

Application for Medium Impact Outdoor Event

If you have any queries or require help in completing this application, please contact the Events and Permits Administration Officer on 9528 0449.

This form will be assessed and the City will notify you of the outcome. Please note that it may be determined that you are required to submit a High Risk Outdoor Event Application.

Event Details					
Name of Event					
Location					
Event date/s		Time from		Until	
Patron numbers		At any one time		Overall	
Brief description of event e.g. sporting, commercial, types of entertainment					

Applicant Details			
Company/organisation			
Not for Profit Organisation		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Public Liability Insurance		<input type="checkbox"/> Yes	<input type="checkbox"/> No
ABN			
Contact Person			
Postal Address			
Suburb		Postcode	
Phone number			
Email address			

The City of Rockingham is collecting your personal information to process an application for event approval under the Health (Public Building) Regulations 1992. It may also be used for secondary purposes which would be reasonably expected.

We may share this information with other government agencies in order to assess the application. If you choose to not provide your personal information, we may not be able to process the application.

To access, correct or learn more about how we handle personal information please contact privacy@rockingham.wa.gov.au or visit rockingham.wa.gov.au/privacy.

Event Information		
Will there be amplified music or noise at the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will any food or drink be provided or sold at the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will any non-edible products be provided or sold at the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will there be any amusements (e.g. rides, bouncy castle) or activities (e.g. face painter, roving entertainer, animal farm) at the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will there be any temporary structures over 3m x 3m at the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the event an on road event i.e. cycling, triathlon etc.?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

First Aid		
Name	Qualifications	Agency

Toilets						
What toilet facilities will be provided for staff, volunteers and patrons at the event?						
	Male Only Urinal Toilet		Female only	Unisex	Accessible	Parents Room
Total Toilet Numbers (existing & additional)						
Total Basin Numbers (existing & additional)						
Please include the location of all toilets, existing and portable, on your site plan. It is the responsibility of the event organiser to ensure all toilets (existing and additional) are serviced and cleaned for the duration of the event.						
Please provide details below on arrangements made for servicing / cleaning the toilet facilities:						
Please ensure you have considered the lighting of toilets interior and exterior - applicable for events after sunset.						



Waste Management			
Will you require the hire of additional City of Rockingham Bins?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes , please refer to the schedule of Fees and Charges for current costs per bin			
If no , please provide the details of the contractor who will be supplying rubbish bins			
Company			
Contact number			
If requesting bins from the City, please detail the number required below:			
General Waste		Recycling	
240L Waste Bins		240L Recycle Bins	
660L Skip Bins		660L Recycle Skip Bins	
1100L Skip Bins		1100L Recycle Skip Bins	

Declaration			
I, the undersigned, certify that I have authority on behalf of the company / organisation to submit this application and that the information contained herein is, to the best of my knowledge, true and correct.			
Name			
Signature		Date	