

PAROO SHIRE COUNCIL

Application for a Prescribed Activity Subordinate Local Law No. 1 (Administration) 2011

| PERMIT TYPE | | | | | | |
|---|--|--|--|--|--|--|
| Public place activities that are prescribed activities: | | | | | | |
| An invitation-only ceremony, party or celebration attended by more than 50 people | | | | | | |
| A cake stall, sausage sizzle, car wash or similar fundraiser held on no more than 1 day | | | | | | |
| A display, demonstration or information booth | | | | | | |
| A right of occupation and use of a specified part of a park or reserve by a sporting association | | | | | | |
| Category 1 activities: | | | | | | |
| Alteration or improvement to local government controlled areas and roads | | | | | | |
| Commercial use of local government controlled areas and roads | | | | | | |
| Establishment or occupation of a temporary home | | | | | | |
| Installation of advertising devices | | | | | | |
| Keeping of animals | | | | | | |
| Undertaking regulated activities regarding human remains | | | | | | |
| Undertaking regulated activities on local government controlled areas and roads If road closure is required, please attach map showing area to be closed | | | | | | |
| ategory 2 activities: | | | | | | |
| Operation of camping grounds | | | | | | |
| Operation of caravan parks | | | | | | |
| Operation of cemeteries | | | | | | |
| Operation of public swimming pools | | | | | | |
| Operation of shared facility accommodation | | | | | | |
| Operation of temporary entertainment events | | | | | | |
| EW DEDMIT OD DENEWAL Note: Food Hygiene Registration must be transferred concurrently | | | | | | |

| New Permit OK Renewal Note. Food Hygiene Registration must be transferred concurrently. | | | | | |
|---|----------------|--|--|--|--|
| New permit Renewal of permit | | | | | |
| Transfer of permit: | Permit number: | | | | |
| Currently in the name of: | | | | | |

ACTIVITY *Please specify/list the activity to be undertaken. Please attach a more detailed description if required.*



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| APPLICANT/S DETAILS | | | | |
|--|-----------|-------|--|--|
| Mr/Mrs/Ms/Miss (please circle) or Other (please specify preference): | | | | |
| Family name: | Given nam | ne/s: | | |
| | | | | |

SECOND APPLICANT/S DETAILS (*if applicable*)

| Mr/Mrs/Ms/Miss (please circle) or Other (please specify preference): | | | | | |
|--|--|---------------|--|--|--|
| Family name: | | Given name/s: | | | |

| CONTACT DETAILS | | | | | | |
|---------------------|--|--------|--|------------|--|--|
| RESIDENTIAL ADDRESS | | | | | | |
| Street: | | | | | | |
| Locality/suburb: | | State: | | Post code: | | |
| POSTAL ADDRESS | | | | | | |
| Street/PO Box: | | | | | | |
| Locality/suburb: | | State: | | Post code: | | |
| Phone: | | Fax: | | | | |
| Mobile: | | Email: | | | | |

| OWNER'S CONSENT Proprietor or Director details. | | | | | |
|--|--|--------|--|------------|--|
| Name: | | | | | |
| Address: | | | | | |
| Locality/suburb: | | State: | | Post code: | |
| Business phone: | | Email: | | · · · · | |

I/we being the owners of the property described in this application hereby consent to the above mentioned applicant making application for a licence to operate Prescribed Accommodation on this property.

Signature

Date

| PUBLIC LIABILITY INSURANCE (MINIMUM \$20 MILLION COVER) Note: a copy of your Public Liability Insurance Policy must be attached. | | | | | | |
|--|--|---------------------|--|---|---|--|
| Name of insurance company: | | | | | | |
| Policy number: | | Policy expiry date: | | / | / | |



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ATTACHMENTS

1. A Site Plan to a scale of 1:100 is required to be attached to this application

- The scope which extends:
 - From the kerb's edge, the full width of the footpath, to the frontage of the building; and
 - From within 2 metres of one adjoining premises, the full length of the property frontage, to within 2 metres beyond the other adjoining premises.
- The Site Plan shall show:
 - The boundaries of the site, the outline of buildings, and the use of adjoining buildings;
 - The area (including dimensions) intended to be used for outdoor dining (shown in red) and the location of all proposed outdoor dining facilities, as defined in Section C of this form; and
 - Any trees, fire hydrants, transformers, telephone booths, mail boxes, bus seats and shelters, traffic signal boxes, fixed rubbish bins, pillars and posts (supporting signs or other objects) and other obstructions.

2. Photographs

- The following shall be attached to the application:
 - A colour photograph of the site frontage and proposed area to be used for outdoor dining; and
 - A photograph (or brochure) detailing furniture, accessories and fittings intended to be placed on the footpath.

3. Map

• If a road closure is required, a map showing the area to be closed must be attached.

A minimum of five business days prior to date of activity is required to process the application.

Please return the form to and/or for more information contact:

| Paroo | Shire Council |
|-------|---------------|
| - | |

| Phone: | (07) 4655 8400 | Email: | council@paroo.qld.gov.au |
|----------|---|------------|--|
| By post: | Attn: Application for a Prescribed Activity | In person: | Civic and Community Enterprise Centre (CCEC) |
| | Paroo Shire Council | | 49 Stockyard St |
| | PO Box 75 | | Cunnamulla Q 4490 |
| | Cunnamulla Q 4490 | | |

| OFFICE USE ONLY | | | | | | |
|---------------------|--|-----------------------|--|--|--|--|
| Fee: | | Reg no.: | | | | |
| Receipt code: | | ID no.: | | | | |
| Authorised officer: | | Inspection date: | | | | |
| Recommendation: | | | | | | |
| | | | | | | |
| Recommendation no.: | | | | | | |
| Date: | | Account property no.: | | | | |

The Information collected in this form will be used by Council for a lawful purpose directly related to the functions and activities of the Council. Your personal details will not be disclosed to a third party outside the process of dealing with your application, except where required by legislation (including the Right to Information ACT 2009) or as required by the Public Records Act 2002.