

## Please return this completed form with payment to:

PO Box 488, Swan Hill VIC 3585 | DX 30166 45 Splatt Street, Swan Hill VIC 3585 68-72 Herbert Street, Robinvale VIC 3549 Tel: 03 5036 2333 | Fax: 03 5036 2340 Email: council@swanhill.vic.gov.au

## Application for busking permit

Community Local Law No. 2

Community Local La	3VV 1NO. Z			
Applicant details	Name:			
	Address:			
	Phone:	Mobile:		
	Email:			
Proposed location				
Type of entertainment/ instruments				
Performance dates	Start date:	End date:		
Performance times				
Day	Start time	End time		
Monday - Friday	am/pm	am/pm		
Saturday	am/pm	am/pm		
Approval of businesses	Have you attached written approval from the business proprietors situated adjacent to the location you intend to perform? Written approval is required.  Yes			
Public liability insurance	Do you have your own public liability insurance?			
and permit fees	Yes - Please attach a copy with your application			
	+ \$11.00 Permit fee + \$5.50 per day			
	No - You need to apply for Council'	's Casual Hirer's insurance		
	(see next page) + \$11.00 Permit fee + \$5.50 per + \$35 for Council's Casual Hirer Please complete application fo	's insurance (conditions apply).		
Permit conditions				
<ol> <li>Music noise must not be at</li> <li>Busking will only be allowe to 12 noon on Saturdays.</li> <li>The permit is only valid for</li> </ol>	the timeframe stated on the Council issued	n and 5.30pm, Monday to Friday and 9.00an		
	any other authorised busking acts that may or interfere with any members of the public			

## **Declaration and signature**

I understand and agree to abide by the conditions as set out by Swan Hill Rural City Council and that permission will be subject to compliance with those conditions as stated above.

Signature of Applicant:	Date:

You must obey any direction given to you by a member of Victoria Police or a Council Authorised Officer.

The personal information requested on this form is being collected by Council for the provision of a Busking Permit. This information will be used solely by Council for that purpose. If this information is not collected, then this may impact on the assessment of the Application. The applicant understands that the personal information provided is for the efficient assessment of a Busking Permit, and that he or she may apply to Council for access to and/or amendments to the information. Requests for access and/or correction should be made to Council's Privacy Officer.

OFFICE USE ONLY							
Date paid	Amount paid:	Permit No.	Date Issued:				
	Receipt No. (type 75)						

## **Casual Hirers Public Liability Insurance Form**

Venue				
Name of Organisation/Hirer				
Applicant details	Name	<b>):</b>		
	Address:			
	Phon	e:	Mobile	
	Emai	l:		
Purpose for hiring				
Hiring dates and times				
Dates:				
Day		Start time	End time	
Monday - Friday		am/p	m	am/pm
Saturday		am/p	m	am/pm
<ul> <li>6. No cover for festivals, even</li> <li>7. No cover for more than 5 co</li> <li>8. No more than 1,000 people</li> <li>9. Only cover hirer, not other p</li> <li>10. Insured will pay the first \$25</li> <li>11. The function will be safe, wo</li> <li>12. The site is left in a clean an</li> </ul>	used to ctions gommunts, rock will be participa 50 of ea ell suped tidy controls.	the public iven by a Council Officer ity (non commercial) type functions concerts or sporting type activities ive days or more than 52 times per year in attendance ants or service providers ch and every claim or series of claims rvised and well managed ondition		
For any queries or more info hours or email locallaws@sw		on please contact Regulatory Ser ric.gov.au.	vices on (03) 5036 2346	during office
Declaration and signa	ature			
I/We acknowledge all of the and agree to abide by these of		ons set out on the front of this for ons.	m by the Swan Hill Rural	City Counci
Name of Applicant:			Position:	

Signature of Applicant: