

EVENT APPLICATION FORM

Submit your completed application and all supporting attachments (including an event site plan) to the Shire of Plantagenet Administration office at least 4 weeks prior to your event.

The application fee is to be paid upon submission of application.

For more information on each section please refer to the Event Information Pack at www.sop.wa.gov.au and refer to the

WA Department of Health Guideline for Concerts and Events for all event requirements

1. CONTACT DE	TAILS			
Contact Person				
Name of				
Organisation				
Organisation				
Address				
Contact Number				
(mobile number)				
Email Address				
ABN:		Are you registered for GST?	Yes	No
Is your Organisation a Not for Profit Entity?		Yes	No	<u>.</u>

2. EVENT DET	AILS			
Event Name				
Event Dates	Start:		Finish:	
Event Times	Start:		Finish:	
Bump In	Time starts:			
Bump Out	Time concludes:			
Event location				
Estimated total attendance:		Estimated attendance at any one time:		
Brief description of event and activities planned (food, bands, performers, rides etc)				



3. ENVIRONMENTAL HEALTH REQUIREMENTS		
Is the event to be held on Council managed or owned land?		
If yes, please contact the Administration office on 9892 1111 to		
secure the venue booking and pay any applicable bond.	Yes	No
Will food be sold at this event?		
Please provide a list of food vendors, including a Food Act 2008	Yes	No
food business registration certificate for all food vendors		
Will alcohol be sold or consumed at this event?		
If yes, you will need to provide a copy of your approved Liquor	Yes	No
License and plan with your application.		
Will there be any temporary structures erected as a part of the		
event (ie fencing marquees, stages, bouncy castle)?		
Depending on the size of the structure a structural certification may be required.	Yes	No
If yes, please provide a description of the marquees, including size		I
Will there be amplified noise (ie speakers, live bands, generators)?	Yes	No
If yes, please describe the type of equipment.		
Will there be fireworks /pyrotechnics?	Yes	No
Please attach a copy of your neighbour notification letter		
How many public toilets exist on site permanently?	Male	Female
How many temporary toilets will you be supplying for the duration of the event?	Male	Female

Do you require additional bins?		How many?	
Additional bins will be charged as per the Council Fees	Yes		No
and Charges			
Will your event require pegs to be driven into the			
ground?	Yes		No
If yes, please indicate this on the event site plan.			
Do you require connection to the Shire's water supply?	Yes		No
Do you require connection to the Shire's electrical Yes			No
power?			
Will you be providing your own power/generators?			
If yes, please provide details on the event site plan.	Yes		No
If yes, please describe the electrical equipment.			



5. EMERGENCY SERVICE REQUIREMENTS		
Have the following emergency services been notified of this event?		
Police (Mount Barker station 9851 5200)	Yes	No
Fire Brigade (Mount Barker station 9851 1774)	Yes	No
Hospital (Mount Barker 9892 1222)	Yes	No
St John Ambulance	Yes	No
Will your event have crowd control?	Yes	No
Does your event have Emergency Evacuation Procedures in Place? If yes, a copy of the procedure must be submitted with the application	Yes	No
Who will communicate and coordinate any emergency service response	onse?	
Name:		
Mobile number:		
Will First Aid be provided at your event? Please provide the names and accreditation of your first aid providers. It is recommended that your first aiders have only that role	Yes	No

6. TRAFFIC MANAGEMENT		
Does your event require road closures? If yes, an accredited traffic management plan must be submitted with your application after consultation with the Shire's Executive Manager of Works and Services	Yes	No
Does your event require temporary car parking? If yes, please indicate area of temporary car parking on the site plan.	Yes	No

As the event organiser, I acknowledge that the information in this application is true and correct. I accept that the Shire of Plantagenet has fees for events which are payable at the time of lodging the application.

Applicant Name:	
Signature:	Date: