

Place of Assembly

(Public Health Act 1997 – Sections 76 and 81)

Application for a Place of Assembly Licence – Special Event

Event Details

Name of event

Location of event
..... Postcode

Date of event Start time Finish time.....

Postal address for correspondence
..... Postcode

Emergency contact Telephone

Description of intended use of premises

Number of persons to be accommodated

Other licences issued to the premises.....

Applicant Details

Name of applicant *(must be a natural person)*.....

Name of organisation/business

Postal address for correspondence
..... Postcode

Telephone Mobile phone

Facsimile Email

Fee and Signature

Application Fee: \$140.00

Signature of applicantDate

Documentation that must be attached to application

- Site plan and/or floor plan
- Any information required by the Council for assessment purposes.

**Please lodge your fully completed form and fee with the Council
a minimum of four weeks prior to the event**

OFFICE USE ONLY

Receipt No. Date..... Cashier.....

Capacity of Premises

Council checklist

- Form fully completed
- Form signed
- Form dated
- Public Event Management Plan attached
- Food Safety Management Plan attached
- Further information required Yes/No
- Date requested /...../.....

Details

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