

APPLICATION FORM

PUBLIC BUILDING EVENTS

For the purpose of applying in conjunction with the *Health (Miscellaneous Provisions) Act 1911* & the *Health (Public Buildings) Regulations 1992*:

- Form 1 – Application to Construct, Extend or Alter a Public Building
- Form 2 – Certificate of Approval

The following forms are required where persons may assemble, usually assemble or occasionally assemble for educational, business, entertainment, recreational, sporting, civic, theatrical, social, political or religious purposes.

| ORGANISATION DETAILS | | | |
|---|--------------------|-----------------|------------|
| Organisation Name | | | |
| ABN/ ACN | | | |
| Type of Organisation | Commercial | Community | Non-Profit |
| Premise Address | | | |
| Suburb | | Postcode | |
| Phone Number | | | |
| APPLICANT DETAILS | | | |
| Primary Contact | Name | | |
| | Role | | |
| | Phone Number | | |
| | E-mail | | |
| Secondary Contact | Name | | |
| | Role | | |
| | Phone Number | | |
| | E-mail | | |
| PROPOSED EVENT DETAILS | | | |
| Name | | | |
| Description (Intended Purpose of the Event) | | | |
| Date(s) | | | |
| Start Time | | Finish Time | |
| Maximum Number of Persons: | At any given time: | Whole Duration: | |
| Premises Address | | | |
| | Suburb | | Postcode |

| | | |
|---|-----------------------|-------------------------------------|
| Has this event been held previously? | Yes | No |
| Have you confirmed that your venue is booked? | Yes | No |
| Is the Venue: | Open Space (eg. Park) | or Public Building |
| Is the Event: | Open to Public | or Closed to Public/ Ticketed Event |

INSURANCE

Do you have Public Liability Insurance? Yes No

Attach a copy of a valid Certificate of Currency for Public Liability to this application

SITE PLAN & LAYOUT

The site plan must include the following details:

- Stage and other entertainment attractions (including size in m²)
- Emergency Exits – Location & Widths
- Emergency Lighting & Exit Signs
- Stalls including Food & Beverage Stallholders
- Electrical Cables (to best tested & tagged)
- Vehicle Access Points (including street names), Parking Area & Overflow Parking
- Location of Marquees, Tents (including m²)
- Additional Toilet Facilities – Location & Numbers (& Disabled Access)
- Seating, Tables & Fenced Off Areas (including m²)

FOOD & BEVERAGE

Submit a list of all food & beverage stallholders including Name of Stall, Name of stallholder, contact number, types of food being sold.

Note: A [Temporary Food Stall or Premises Notification Form](#) must be completed for each stallholder.

PROVIDE DETAILS OF ENTERTAINMENT TO BE PROVIDED INCLUDING FIREWORKS OR ANY MUSIC EQUIPMENT TO BE USED

Is your event likely to generate noise that may impact surrounding residential areas? Yes No

Complete [Application for Approval as a Non-Complying Event](#) at least 60 days **before** the event.

Does your event require a temporary structure/ marquee more than 55m² to be erected? Yes No

Complete [Certificate of Structural Integrity for a Temporary Structure/ Marquee](#)

PROVIDE INFORMATION REGARDING THE PROVISIONS MADE FOR DISABLED ACCESS

PROVIDE DETAILS OF PARKING & TRAFFIC MANAGEMENT ARRANGEMENTS

Attach a copy of your approved traffic management/ road closure documentation

PROVIDE DETAILS OF CROWD CONTROL & SECURITY MEASURES INCLUDING A NOMINATED SECURITY CONTACT

PROVIDE DETAILS OF RUBBISH STORAGE, REMOVAL AND SITE CLEAN-UP PROVISIONS FOR THE EVENT (NO SOLID OR LIQUID WASTE TO BE LEFT AT THE VENUE)

PROVIDE DETAILS OF THE NUMBER OF TOILETS AND CLEANING ARRANGEMENTS (TOILETS MUST BE KEPT CLEAN AND SERVICEABLE THROUGHOUT THE EVENT)

Attach a copy of the cleaning contract to service and manage the toilets

PROVIDE & ATTACH DETAILS OF THE EMERGENCY RESPONSE PROCEDURES INCLUDING RISK ASSESSMENT & EMERGENCY MANAGEMENT DETAILS

Attach a copy of your emergency response and risk management documentation

PROVIDE DETAILS OF FIRST AID FACILITIES AND PROVISIONS INCLUDING PROVIDING A MINIMUM OF ONE (1) PERSON AS A QUALIFIED FIRST AID OFFICER

PLEASE ENSURE THE FOLLOWING DETAILS ARE ATTACHED WITH THIS APPLICATION. ANY MISSING DETAILS MAY DELAY THE PROGRESS OF YOUR APPLICATION.

- Food Stalls – Temporary Food Stall or Premise Notification Form (For ALL food stallholders)
- Contact List of all Stallholders
- Valid Certificate of Currency to the Value of \$10 million dollars
- Site Plan & Layout
- Approved Traffic Management/ Road Closure Documentation
- Cleaning Contract
- Emergency Response & Risk Management Documentation
- [Form 5 – Certificate of Electrical Compliance](#) (to be completed on the **day** of the event)

DECLARATION

I declare as the Applicant, all the information supplied on this form is true and correct.

I understand that the City of Kalgoorlie Boulder accepts no responsibility for injury or liability.

I understand that the City may require additional information to support this application.

I understand that submission of this form is under consideration and does not, in any way, guarantee approval.

| | | | |
|-----------|--|------|--|
| Full Name | | Date | |
| Signature | | | |

Refer the City's Schedule of Fees & Charges

COA: 22010153

Receipt Number: _____

All applications & supporting documentation are to be submitted to mailbag@ckb.wa.gov.au at least 60 working days prior to the event.