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File No. A
Postal Address
PO Box 59
BEACONSFIELD TAS 7270

**APPLICATION FOR PLACE OF ASSEMBLY LICENCE
POOLS & SPAS**

*Public Health Act 1997
Section 76 & 81*

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

APPLICANT DETAILS

Name of Applicant.....
Postal Address.....
.....Postcode.....
Telephone..... Mobile.....
Facsimile..... Email.....

PREMISES DETAILS

Trade Name of Premises.....
Address of Premises.....
.....Postcode.....
Postal Address for Correspondence.....
.....Postcode.....
Emergency Contact Telephone.....
Description of Intended Use of Premises.....
.....
Date & Times of Operation.....
Number of Persons to be Accommodated.....
Other Licences Issued to the Premises (e.g., special liquor licence).....
.....
Do you intend to use a Temporary Structure? (e.g, tent, marquee, stage) Yes / No
Please specify.....
If so, do you intend to rely on an Alternative Solution to comply with Part F of the
Guidelines? Yes / No

SWIMMING POOL / SPA

Name of Operator (if different from above).....
Contact Telephone.....
Pool or Spa (please specify).....
Capacity of Pool / Spa (number of persons).....
Method of filtration and disinfection.....
Monitoring details (attach additional sheet if insufficient area).....
.....
Nominated Laboratory.....

FEE & SIGNATURE

- Application Fee **\$180.00** new premises
(please tick) **\$130.00** renewal of existing licence
 \$70.00 seasonal (if operating for 6 months or less after initial application)

Signature of Applicant.....Date...../...../.....

NOTE: The application fee includes an amount to cover a basic inspection of the premises.
Any further inspections required for the purpose of assessing the application may require an
additional fee.

DOCUMENTATION THAT MUST BE ATTACHED TO APPLICATION

- Site plan and / or floor plan (show positions of pool, facilities, entrances/exits etc)
- Annual maintenance report
- Copy of Occupancy Permit or Certificate of Occupancy (initial application only)
- Temporary Occupancy Permit (if applicable)
- Any other information required by the council for assessment purposes

**Please lodge your completed application form, attachments and fee with the
General Manager of West Tamar Council**

Office Use Only

Receipt No..... Date...../...../.....
Capacity of Premises.....

Council Checklist

- Form fully completed
- Site/floor plan attached
- Annual maintenance report attached
- Log book completed
- Signs erected
- Occupancy Permit

Further information required Yes / No

Date requested/...../.....

Details.....
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EHO..... Inspection date...../...../.....