



# Application for Place of Assembly

- Application for a Place of Assembly Licence
- Application for *Renewal* of a Place of Assembly Licence

## Applicant Details:

Name of Applicant: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Mobile: (\_\_\_\_) \_\_\_\_\_

Facsimile: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

## Premises Details:

Trade Name of Premises: \_\_\_\_\_

Address of Premises: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal Address for Correspondence: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Description of intended use of premises: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of Persons to be accommodated: \_\_\_\_\_

Other Licences issued to the premises: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# Application for Place of Assembly

## Fee and Signature:

Application Fee: \$50.00

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please lodge your completed form and application fee with the  
General Manager  
Dorset Council  
3 Ellenor Street  
PO Box 21  
Scottsdale TAS 7260  
Phone (03) 6352 6500  
Fax (03) 6352 6509  
dorset@dorset.tas.gov.au

### OFFICE USE ONLY

Receipt No.: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Capacity of Premises: \_\_\_\_\_

### COUNCIL CHECKLIST

- |  |   |
|--|---|
| <input type="checkbox"/> Form fully completed          | <input type="checkbox"/> Form signed  |
| <input type="checkbox"/> Form dated                    | <input type="checkbox"/> Fee paid   |
| <input type="checkbox"/> Site/floor plan attached      | Further information required <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Date requested ____/____/____ |   |

Details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_