

## **Trading in Public Places Local Law 2014**

Application for street trading permit

Details of applicant				
Surname:	Given name:			
Residential Address:				
Suburb:	Postcode:			
Telephone: H	M			
Email:				
<b>Details of Business</b>				
Business name:				
ABN:				
Business address:				
	ode:			
Postal address:				
Telephone:	Fax:			
Email:				
Details of proposed street trading area				
Specify the number of assistants to be en	gaged in trading:			
Specify the location for which the permit is	s sought:			
Specify the proposed days and hours of trading:				
Specify all goods proposed to be displayed	ed or sold in the street trading area:			
Specify any stands, tables or any other st area:	ructures to be used in the street trading			



Details of public liability insurance (minimum cover \$20 000 000)					
Naı	me of company/brok	er:			
Policy number: Expiry date:					
*Th	e rights and interest	s of the City of Subiaco	n must be noted on the policy.*		
То	be submitted with t	this application:			
1	•	•	all, table, stand, umbrella, ocated in the street trading area.		
2	A copy of the current rights and interests.		noting the City of Subiaco's		
3	Payment of fees. Ple	ease refer to the sched	lule of fees.		
This form must be completed in full and submitted along with all of the above mentioned items. Failure to do so will delay the assessment of your application.					
Sig	nature of applicant:		Date:		
OFFICE USE ONLY					
	Application:	☐ Approved	☐ Not approved Date:		
P	Authorised Person				