



# Central Goldfields Shire Council

## Event Permit Application Form

Part 2 A



# Procedure for Permit Application

Central Goldfields Shire Council (CGSC) requires organisations planning an event within the Shire to complete and submit an application to ensure the event complies with all local, state and federal legislative requirements.

The Council welcomes and supports applications from local community-based non-profit organisations, which add vibrancy, pride, involvement and participation in the community.

This Event Permit Application Form requires organisations to provide detailed information to protect the interests of the community organisation, its office-bearers and members, CGSC and the general public.

For assistance or further information please contact:

CGSC Coordinator Events & Volunteer Development

Alisha Chadwick

PO Box 194, Maryborough, VIC 3465

Email: [mail@cgoldshire.vic.gov.au](mailto:mail@cgoldshire.vic.gov.au)

Phone: 0408 326 157

This application is solely for events conducted in the CGSC and must be submitted to CGSC at least 8 weeks prior to the projected event.

## This set of Forms comprises:

### PART 1. Event Permit Application Guide

This guide is used to assist organisers with completing the Event Application Form

### Part 2. Application Forms to be completed

<b>A. Event Permit Application Form</b>	<input type="radio"/> Yes	<input checked="" type="radio"/> No	
<b>B. Indemnity Form</b>	<input type="radio"/> Yes	<input checked="" type="radio"/> No	
<b>C. Risk Management Plan Form</b>	<input type="radio"/> Yes	<input checked="" type="radio"/> No	
<b>D. Event Emergency Management Plan Form</b>	<input type="radio"/> Yes	<input checked="" type="radio"/> No	
<b>E. Application guide to close VicRoads road</b>	<input type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> N/A

**Central Goldfields Event Permit** - After the above documents are received, signed off by the relevant departments or agencies and all other relevant permits are issued then, a Central Goldfields Shire Council Events Permit will be issued.

Event organisers are encouraged to provide images and an outline of the event with this Application. CGSC can promote the event on its website and social media. Brochures promoting the event can be provided to the Central Goldfields Visitor Information Centre.

Requests for funding can be submitted through the Community Grants Program each year.

Requests for the Mayor or Councillor to officially open or launch the event can be directed to [mail@cgoldshire.vic.gov.au](mailto:mail@cgoldshire.vic.gov.au)

**Part 2 Section A: Event Application Form**

**SECTION 1: Event Information**

<b>Name of Event:</b>			
<b>Type of Event</b>	<input type="checkbox"/> Commemoration	<input type="checkbox"/> Ceremony	<input type="checkbox"/> Celebration
	<input type="checkbox"/> Community Gathering	<input type="checkbox"/> Community Market	<input type="checkbox"/> Other
<b>A brief description of the event:</b>			
<b>Event Location</b>	Street Address: Town: Postcode:		
<b>Is the proposed event location a council owned facility, park or road?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No <i>(please advise the landowner below)</i>	
<b>Has the venue owner granted permission to use the site for this purpose on the proposed date/s?: Please provide a copy of written permission</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**SECTION 2: Applicant Details**

<b>Organisation:</b>			
<b>Contact person:</b>			
<b>ABN (if applicable):</b>			
<b>Preferred contact method</b>	<input type="checkbox"/> Postal	<input type="checkbox"/> Telephone	<input type="checkbox"/> Mobile
	<input type="checkbox"/> Email		
<b>Postal Address:</b>		<b>Postcode:</b>	
<b>Telephone:</b>		<b>Mobile:</b>	
<b>Email:</b>			
<b>Is the applicant a not-for profit entity?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>Is the applicant a registered incorporated body?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**SECTION 3: Event Details**

<b>Event Times</b>	<b>Set up details</b>	Date:	Time:
	<b>Event start details</b>	Date:	Time:
	<b>Event finish details:</b>	Date:	Time:
	<b>Pack up details</b>	Date:	Time:
<b>Anticipated number of people attending this event?</b>			
<b>Entry to the event:</b>	<input type="checkbox"/> Free	<input type="checkbox"/> Ticketed	<input type="checkbox"/> By donation

## SECTION 4: Site planning

Please include on the site map (page 9) the proposed placement of all existing and temporary equipment

Will any temporary structures be erected for the event? For example marquees, stages or grandstands  Yes  No (please proceed to **Section 5**)

Will there be easy up gazebos erected? Erected size 6m x 3m or 3m x 3m  Yes  No

Will any temporary structure, tent, marquee, stage, booths have a floor area over 100m<sup>2</sup>?  Yes  No

Will any temporary stages or platforms exceed 150m<sup>2</sup> in floor area?  Yes  No

Will any temporary seating stands (grandstands) hold more than 20 persons?  Yes  No

If you answer yes to any of the questions above you will need to contact the Building Department 5461 0610 to obtain a Siting Approval. Hired buildings or structures should already have an Occupancy Permit. Ask for a copy of the permit and carefully read the conditions.

