

Event Application for hire of Council Parks, Lands, Roads (including Road Closures), Foreshores or Reserves.

Please return completed forms to:

In Person: Kangaroo Island Council, 43 Dauncey Street, Kingscote
Penneshaw Community Business Centre, 99 Middle Terrace, Penneshaw
By Post: PO Box 121, Kingscote SA 5223
Fax: 08 8553 2885
Email: kicouncil@kicouncil.sa.gov.au

Purpose and Scope of this Permit:

This Permit applies to those entities that wish to hire a defined area of open Council property for an organised function or event.

- Permits are issued for the use of Council land in accordance with Council's By-Law No. 4: Local Government Land.
- Electricity and water usage will be charged as per Councils Fees and Charges Schedule.
- Waste Management on Kangaroo Island is managed by Fleurieu Regional Waste Authority [FRWA]. It is the responsibility of the Permit Holder to make arrangements with FRWA in relation to their Waste Management needs.
- **For any permits that will require road closures of Council roads or road reserves, there must be a minimum of 3 months' notice. All other events will require 4 weeks' notice.**

PART 1:

Section A: Event Organiser Details

Organisation Name: If Applicable

ABN / ACN Number: If Applicable

Contact Name:

Postal Address:

Phone Number:

Mobile Number:

Email:

Section B: Event Details**Name and description of Event:****Proposed Location:
(include map of area)****Proposed Dates From:** / **To:** / **Proposed Times From:** am/pm**To:** am/pm**Contact Person:**The person/s in charge of the event and who will be in attendance for the duration of the event**Mobile Number:**Number for the person in charge of the event**How Many People are Expected to Attend?****Nature of Event:**

- ☐ Commercial
☐ Community

Section C: Road Closure (tick if required) ☐

Will the event impact on local traffic access, flows or speed or will it be necessary to close any roads or divert any traffic for your event?

☐ Yes - you will need to provide a Traffic Management Plan **within 3 months prior to the Event.**

Attach further details as required.

NOTE: Department for Infrastructure and Transport approval is required if not a Council Road. In addition, SAPOL approval by the Commissioner of Police may be required as they exercise the authority delegated by the Minister of Transport under Section 11 Road Traffic Act, and make the following under Section 33 of the Act.

Has SAPOL been contacted (where applicable)?

☐ Yes

Section D: Food, Beverage and Alcohol provision and sales.

Yes	No
☐	☐

Are food and beverages being provided / sold?

If **yes**, please complete and submit an Event Organiser Temporary Food Notification form within 14 days to finalize the application process.

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Is Alcohol going to be provided / sold?

LIQUOR LICENSING REQUIREMENTS

If the sale of alcohol is proposed at the function, separate approval is required from the Office For Consumer & Business Services [OFCBS]. An application in the form of a letter should be lodged with the OFCBS seeking a temporary license. The application should clearly state the date and time for which a license is sought and should be accompanied by a site plan indicating the site for which a license is sought. A copy of the Liquor Licence is to be provided to Council and attached to this Permit application.

For further information contact OFCBS via their website: www.cbs.sa.gov.au

Section E: Documentation

Applications will **not** be considered without the following:

Copy of Public Liability Insurance

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Food Business Notification/Temporary Food Event Permit (if applicable)

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Map of Area

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The approval of this Event Permit is subject to:

- The Event Organiser agreeing to all special conditions supplied.
- The Event Organiser paying the prescribed fees.
- The Event organiser providing all documentation as required at the time of the application.
- The approval is not transferable and may be revoked in writing at any time.
- The Outdoor Event Application **must** be returned to Council a minimum of 4 weeks prior to the Event (3 months if it includes road closures).

Name:

Signature:

Date:

Section F: Map of Area