

East Gippsland Shire Council

273 Main Street (PO Box 1618)
Bairnsdale Vic 3875
Website www.eastgippsland.vic.gov.au
Email feedback@egipps.vic.gov.au
Follow us on Twitter @egsc



Telephone: (03) 5153 9500
Fax: (03) 5153 9576
National Relay Service: 133 677
Residents' Information Line: 1300 555 886
ABN: 81 957 967 765

Place of Public Entertainment Application

This application has a fee of \$299.10

There are some hard words in this form. The hard words are in **blue**. You can read what the words mean on page 2.

Applicant

| | | | | |
|---------------------|--|---------|-----------|--|
| Organisation: | | | | |
| Contact person: | | | Position: | |
| Postal address: | | | Postcode | |
| Phone number: Work: | | Mobile: | | |
| Email address: | | | | |

If applicant not the landowner, written consent is needed from the landowner for the event.

Property details

| | | | | |
|-------------------------------------|--|---------------|---------------|--|
| Street number: | | Street name: | | |
| Lot number: | | LP/PS number: | Volume/folio: | |
| Town: | | | Postcode | |
| Landowners name (if not applicant): | | | | |
| Postal address: | | | Postcode | |
| Phone number: Work: | | Mobile: | | |
| Email address: | | | | |

Event details

| | |
|--|--|
| Name of Event: | |
| Entry fee applicable: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| How many people are planned to be onsite at the event per day, including organisers, staff and helpers? _____ | |
| Have you applied for an event permit: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Event Start Date: ____/____/____ | Event Finish Date: ____/____/____ |
| Event Start Time: _____ <input type="checkbox"/> am <input type="checkbox"/> pm | Event Finish Time: _____ <input type="checkbox"/> am <input type="checkbox"/> pm |

Privacy Statement

The East Gippsland Shire Council asks for details about you to collect rates, approve permits and licences, and run a range of community services. The information you give to us on this form is used only for the reasons set out in the form and is not given to anybody else. Sometimes we may supply details about you to someone else, but only if we are allowed by law, or to protect someone or property.

When information is given out, Council will always try to make sure your privacy is protected in line with the *Privacy and Data Protection Act 2014*. You may ask for more information about Council's Privacy Policy by contacting our Information Privacy Officer on 03 5153 9500 or e-mail feedback@egipps.vic.gov.au

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| | |
|---|-------------------------|
| Brief description of event: | |
| | |
| | |
| | |
| | |
| Number of toilets for this event (show on site plan): | |
| Number of All Access toilets for this event (show on site plan): | |
| Will there be accessible potable drinkable water onsite (show on site plan): | |
| Will there be any tents or marquees over 100m2: <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, please attach occupancy permit for each tent over 100m2) | |
| If yes, name of erector: | VBA Registration Number |
| Company name: | Mobile phone number: |

Please make sure that:

- Occupancy permit for tent or marquees over 100m2 is attached.
- Form is filled in fully and signed
- The correct fee is paid or payment enclosed. This application will not be able to be processed without fee.
- All supporting information or documents are attached including site plan detailing distances from boundaries and other structures, things such as toilet facilities, first aid, temporary structures, entrance/exits, fencing.

Hard Words:

All Access Toilets Special public toilets and restrooms that people with disabilities can use.

LP/PS: Lodged Plan or Plan of Subdivision.

Signature: _____ Date: ____/____/____

Office Use Only:

Reference Number: AP/B2/PP/_____ Method of Payment: Cash Cheque Credit Card Eftpos

Amount Paid: \$_____ Receipt Number: _____ Receipt Date: ____/____/____

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Submitting your application:

| | | |
|-------------------|---|--|
| Mail | Post the signed, completed form together with any applicable fees or copies of any documentation to; PO Box 1618 BAIRNSDALE VIC 3875. | |
| Electronic | Fax to 03 5153 9576 Email to feedback@egipps.vic.gov.au | |
| In Person | Bring the completed form and supporting documents to any of the following locations; | |
| | Service Centre Opening Hours: 8:30am to 5:00pm. Monday to Friday. | Bairnsdale Corporate Centre: 273 Main Street. Lakes Entrance Service Centre: 18 Mechanics Street. Omeo Service Centre: 179 Day Avenue. Orbost Service Centre: 1 Ruskin Street. Paynesville Service Centre: 55 The Esplanade. |
| | Mallacoota Service Centre Opening Hours: Monday and Tuesday 10.00am to 2.00pm Wednesday, Thursday, Friday 2.00pm to 5.00pm | Mallacoota Service Centre: 70 Maurice Avenue |

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