

Mount Isa City Council

23 West Street, Mount Isa
PO Box 815,
Mount Isa QLD 4825

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Email city@mountisa.qld.gov.au
Website www.mountisa.qld.gov.au



Local Government
Act 1993

Local Law
(Parks and Reserves)

Activities on Parks and Reserves

Application for Approval for Activities on Council Parks and Reserves

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.

Application is for

Approval for Activities on Parks and Reserves Fee _____

Applicant/s details

Title Mr Mrs Ms Miss Other (specify)

Family name

Given names

Position

Title Mr Mrs Ms Miss Other (specify)

Family name

Given names

Position

Terms and conditions

1. The area is to be left in a clean and tidy state.
2. No alcohol in park area (unless otherwise approved).
3. No glass receptacles are to be used.
4. Council is to be indemnified against any claim which may arise as a result of this activity.
5. All food preparation and distribution to comply with Health Service requirements.
6. All electrical cords, fittings, switchings, etc. are to be in accordance with the appropriate Australian Standards.
7. Provide adequate controlled access for pedestrians where applicable.
8. If necessary, keys are to be collected from the front counter of Council's office.
9. Driving speeds in excess of 10kph are not permitted.

I / We have read and agree to abide by Council's conditions.

Signature _____ Date / /

Signature _____ Date / /

Contact details

Select as applicable.

Business Private

Contact person

Postal address

Locality / Suburb

State

Postcode

Contact ph.

Mobile

Contact fax

Email _____

Business name must be registered with the Office of Fair Trading. If applicant is a company, insert company name and ACN / ARBN.	Business details		
	Business name		BN <input type="text"/>
	Company name		ACN / ARBN <input type="text"/>
	Street address		
	Locality / Suburb		State <input type="text"/> Postcode <input type="text"/>
Enter postal address if different from street address.	Postal address		
	Locality / Suburb		State <input type="text"/> Postcode <input type="text"/>
	Contact ph. <input type="text"/>	Mobile <input type="text"/>	
	Contact fax <input type="text"/>	Email <input type="text"/>	
Real property description – refer to Rates Notice.	Lot no.	Reg. plan no.	Parish

	Activity details		
	Name of park		
	Type of activity or function		
	Date <input type="text"/>	Time From <input type="text"/>	To <input type="text"/>
	Duration	No. persons attending (approx.)	
	Name and contact details of organiser (if applicable)		
	Contact ph. <input type="text"/>	Mobile <input type="text"/>	
	Contact fax <input type="text"/>	Email <input type="text"/>	

A copy of a Public Liability Insurance Policy, to the minimum \$ value required by Council, must accompany applications. The policy shall name the insured as 'the applicant for the Permit and the Council'.	Public liability insurance		
	Name of insurance company		
	Name of insured		
	Policy no.	Amount of cover \$	
	Policy expiry date <input type="text"/>		

	Lodgement
	Please attach the following:
	<ol style="list-style-type: none"> A copy of your Public Liability Insurance Policy to the minimum \$ value required by Council. The public liability must indemnify the Council, in the prescribed form and manner, against all public liability claims arising from the operation of this business. A certified copy (or other evidence of approval) of any other registration, licence or permit required under any other law, as part of the occupation or use of Council Parks and Reserves.
	Please note: This application and fee MUST be lodged with your Council.

	Office use only		
	Application fee	Reg. no.	
	Receipt code	ID no.	
	Authorised officer	Inspection date	
	Recommendation		
	Date <input type="text"/>	Account property no.	Rec. no.