

Trading in Public Places Local Law 2014

Application for outdoor dining permit with associated permanent structure

Details of applicant					
Surname:	Given name:				
Residential Address:					
Suburb:	Postcode:				
Telephone: H	M				
Email:					
Details of Business					
Business name:					
ABN:					
Business address:					
Suburb:	Postcode:				
Postal address:					
Email:					
Telephone:	Fax:				
Proposed hours of operation					
Monday:	_ Friday:				
Tuesday:	Saturday:				
Wednesday:	Sunday:				
Thursday:	Public Holidays:				
Details of proposed outdoor dining are	ea				
Length (m): Width (m):					
Number and description of tables and chairs, including materials and dimensions. To be removed when outdoor dining area not in operation:					
Number and description, including material and dimensions, of any other temporary structures. To be removed when outdoor dining area not in operation:					
Description of any permanent structures. To remain when outdoor dining area not in operation (please refer to Parklets and Outdoor Dining Structures Policy and					

Guidelines):



Details of public liability insurance (minimum cover \$20 000 000)								
Name of company/broker:								
Policy number: Expiry date:								
The policy must be in the joint names of the City and the Applicant and indemnify the City against any claim for damages which may arise in, or out of, construction, maintenance, use or removal of the Works.								
To be submitted with this application:								
1	1 A scale plan (e.g. 1:50) of the proposed outdoor dining area showing the:							
	(a)	location a	nd dimension of th	e proposed dining area				
	(b)	boxes and	·	umbrellas, wind blocks, pla ary structures proposed to ea				
	(c)							
	within the dining area (property owner support required)							
	(d)	1.5 metre	metre wide clear passage to allow pedestrian flow					
	(e)	any existir	ng features (street	trees, benches, bus stops	etc.)			
2 Colour photographs of the tables, chairs and any other structures to be set up in the dining area.								
3	A copy of the current public liability policy, in joint names of the City and the Applicant.							
4	Payment	Payment of the application fee.						
This form must be completed in full and submitted with all of the above mentioned items. Incomplete applications will be returned without assessment. If you have any queries, please contact the city on 9237 9222.								
Sig	nature of	landowner	<u> </u>	Date:				
Signature of applicant: Date:								
OFFICE USE ONLY								
1	Applicatio	n:	☐ Approved	□ Not approved				
1	Authorised	d Person:		Date:				