## SECTION 5: Volunteers

Will you be engaging volunteers at the event?  Yes  No (please proceed to **Section 6**)

Do you have Volunteer Workers Personal Accident Insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Should a volunteer injure themselves, personal accident cover will protect your organisation if there is a claim, and provide cover for the volunteer.
Are you and your volunteers aware of the Victorian Occupational Health and Safety Act of 2004?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Volunteers must consider their own safety and others' safety while at work. This includes following Health and Safety guidelines and procedures and wearing protective clothing or using equipment provided. Volunteers must immediately report any injury, near miss, damaged equipment or any other hazard observed to the Event Organiser.
Will your volunteers be in contact with Children?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	A Working with Children Check is a legal requirement for volunteers (and staff) who will have contact with children during the course of their work with your organisation. The Working with Children Check can be obtained online at the Victorian Department of Justice website. You are advised to verify that volunteers have this check and provide copies to Council.

## SECTION 6: Food

Will food be served free or sold at your event?  Yes - free of charge  Yes - sold at the event  No (please proceed to **Section 7**)

Name of Event Food Safety Supervisor:	
Provide a description of the types of food to be served free of charge or sold.	
List the proposed food vendors at the event.	

Will gas bottles be used by food stalls or at any location within the event site?  Yes  No

If Yes, please reference the Energy Safe Guidelines Gas Safety at Public Events.

## SECTION 7: Alcohol

<b>Will alcohol be consumed or sold at the event?</b>	<input type="checkbox"/> Yes – free of charge <input type="checkbox"/> Yes – sold at the event	<input type="checkbox"/> No ( <i>please proceed to Section 8</i> )
<i>If yes, please attach a copy of your liquor licence</i>		

## SECTION 8: Waste Management

<b>Will you make use of existing bins at the venue?</b>	<input type="checkbox"/> Yes	No. of rubbish bins: <input type="text"/> No. of recycle bins: <input type="text"/>	<input type="checkbox"/> No
<b>Are you providing extra bins?</b>	<input type="checkbox"/> Yes	No. of rubbish bins: <input type="text"/> No. of recycle bins: <input type="text"/>	<input type="checkbox"/> No
<b>How will you manage the waste removal?</b>			
<b>Please contact us if you require additional bins - 5461 0610</b>			

## SECTION 9: First aid

<b>Who is providing the on-site first aid?</b>			
<b>How many first aid personnel will you have?</b>	<input type="text"/>	Employed	<input type="text"/>
			Volunteers
<b>During what time will they attend?</b>	From: <input type="text"/>		To: <input type="text"/>

## SECTION 10: Access to Toilets

*Depending on your event and the expected number of participants you may be required to provide additional toilets at your event*

<b>Are there public toilets on the event site?</b>	<input type="checkbox"/> Yes	Number of female cubicles: <input type="text"/>	<input type="checkbox"/> No
		Number of male cubicles: <input type="text"/>	
		Number of accessible (disabled) cubicles: <input type="text"/>	
<b>Are you providing extra toilets at the event?</b>	<input type="checkbox"/> Yes	Number of female cubicles: <input type="text"/>	<input type="checkbox"/> No
		Number of male cubicles: <input type="text"/>	
		Number of accessible (disabled) cubicles: <input type="text"/>	
<b>Please provide details for cleaning these toilets?</b>	<b>Responsible group/person:</b>	<input type="text"/>	
	<b>Cleaning schedule:</b>	<input type="text"/>	
<b>Do you require a key to access Council amenities?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

## SECTION 11: Traffic management

Will the event impact the normal use of roads or footpaths in and around the event site?

Yes – roads  
 Yes - footpaths

No (please proceed to **Section 12**)

If yes, please attach a **Traffic Management Plan prepared by a qualified traffic management company** and obtain a permit through CGSC Engineering Department & advise emergency services & public transport companies.

Will road closures impact VicRoads roads?

