## Place of assembly licence application



## When to use this form

Use this form if you need to apply for a place of assembly licence. You will need to apply for a licence if your event:

- will have 1000 people or more in attendance at any one point and
- has a duration of 2 or more hours and
- · will be held outdoors

For your application to be considered please include the supporting documents listed below:

- 1. Event site plan (required)
- 2. Smoke free management plan (as approved by the Department of Health) (required)
- 3. Event program (if applicable)
- 4. Noise management plan (if applicable)
- 5. Risk management plan (if applicable)
- 6. List of food and drink stalls (if applicable)
- 7. Temporary Occupancy permit (if required)
- 8. Traffic management plan (if required)

Before you submit your application please read the information sheet for other considerations and information. This may include road closures, the sale of food or alcohol and also the number of male and female toilets that will need to be provided.

If you are not sure if you need to apply for a licence, have any questions or would like further information you can contact as at <a href="mailto:coh@hobartcity.com.au">coh@hobartcity.com.au</a> or telephone <a href="mailto:03.6238.2711">03.6238.2711</a>.

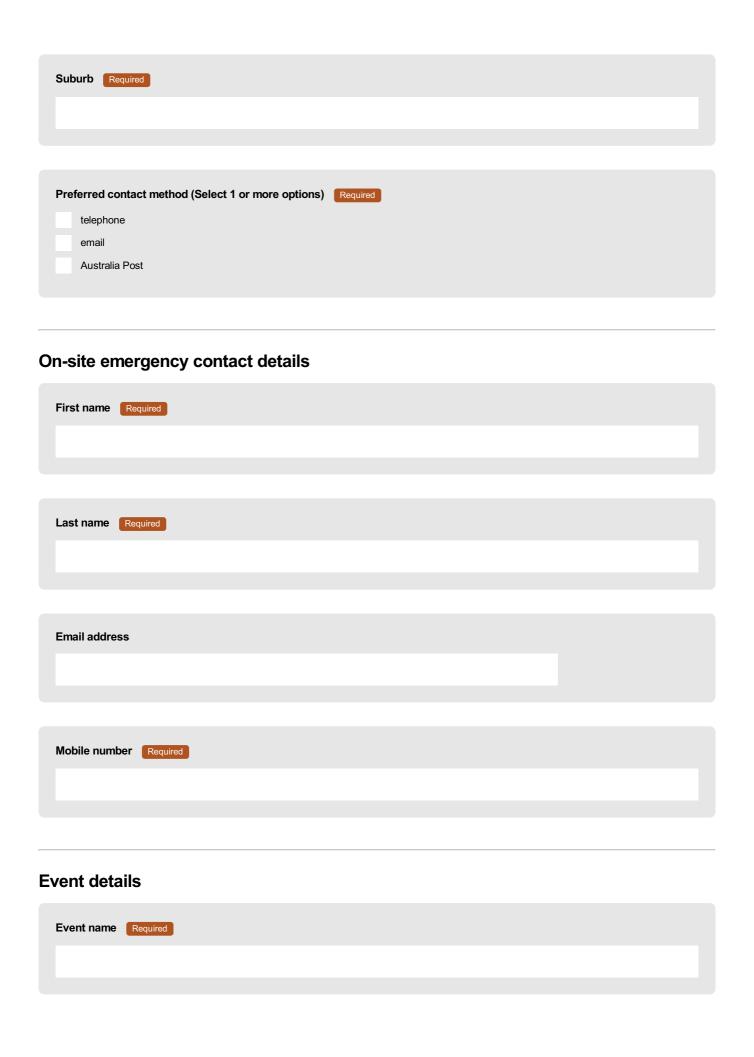
## **Applicant's details**

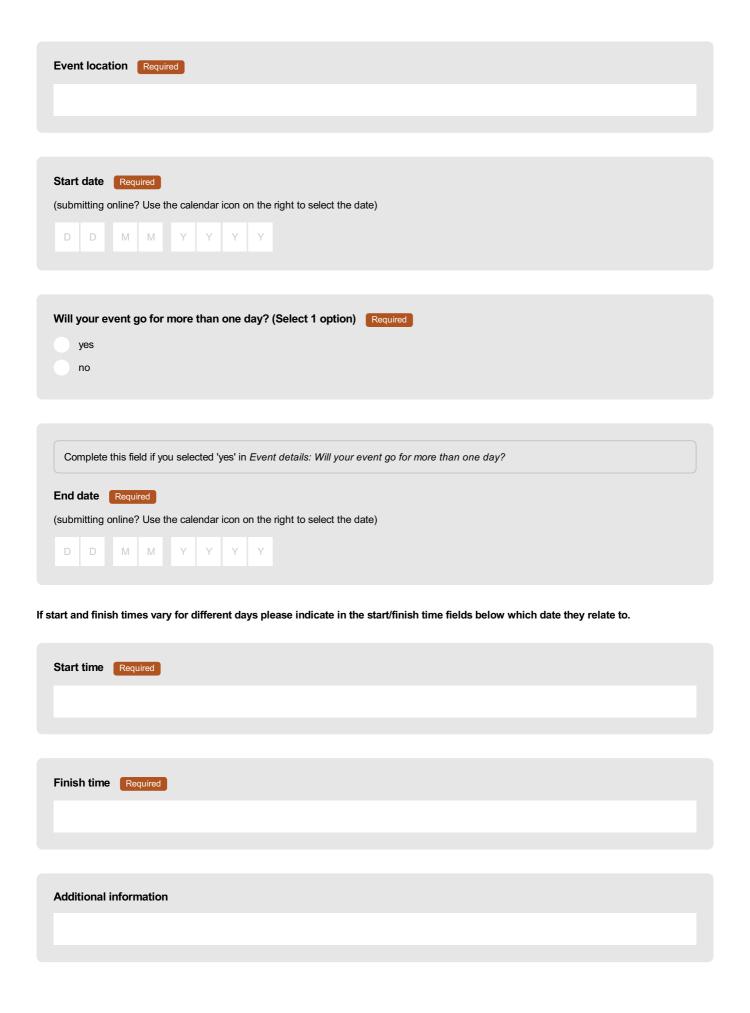
I am applying as a: (Select 1 option) Required
charity organisation
school
commercial organisation or business
What is the name of the charity/school/commercial organisation or business? Required

I have read and understand the place of assembly information sheet which includes the sanitary facilities guidelines and the noise management plan requirements.

(Select 1 option)	Required		
yes			
no			

First name Required
Last name Required
ABN (if a registered company)
Date of birth Required  D D M M Y Y Y Y
Email address Required
Telephone number Required
Unit/Street number Required
Street name Required





Number of unisex toilets (total) Required
Number/length of urinal(s)
Number of hand wash basins Required
Number of accessible toilets Required
Maximum number of people attending at any one time (including staff and volunteers)
Describe any activities that could generate noise, odour or other pollutants.
Do you intend to erect any temporary structures e.g. tents, marquees, stages, light towers etc. (Select 1 option) Required
yes
The information in the field below applies if you selected 'yes' in Event details: Do you intend to erect any temporary structures e.g. tents, marquees, stages, light towers etc.

Your event may require a Temporary Occupancy Permit from a Building Surveyor. Please provide your Building Surveyors details below. If you are not sure whether this requirement applies for your event, please contact our Environmental Health team on 6238 2711.

Con light	nplete this field if you selected 'yes' in Event details: Do you intend to erect any temporary structures e.g. tents, marquees, stages, towers etc.
