

Goondiwindi Regional Council

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**Local Government
Act 2009**

Entertainment Venues

Application for Theatre or Place of Amusement Licence

Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.

**Local Law 08
(Entertainment
Venues)**

Application is for

Entertainment Venue Licence Fee \$ _____

**If applicant is a company,
insert company name and
ACN / ARBN.**

Applicant/s details

Company name _____ ACN / ARBN _____

Title (eg. Mr, Mrs, Miss etc.)

Family name _____
Given names _____
Position _____

I declare the information provided in this application to be true and correct.

Signature _____ Date _____

Title (eg. Mr, Mrs, Miss etc.)

Family name _____
Given names _____
Position _____

I declare the information provided in this application to be true and correct.

Signature _____ Date _____

Select as applicable.

Contact details

Business Private

Contact person _____

Postal address _____

Locality / Suburb _____ State _____ Postcode _____

Contact ph. _____ Mobile _____

Contact fax _____ Email _____

Business name must be registered with Fair Trading.

Enter postal address if different from street address.

Real property description - refer to Rates Notice.

Business details

Business name		BN
Street address		
Locality / Suburb	State	Postcode
Postal address		
Locality / Suburb	State	Postcode
Contact ph.	Mobile	
Contact fax	Email	
Lot no.	Reg. plan no.	Parish

Nature of entertainment to be provided

Days of operation Hours of operation

Monday		<input type="checkbox"/> am	<input type="checkbox"/> pm	to	<input type="checkbox"/> am	<input type="checkbox"/> pm
Tuesday		<input type="checkbox"/> am	<input type="checkbox"/> pm	to	<input type="checkbox"/> am	<input type="checkbox"/> pm
Wednesday		<input type="checkbox"/> am	<input type="checkbox"/> pm	to	<input type="checkbox"/> am	<input type="checkbox"/> pm
Thursday		<input type="checkbox"/> am	<input type="checkbox"/> pm	to	<input type="checkbox"/> am	<input type="checkbox"/> pm
Friday		<input type="checkbox"/> am	<input type="checkbox"/> pm	to	<input type="checkbox"/> am	<input type="checkbox"/> pm
Saturday		<input type="checkbox"/> am	<input type="checkbox"/> pm	to	<input type="checkbox"/> am	<input type="checkbox"/> pm
Sunday		<input type="checkbox"/> am	<input type="checkbox"/> pm	to	<input type="checkbox"/> am	<input type="checkbox"/> pm

Type of entertainment / amusement

- Cinema Theatre Concert hall
 Museum Art gallery Electronic games centre
 Indoor sports centre Fair ground Other (please specify) _____

Capacity of venue	Seating	Standing
Toilets	No. male	No. female

This is the name and address of the owner/s of the premises. If there are additional owners, please attach additional owner information to this form.

Owner/s consent

Name		
Street address		
Locality / Suburb	State	Postcode
Contact ph.	Mobile	
Contact fax	Email	

I, being the owner of the property described in this application, hereby consent to the afore mentioned applicant/s making this application.

Signature	Date
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Lodgement

Please attach the following:

1. A plan of the entertainment venue drawn to scale not smaller than one to one hundred (1:100) showing:
 - position of exits; and
 - details and drawings of buildings and other structural elements of the entertainment venue.
2. Details of fire fighting equipment.
3. A certified copy (or other evidence of approval) of any other registration, licence, permit or other law that may be required to operate this business.
4. A copy of the additional owner/s consent (if applicable). This consent must state the applicant/s name, the premises to which the application refers, provide details regarding the owner/s consent to the application and be signed by the owner/s.

Please note: This application and fee MUST be lodged with your Council

Privacy Statement

The information collected on this Form will be used by the Department of Environmental Health Services (Goondiwindi Regional Council) in accordance with the processing and assessment of your application. Your personal details will not be disclosed for a purpose outside of Council protocol, except where required by legislation (including the *Information Privacy Act 2009*) or as required by the Queensland State Government. This information may be stored in the Council database. The information collected will be retained as required by the *Public Records Act 2002*.

Office use only

Application fee		Reg. no.	
Receipt code		ID no.	
Authorised officer		Inspection date	/ /
Recommendation			
		Rec. no.	
Date	/ /	Account property no.	