Yes

No

If yes, you **MUST** submit an **Application to conduct a non-road activity on a highway** with VicRoads

Have you applied for a VicRoads permit? Please provide a copy to Council

Yes

No

## SECTION 12: Signs and banners

Would you like to erect signage on Council land, the event or road reserves?

Yes

No (please proceed to **Section 13**)

If Yes	How many signs do you wish to erect:		
	The size(s) of the signs:		
	How long will the signs be erected (date):	From:	To:
	How will you erect the signs:		
1. Please provide a map with the location of the signage. 2. Please provide a copy of the designs on your signage.			

Will you erect signage on VicRoads roads?

Yes

No

Please contact VicRoads regarding any signs to be placed on VicRoads roads and include a copy with this application.

## SECTION 13: Site Services

Will you or your contractors use power?

Yes

No (please proceed to next question)

If Yes, what will the power be used for

Will you require a key to access the power?

Yes

No

Will you or your contractors bring a generator onto site?

Yes

No (please proceed to next question)

If Yes, what the generator be used for?

What are the proposed hours of use?

Please show location of the generator(s) on the **Site Plan**

Will you or your contractors use water?

Yes

No (please proceed to next question)

If Yes, what the water be used for?

Are there any gates or bollards that you require access to?

Yes

No (please proceed to next question)

## SECTION 14: Entertainment

<b>Briefly outline the Entertainment Program (if any)</b>	
<b>Expected number of performers for the entertainment program (if any):</b>	
<i>All performers/contractors must have their own \$20 million public liability insurance</i>	

<b>Will you have live or recorded music at the event?</b>				<input type="checkbox"/> Yes		<input type="checkbox"/> No <i>(move to next question)</i>	
<b>If Yes,</b>	<b>Sound testing times</b>	From:		To:			
	<b>Amplification times</b>	From:		To:			
<i>An APRA Licence may be required for live performances</i>							

<b>Will there be speakers and amplified noise at the event?</b>				<input type="checkbox"/> Yes		<input type="checkbox"/> No <i>(move to next question)</i>	
<b>If Yes,</b>	<b>Sound testing times</b>	From:		To:			
	<b>Amplification times</b>	From:		To:			

<b>Will there be fireworks at the event?</b>				<input type="checkbox"/> Yes		<input type="checkbox"/> No <i>(move to next question)</i>	
<b>If Yes,</b>	<b>Fireworks date</b>	From:		To:			
	<b>Fireworks times from</b>	From:		To:			
	<b>Name of provider:</b>						
<i>Please provide a copy of the Insurances, and WorkSafe Victoria Licence &amp; Permit.</i>							

<b>Will there be a jumping castle or inflatables at the event?</b>				<input type="checkbox"/> Yes		<input type="checkbox"/> No <i>(move to next question)</i>	
<b>If Yes,</b>	<b>Jumping castle size</b>						
	<b>Proof of insurance, is the Certificate of currency attached?</b>			<input type="checkbox"/> Yes		<input type="checkbox"/> No	
	<b>A separate risk plan is required, is this attached to the application</b>			<input type="checkbox"/> Yes		<input type="checkbox"/> No	

*Note: 1. Only professional and commercial vendors are permitted to operate on CGSC managed properties.  
2. Jumping Castles or inflatables MUST be secured with weights not pegged.*

<b>Will there be rides / fair attractions at the event?</b>			<input type="checkbox"/> Yes	<input type="checkbox"/> No <i>(move to next question)</i>
<b>If Yes,</b>	<b>Type of ride</b>	<b>Size</b>	<b>Manufacturer Certification</b>	<b>Insurance certificate attached</b>

<b>Will there be an Animal Nursery or animals at the event?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No <i>(move to next question)</i>
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*If Yes, only professional and commercial vendors are permitted to operate on CGSC managed properties. Please provide the following details*

Type of animals	Name of Company providing the animals	How animals will be controlled / monitored	Insurance certificate attached

*Please show location(s) of animal(s) on the on the **Site Plan***

<b>Is the event site fenced or are you proposing to fence it?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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## SECTION 15: Camping

<b>Do you plan to have visitors camp or stay on the event site?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No <i>(move to Section 16)</i>
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*If yes, you will be required to apply for a Permit Application Camping Caravan/Motorhome (Any portable / mobile / recreational / temporary accommodation)*

