



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 _____

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 _____

Fax _____

Email _____

Web Address _____

Contact During the Event

Name _____

Phone Number (mobile) _____

Reminder – Have you attached?

- Copy of Risk Management Plan (for events with over 5000 people)
- Site plan
- Parking Management plan
- Food Stall applications
- Additional Supporting Information (such as police contact, FESA contact)
- Regulation 18 Noise Exemption Application form
- Emergency evacuation plan
- Copy of public liability insurance
- Liquor Licence approval

Application Fees

	Risk level	
	Low - Medium Risk	High Risk
Community Public Event	<input type="checkbox"/> \$150	<input type="checkbox"/> \$794
Commercial Public Event	<input type="checkbox"/> \$150	<input type="checkbox"/> \$794

Note: These fees are non-refundable.

Signed _____

Name _____ Date _____

PAY IN PERSON

At Shire of Northam Council Office, 395 Fitzgerald Street, Northam during hours 8:30am to 4:30pm Monday to Friday.

PAY BY MAIL

Send completed form together with your cheque or money order; or if paying by credit card complete the section provided on the right and send to Shire of Northam, PO Box 613, Northam, WA 6401.

PLEASE COMPLETE THIS SECTION IF PAYING BY CREDIT CARD

Name as shown on Card

Card Holder Address

..... Signature

Bankcard Mastercard Visa Card

Amount \$ _____ Expiry Date ____/____

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