



FORM 1

Application For Public Event Approval

Health Act 1911

HEALTH (PUBLIC BUILDINGS) REGULATIONS 1992

Event Details

Event Name _____

Event Location (Name and Address of Venue) _____

Event Description (Type of Entertainment Provided) _____

Start Time _____ Finish Time _____

Date of Event _____

Is it a Community Event or Commercial Event

Who is the Target Audience Youth (<25 years) Family General

Other _____

Expected Number of Patrons at any one time _____

Details of Event Infrastructure, stages, marquees, electrical etc. _____

Numbers and Types of Toilet Facilities Proposed

Male WC's _____ Hand Basins _____ Urinals (Number or Metres) _____

Female WC's _____ Hand Basins _____

Disabled WC's _____ Hand Basins _____

Are any of these facilities temporary (i.e. portaloos)? _____

Number of Crowd Controllers Proposed _____

Name of Company Supplying Crowd Controllers _____

Parking Arrangements (Where, How directed etc) _____

Items Prohibited from Venue (i.e. Alcohol, food/drink etc)? _____

How are people notified of these restrictions prior? _____

Who will be supplying First Aid? _____

No of first aid attendants? _____

Details of Rubbish Removal and Site Cleaning _____

Types of Refreshments Available (Food/Drinks) _____

(*Please note that all food stalls will require approval from the Shire's Health Services. You may contact them on 9622 6100 for further info)

Emergency Evacuation Plan/Procedures - Please attach documentation to your application.

Site Plan

Please attach site plan showing the layout of the venue and details such as (but not limited to);

- Toilets
- Entry and Exit Points
- Food stalls
- Free Potable Water
- Bar Areas
- Car Parking Areas
- First Aid Post
- Entertainment areas/stages
- Fire equipment

and any other relevant information

Alcohol

- Alcohol Availability Alcohol Free Event
- BYO Alcohol (permission in writing required from land owner)
- Alcohol will be supplied or sold (a Liquor Licence will be required.
 Please contact Liquor Licensing for further information)

Liquor Licensee Contact Details (If alcohol is to be supplied).

Name _____

Address _____

Phone _____

Event Organisers Details

Organiser's Name (Contact Person) _____

Company Name _____

Postal Address _____

Phone _____

