

Footpath Dining Approval

Mackay Regional Council Local Law No. 1 (Administration) 2011
Subordinate Local Law No. 1.2 (Commercial Use of Local Government Controlled Areas and Roads) 2011

<p>IS THIS APPLICATION (PLEASE <input checked="" type="checkbox"/> RELEVANT BOX)</p>	<p><input type="checkbox"/> NEW APPLICATION OR</p> <p><input type="checkbox"/> AMENDMENT – CHANGE TO OPERATION (eg but not limited to, an increase in room numbers). OR</p> <p><input type="checkbox"/> TRANSFER</p> <p>In order for your application to be assessed you must:</p> <ul style="list-style-type: none"> • Complete all relevant sections; • Provide all supporting information referred to on this form, and • Submit with the relevant fee <p>➤ FOR A NEW APPLICATION Complete ALL SECTIONS and provide all supporting information.</p> <p>➤ FOR AN AMENDMENT (CHANGE TO OPERATION) Complete ALL SECTIONS and provide all supporting information.</p> <p>➤ FOR A TRANSFER Complete SECTIONS A AND D.</p> <p>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.</p>																																												
<p>SECTION A</p> <p>Contact person for business if not the applicant and/or if the applicant is a company</p> <p>Current approval holder's name and signature is required if transferring approval</p>	<p>APPLICANT DETAILS</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td colspan="2">Full Name of Applicant/s</td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2">Applicant/s Postal Address</td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2">Trading Name</td></tr> <tr><td colspan="2">ABN</td></tr> <tr><td colspan="2">Business Address</td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2">Real Property Description</td></tr> <tr> <td style="width: 60%;">Business Phone</td> <td>Fax</td> </tr> <tr><td colspan="2">After Hours Phone</td></tr> <tr><td colspan="2">Email Address</td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2">Full Name of Contact Person</td></tr> <tr><td colspan="2">Email Address</td></tr> <tr><td colspan="2">Contact Phone Number</td></tr> <tr><td colspan="2"> </td></tr> <tr style="background-color: #cccccc;"><td colspan="2">If transferring, current approval holder's name and signature:</td></tr> <tr><td colspan="2">Full Name of Current Approval Holder</td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2">Signature of Current Approval Holder</td></tr> <tr><td colspan="2"> </td></tr> </table>	Full Name of Applicant/s				Applicant/s Postal Address				Trading Name		ABN		Business Address				Real Property Description		Business Phone	Fax	After Hours Phone		Email Address				Full Name of Contact Person		Email Address		Contact Phone Number				If transferring, current approval holder's name and signature:		Full Name of Current Approval Holder				Signature of Current Approval Holder			
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SECTION B	OPERATION DETAILS	
	Total area required (eg 4m ²)	
	Is liquor intended to be sold/served in this area ?	
	Is the premises intended to be BYO ?	
	Proposed days of use	
	Proposed times of use per day	
	Number of tables	
	Number of chairs per table	

SECTION C	ATTACHMENTS
	<p>You must provide:</p> <ol style="list-style-type: none"> Proposed plan of the footpath dining area showing:- <ul style="list-style-type: none"> Exact dimensions and distances from any surrounding fixtures and fittings (ie gardens, lamp posts, waste receptacles, benches, culverts and the like). Proposed layout of tables and chairs in relation to the above, and surrounding buildings and the roadway. Copy of each policy of insurance of the applicant which relates to the operation of footpath dining. Details of waste disposal for waste generated by the activity.

SECTION D	APPLICANT CONSENT
	I declare the information provided in this application to be true and correct.
	<p>Signature _____ Date _____</p> <p>Mackay Regional Council is collecting this information in order to process your Application. If required, Council may provide your details to a collection agency that has been employed by Council for the recovery of unpaid fees. In all other circumstances, this information will only be disclosed to a third party with your written authorisation or as required by law.</p>

Office Use Only	
Cashiers Ref No : LC/H&RS/PP _____	Date
Amount	File No
Receipt No	Cashier