

Mail: PO Box 156, Longford 7301
Phone: (03) 6397 7303
Fax: (03) 6397 7331



Location: 13 Smith Street, Longford
email: building@nmc.tas.gov.au

PLACE OF ASSEMBLY (PERMANENT AND TEMPORARY)

Public Health Act 1997
Sections
76 & 81

Application for a Place of Assembly Licence

Application for Renewal of a Place of Assembly Licence

APPLICANT DETAILS:

Applicant: Title: First Name: Surname:
Address: Phone No:
 Mobile No:
Email address: Fax No:

PREMISES DETAILS:

Trade name of premises: Phone No:
Address of Premises: Mobile No:
 Fax No:
Postal address for correspondence: Mobile No:
 Fax No:
Emergency Contact: Phone No:
Description of intended use of premises:
Number of persons to be accommodated:
Other licences issued to the premises:
Name of Event:
Date of Event:

APPLICATION FEE AND SIGNATURE:

FEE

Please contact Council's Health Department on (03) 63977303 or email health@nmc.tas.gov.au for relevant fees

Applicant: Name: (Print) Signed: Date:

OFFICE USE ONLY:

Receipt No: Date Issued:

DOCUMENTATION REQUIRED:	
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- Site plan and / or floor plan with detailed legend that includes the following:
- Event Boundaries, Barriers and Amusement Locations
- Public Entry, Exits, Parking, Seating and Rubbish Bin Locations
- Smoking Areas, Alcohol Serving and Security Locations
- Fire Fighting Equipment, First Aid, Lost Kids and Lost Property Locations
- Location of Temporary Structures (if applicable)
- Power, Gas and Water Supply (including Potable Water if applicable)
- Shade Facilities
- Number of hand basins available _____
- Location and Number of male, female, and accessible toilets available:
 Male: _____ Female: _____ Accessible Toilet: _____

Copies of:

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Landowner Permission <input type="checkbox"/> Temporary Occupancy Permit (if applicable) <input type="checkbox"/> Risk Management Plan <input type="checkbox"/> Emergency Management Plan (inc first aid & fire safety) <input type="checkbox"/> Private Drinking Water Management Plan (if applicable) | <ul style="list-style-type: none"> <input type="checkbox"/> List of Food and Beverage Vendors (Copy of Current Food Licence is Required) <input type="checkbox"/> Public Liability Insurance Certificate <input type="checkbox"/> Smoke Free Management Plan & approval from Department of Health & Human Services <input type="checkbox"/> Waste Management Plan <input type="checkbox"/> Traffic Management Plan (if applicable) |
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COUNCIL CHECKLIST:	Internal Use Only
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- Form fully completed
- Form signed and dated
- Fee Paid
- Site/floor plan attached
- Supporting documentation provided
- Date information requested

OTHER DETAILS:	
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PRIVACY STATEMENT

The Northern Midlands Council abides by the *Personal Information Protection Act 2004* and views the protection of your privacy as an integral part of its commitment towards complete accountability and integrity in all its activities and programs.

Collection of Personal Information:

The personal information being collected from you for the purposes of the *Personal Information Protection Act, 2004* and will be used solely by Council in accordance with its Privacy Policy. Council is collecting this information from you in order to process your building application.

Disclosure of Personal Information:

Council will take all necessary measures to prevent unauthorised access to or disclosure of your personal information. External organisations to whom this personal information will be disclosed as required under the *Building Act 2000*. This information will not be disclosed to any other external agencies unless required or authorised by law.

Correction of Personal Information:

If you wish to alter any personal information you have supplied to Council please telephone the Northern Midlands Council on (03)6397 7303. Please contact the Council's Privacy Officer on (03)6397 7303 if you have any other enquires concerning Council's privacy procedures.