## SECTION 16: Security

<b>Have you engaged security for your event?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No <i>(move to Section 17)</i>
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<b>If Yes,</b>	<b>Name of security provider</b>		
	<b>Duration of employment</b>	From:	To:
	<b>Number of security personnel:</b>		
	<b>Personnel registration numbers</b>		

*All security personnel must be appropriately licensed in accordance with current Victorian legislative and regulatory requirements.*



## SECTION 17: Emergency Services

*It is the responsibility of the event organiser to inform the Emergency Services of the event*

Emergency Service	Official Contacted:	Date of Contact
Police		
Ambulance		
State Emergency Services		
County Fire Authority		

*A contact list of emergency services is available in the Event Application Guide*

## SECTION 18: Site Map

*Your site map may be included on this space below or attached as a separate document. Please include*

Property or event boundaries /fencing	Toilets and water supply facilities	Site entries/exits
Litter / waste facilities / bins	Structures/ buildings / facilities	Advertising signs
Location of fire extinguishers/blankets	First Aid post	Entertainment / site holder area(s)
Emergency Assembly points	Food and drink vendors	Alcohol consumption areas
Ride / attractions	Jumping castle / inflatables	Animal nursery

## SECTION 19: Risk Management

As part of your Event Permit application you will be required to submit the following documentation.

<b>Have you downloaded the VIC Emergency App?</b> A resource that provides Victorians with access to warnings and incidents for fires, floods, storms, earthquake, and water safety.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>DOCUMENT TYPE: please submit the following</b>	<b>ATTACHED:</b>	
<b>A copy of the events Public Liability Insurance to the value of \$20 million</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>A signed copy of Council's Indemnity Form (at the end of this form)</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>A Risk Management Assessment/ Plan (see Part 2 B)</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>An Emergency Management Plan (see Part 2 C)</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Site Plan</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>A copy of notifications to residents/traders.</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>A copy of letter of approval from land owner: if applicable</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## SECTION 19: Authorisation

I have read and completed the Event Permit Application Form in good faith and I agree to adhere to all of the reasonable requests made during the assessment and planning phase that may be stipulated by the Central Goldfields Shire Council and other agencies.

I understand that making application does not constitute approval of an Events Permit.

I also understand that an Events Officer will advise and guide me as to the next steps of the event planning process.

<b>Print Name:</b>	
<b>Signature:</b>	
<b>Date:</b>	
<i>Office use only</i> <b>Permit Conditions:</b>	
<b>Approved by:</b>	

### Submit your Event Permit Application Form to:

Central Goldfields Shire Council  
12-22 Nolan Street  
Maryborough

Or

Email: [mail@cgoldshire.vic.gov.au](mailto:mail@cgoldshire.vic.gov.au) with the subject 'Event Permit Application \*event name and date\*'

### Privacy Statement

Personal information requested on this form will only be used by Council for administration purposes and will not be disclosed without your consent except where authorised by law. You have the right to seek access and correction of your personal information. *Privacy and Data Protection Act 2014*

**Part 2 Section B: Event Indemnity Form**

This section is to be completed by the Permit Holder or their authorised representative

**FORM OF INDEMNITY**

I,		(Name of Person)
of		(Address of Person)
in the State of Victoria		
holding the position of		(Role or Position in Business)
in the business named		(Business Name)
With ABN or ACN		(Australian Business or Company Number)
of		(Business Address)
For which business I am duly authorised to sign this indemnity,		
In consideration of the Permit for		(The name of the event/activity)
On the date of the activity:		(The date of the event/activity)
On the footpath, parcel of land or roadway		
Being granted to		(Name of Person or Incorporated Business Name of the Permit)
<p>(referred to as "the Permit Holder") HEREBY COVENANTS with CENTRAL GOLDFIELDS SHIRE COUNCIL (hereinafter referred to as "the Council") that unless caused by a breach of statutory duty or common law by the Council or any of its officers, agents, employees or contractors, the Permit Holder agrees to indemnify the Council and keep the Council indemnified from and against all and any damage, loss, cost or liability incurred or suffered by any person as a result of the Permit Holder's failure to comply with any conditions of the Permit granted by the Council, or any other failure to comply with any relevant law, lawful duty or obligation giving rise to any damage, loss, cost or liability incurred or suffered by any person as a result of or in any way associated with the exercise of this Permit.</p>		
<b>SIGNED</b>		
(Print Name)		(Sign)
(Print Position)		(Date)
<b>Witness to signature:</b>		
(Print Witness Name)		(Witness Signature & Date)