

# Place of Assembly

*(Public Health Act 1997 – Section 76 and 81)*

## Application for a Place of Assembly Licence – Special Event (not for profit organisation)

### Event Details

Name of event .....

Date ..... Time .....

Location of event .....

Address .....

..... Postcode .....

Postal address for correspondence .....

..... Postcode .....

Emergency contact ..... Telephone .....

Primary reason for event .....

Anticipated maximum number of persons attending at peak occupancy.....

Number of toilets provided    Male WCs ..... Urinals ..... WHB .....

   Female WCs ..... WHB .....

Other licences issued to the event .....

### Applicant Details

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

Name of non-profit organisation .....

Postal address (for correspondence) .....

..... Postcode .....

Telephone ..... Mobile phone .....

Facsimile ..... Email .....

### Documentation that must be attached to application

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

### Fee and Signature

Application Fee: \$79.00

Signature of applicant ..... Date .....

*Note: the application fee includes an amount to cover a basic inspection of the premises. Any further inspections required for the purposes of assessing the application may require an additional fee.*

**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 .....

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**Council checklist**

- Form fully completed
- Form signed
- Form dated
- Fee paid
- Site/floor plan attached
- Further information required      Yes/No
- Date requested      ...../...../.....

**Details**

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