



Trading in Public Places Local Law 2014 Transfer of outdoor dining permit

The transferee named below applies for the transfer of the permit to carry on the Outdoor Dining area at the following food business.

Food business details

Food business name: _____

Address: _____ Suburb: _____

Telephone: _____ Fax: _____

Business postal address: _____

Suburb: _____ Postcode: _____

Details of current permit holder

First name: _____ Surname: _____

Details of transferee

First name: _____ Surname: _____

Residential address: _____

Suburb: _____ Post code: _____ Telephone: _____

Email: _____ Fax: _____

Proposed hours of operation

Monday: _____ Friday: _____

Tuesday: _____ Saturday: _____

Wednesday: _____ Sunday: _____

Thursday: _____ Public Holidays: _____

Details of proposed outdoor dining area

Length (m): _____ Width (m): _____ Area (m²): _____

Number of tables: _____ Number of chairs: _____

Description of tables and chairs, including materials and dimensions:

Number and description, including material and dimensions, of any other structures:

Details of public liability insurance (Minimum Cover \$20,000,000)

Name of company/broker: _____

Policy number: _____ Expiry date: _____

The City of Subiaco must be noted on the policy for its rights and interests.

To be submitted with this application

- 1 A scale plan (eg.1:50) showing any changes to the current approved outdoor dining area (if different to existing layout)
- 2 Colour photographs of tables, chairs and any other structures to be set up in the outdoor dining area (if different from those approved under the current licence).
- 3 A copy of the current public liability policy, noting the City of Subiaco for its rights and interests.
- 4 Payment of \$50.00 transfer fee

Please be advised that this form must be completed in full and submitted along with all of the above mentioned items. An outdoor dining permit will not be issued unless all requested information is provided.

It is an offence to operate an outdoor dining area without a valid permit

Signature of transferee: _____ Date: _____

Signature of
current permit holder: _____ Date: _____

OFFICE USE ONLY		
Application:	<input type="checkbox"/> Approved	<input type="checkbox"/> Not approved
_____	Date: _____	
Environmental Health Officer		