monday		am	pm to		am pm
	Tuesday		am	pm to		am pm
	Wednesday		am	pm to		am pm
	Thursday		am	pm to		am pm
	Friday		am	pm to		am pm
	Saturday		am	pm to		am pm
	Sunday		am	pm to		am pm
	Type of entertainment / amusement					
	☐ Cinema ☐ Theatre ☐ Concert hall					
	Museum		Art gallery		ic games centre	
	Indoor sports centre		Fair ground		lease specify)	
	Capacity of venue	Seating			anding	
	Toilets	No. male		INC	o. female	
	Owner/s conse	ent				
This is the name and address of the owner/s of the premises.	Name					
If there are additional owners, please attach	Street address					
additional owner information to this form.	Locality / Suburb			State	Postcode	
	Contact ph.		Mobile			
	Contact fax		Email			
	I, being the owner of the property described in this application, hereby consent to the afore mentioned applicant/s making this application.					
	Signature Date					

Lodgement							
Please attach the following:							
1. A plan of the entertainment venue drawn to scale not smaller than one to one hundred (1:100) showing:							
position of exits; a	ind						
 details and drawin 	ngs of buildings and other stru	ctural elements of the enterta	ainment venue.				
2. Details of fire fighting equipment.							
 A certified copy (or other evidence of approval) of any other registration, licence, permit or other law that may be required to operate this business. 							
 A copy of the additional owner/s consent (if applicable). This consent must state the applicant/s name, the premises to which the application refers, provide details regarding the owner/s consent to the application and b signed by the owner/s. 							
Please note: This	application and fe	e MUST be lodged	with your Council				
Privacy Statement							
The Council is collecting your personal information in accordance with current legislation to process your application. The information will only be accessed by authorised council employees. Your personal details will not be disclosed to a third party outside the process of dealing with your application, except where required by legislation (including the <i>Right to Information Act 2009</i>) or as required by Queensland State Government.							
Office use only							
Application fee		Reg. no.					
Receipt code		ID no.					
Authorised officer		Inspection date	/ /				
Recommendation		1					
	1	Rec. no.					
Date		Account property no.					