

ITINERANT TRADERS APPLICATION FORM

Version No:	1
Issued:	Oct 2011

ORGANISATION:				
CONTACT PERSON:				
CONTACT:	Phone:			
CONTACT ADDRESS:				
DATE OF USE (multiple	Date 1:	Date 2:	Date 3:	
dates may be applied for on this permit)				
TIME OF TRADING (operating hours to be				
between 10.00am and 10.30pm)				
DESCRIPTION OF				
ACTIVITY (wedding, reunion, event)				
DESCRIPTION OF LAND (foreshore location, parks)				

Conditions of Permit

- The reserves available to be used are determined by Council's Community Land Management Plans.
- The area is not to be fully obstructed with appropriate pedestrian access to be maintained around the site.
- Reasonable directions from the police or an authorised Council Officer will be adhered to.
- No damage will be caused to plants, flower beds, irrigation systems, structures or improvements located within the vicinity of the site.
- All rubbish and other material to be removed from the area, or its locality, at the conclusion of the activity.
- Organisations/individuals must have regard for all relevant laws and legislation and must comply with all such laws and legislation (ie Dry Area Legislation, Food Act, Lotteries Act, etc).



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Public/Products Liability

If you are an occasional hirer (less than 5 times per year) then you may be eligible to be covered by Council's Public Liability Insurance. This is in addition to the permit fee.

Public Liability Insurance cover of a minimum \$10 million per claim is required. If you have this insurance cover, proof of such cover must accompany this application.

Declaration by Hirer/s

I confirm I have been issued with a copy of this permit and I hereby agree to the terms and conditions as outlined.

Signed for and on behalf of the above organisatio	n/individual by:	
Name		
Signature		
OFFICE USE OF	NLY	
Occasional Hirers Insurance required: Proof of Public Liability Insurance provided:	Yes/No Yes/No	
Fees:		
Application Fee:		
Occasional Hirers Insurance cover:	\$28.00 (GST Inc)	
<u>Total Fees</u> :		
Paid: Yes/No Receipt No:		
PERMIT GRANTED BY:		
Name:		
Signature:		
Date:		

COPY OF PERMIT GIVEN TO APPLICANT Yes/No