

<u>FORM 1</u> 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 WC's_____ Hand Basins____ Urinals (Number or Metres)_____ Male Female WC's_____ Hand Basins_____ Disabled WC's Hand Basins Are any of these facilities temporary (i.e. portaloo's)? Number of Crowd Controllers Proposed_____ Name of Company Supplying Crowd Controllers_____ Parking Arrangements (Where, How directed etc)

Items Prohibited from	n Venı	ue (i.e. Alcohol, food/drink etc)?
How are people notif	fied of	these restrictions prior?
Who will be supplyin	a First	: Aid?
		al and Site Cleaning
		ailable (Food/Drinks)
		will require approval from the Shire's Health Services. You may contact them on 9622
Emergency Evacua	ition P	Plan/Procedures - Please attach documentation to your application.
		Site Plan
ToiletsEntry and ExFood stallsFree PotableBar Areas	it Poin	 Entertainment areas/stages Fire equipment
and any other releva	nt info	rmation
		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)
-		Details (If alcohol is to be supplied).
Phone		
		Event Organisers Details
Organiser's Name (0	Contac	et Person)
Company Name		

Fax									
Email									
Web Address									
Contact During the Even	t (if different to	o organiser)							
Name									
Phone Number (mobile)									
	Land or Bui	lding Owner A	uthorisa	tion					
I,this event relates to and I a approved by the Council.									
Signed:	Da	F	Phone:						
	Reminde	er – Have you a	ttached	?					
□ Copy of Risk Mana	gement Plan (f	or events with o	ver 5000	people)					
□ Site plan			□ Emergency evacuat				tion plan		
□ Parking Manageme	ent plan		Сору	by of public liability insuranc				се	
□ Food Stall applicati	ons		Liquor	Licence a	ce approval				
□ Additional Supporti	ng Information	(such as police	contact,	FESA cor	ntact)				
□ Regulation 18 Nois	e Exemption A _l	oplication form							
	ı	Application Fee	S						
	Ris	sk level							
	Low Risk	Medium Ris	k H	High Risk					
Community Public Event	□ \$150	□ \$150		□ \$832 □ \$830					
Commercial Public Event	□ \$150	□ \$150		□ \$832	<u>'</u>				
Note: These fees are nor Signed				_					
Name	Date								
				_					
Y IN PERSON	DI EASE COMDI ET	TE TUIS SECTION IS	DAVING D	V CREDIT C	ABD				
Shire of Northam Council Office, 5 Fitzgerald Street, Northam during urs 8:30am to 4:30pm Monday to day.	PLEASE COMPLETE THIS SECTION IF PAYING BY CREDIT CARD Name as shown on Card Card Holder Address								
Y BY MAIL	Signature Vice Cord								
nd completed form together with ur cheque or money order; or if	Bankcard								
ying by credit card complete the ction provided on the right and send									
Shire of Northam, PO Box 613, rtham, WA 6401.									