Full n	name Required
Con light	nplete this field if you selected 'yes' in Event details: Do you intend to erect any temporary structures e.g. tents, marquees, stages, towers etc.
Telep	phone number Required
ousti	c engineer details
Full n	
rull II	
Telep	hone number
(Sele	ct 1 or more options)
- 1	give permission for City of Hobart officers to contact the acoustic engineer and discuss the information in our plan.
	orting documentation
part of	your application please make sure you have attached your supporting documentation below.
1. Eve	ent site plan Required
_	Please attach all files to the end of this form before submitting it.

2. Smoke free management plan (as approved by the Department of Health)  Required  Please attach all files to the end of this form before submitting it.
3. Event program (if applicable)  Please attach all files to the end of this form before submitting it.
4. Noise management plan (if applicable)  Please attach all files to the end of this form before submitting it.
5. Risk management plan (if applicable)  Please attach all files to the end of this form before submitting it.
6. List of food and drink stalls (if applicable)  Please attach all files to the end of this form before submitting it.
7. Temporary occupancy permit (if applicable)  Please attach all files to the end of this form before submitting it.
8. Traffic management plan (if applicable)  Please attach all files to the end of this form before submitting it.
9. Any additional information  Please attach all files to the end of this form before submitting it.

## **Declaration**

I have attached the following documentation that must accompany my application: (Select 1 or more options)
1. Event site plan Required
2. Smoke free management plan (as approved by the Department of Health) Required
3. Event program (if applicable)
4. Noise management plan (if applicable)
5. Risk management plan (if applicable)
6. List of food and drink stalls (if applicable)
7. Approval for your events COVID - 19 safety plan (if applicable)
8. Temporary occupancy permit (if applicable)
9. Traffic management plan (if applicable)
In making this application: (Select 1 or more options)
I declare that the information on this application is true, accurate and complete. Required
I acknowledge that this application is not valid and assessment of the application will not commence until all application fees are paid in full. Required
I acknowledge and agree that if an email address is provided on this application I consent pursuant to Section 6 of the Electronic Transactions Act 2000 to the Council using that email address as a method of contact and for the provision of information by the Council.  Required
I agree that by typing my name below I have signed this application. Required
Name of signatory Required
Date Required Required
(submitting online? Use the calendar icon on the right to select the date)
D D M M Y Y Y
For information on how Council manages, handles and protects personal information it collects please refer to the Privacy Statement and Policy