

APPLICATION FORM PUBLIC BUILDING EVENTS

For the purpose of applying in conjunction with the *Health (Miscellaneous Provisions) Act 1911* & the *Health (Public Buildings) Regulations 1992*:

- Form 1 Application to Construct, Extend or Alter a Public Building
- Form 2 Certificate of Approval

The following forms are required where persons may assemble, usually assemble or occasionally assemble for educational, business, entertainment, recreational, sporting, civic, theatrical, social, political or religious purposes.

ORGANISATION D	ETAILS				
Organisation Name					
ABN					
Type of Organisation	Commerc	ial	Community		Non-Profit
Premise Address					
Suburb				Postcode	
Phone Number					
APPLICANT DETA	ILS				
	Name				
Primary Contact	Role				
Tilliary Contact	Phone Number				
	E-mail				
	Name				
Secondary Contact	Role				
Secondary Contact	Phone Number				
	E-mail				
PROPOSED EVEN	T DETAILS				
Event Name					
Event Description					
Date(s)					
Start Time			Finish Time		
Maximum Number of	Persons: At any	y given ti	me: V	Vhole Dura	ition:
Decusion A.I.I					
Premises Address	Suburb	Postcode			

CITY OF KALGOORLIE-BOULDER

w: ckb.wa.gov.au

Has this event been held previously?			Yes	No
Have you confirmed that your venue is booked?			Yes	No
Is the Venue:	Open Space (eg. Park)	or		Public Building
Is the Event:	Open to Public	or		Closed to Public/ Ticketed Event

INSURANCE

Do you have Public Liability Insurance? Yes No

Attach a copy of a valid Public Liability to the minimum value of twenty million dollars (\$20,000,000).

SITE PLAN & LAYOUT

The site plan must include the following details:

- o Structures including stage, shades, tents and marquees (including size in m²)
- Bouncy castles and amusement rides/ devices
- o Emergency exits (location & widths) & demonstrate evacuation/ egress to exits
- o Emergency lighting & exit signs
- Stalls including food & beverage stallholders
- o Electrical cables (to best tested & tagged) & location for fire protection equipment
- O Vehicle access points (including street names), parking & overflow parking areas
- o Permanent & portable toilet facilities location & numbers (& disabled access)
- O Seating, tables & fenced off areas (including m²)
- o Location of Emergency Services and First Aid point/s

PROVIDE DETAILS OF ACTIVITIES & ENTERTAINMENT INCLUDING ANY MUSIC EQUIPMENT TO BE USED

Will there be any electrical generators, switchboards or sound systems?		
Must supply fire protection equipment at each location and any backstage areas.		
Will there be any fireworks?		
Attach a copy of the Dept. of Mines, Industry Regulation and Safety permit.		
Is your event likely to generate noise that will impact surrounding residential areas?	Yes	No
Complete Application for Approval as a Non-Complying Event at least 60 days before the	event.	
Will there be large stands, marquees/ tents/ shades or stages more than 55m² erected?	Yes	No
Complete Certificate of Structural Integrity for a Temporary Structure/ Marquee		
Will there be any additional structures? Bouncy castles/ Inflatables Amusement rice	les/ Devi	ces
Provide hirer's public liability insurance (minimum \$20 million dollars), copy of WorkSafe F (or Class 1 Certification by a competent persons) and annual inspection certificate for each	•	

FOOD & BEVERAGE

Is your event selling food or beverages? Yes No

Temporary Food Stall or Premises Notification Form must been completed for each Stallholder and a list of all food & beverage stallholders including Name of Stall, Name of stallholder, contact number, and types of food being sold.

Note: fees & charges apply to the food stallholders.

PROVIDE INFORMATION REGARDING ACCESS & INCLUSION INCLUDING PROVISIONS OF DISABLED ACCESSIBILITY

PARKING & TRAFFIC MANAGEMENT

Does your event have adequate parking for your anticipated attendance numbers? Yes No Include on your site plan location of parking and overflow parking areas.

Note: Overflow parking may be required at another location.

Does your event require road closures? Yes No

Attach a copy of your approved traffic management plan

Note: Events at Centennial Park must cordon off footpaths and middle island on Hannan Street.

PROVIDE DETAILS OF CROWD CONTROL & SECURITY MEASURES INCLUDING A QUALIFIED PERSONS

PROVIDE DETAILS OF RUBBISH STORAGE, REMOVAL AND SITE CLEAN-UP PROVISIONS FOR DURING AND AFTER THE EVENT (NO SOLID OR LIQUID WASTE TO BE LEFT AT THE VENUE)

TOILET FACILITIES

Number of permanent toilet facilities at venue: Unisex: Female: Male: Toilets: Urinals:

Number of additional toilets provided for the event: Unisex: Female: Male:

Total number of disabled access toilets available/ provided:

PROVIDE DETAILS OF CLEANING ARRANGEMENTS. TOILETS & VENUE MUST BE KEPT CLEAN & MAINTAINED FOR THE DURATION OF THE EVENT

	AILS OF THE EMERGENCY RESPONSE PROCEDURES INCLUDING RISK MATRIX & EMERGENCY MANAGEMENT DETAILS				
AGGEGGIIIERT	MATRIA & EMERGENOT MANAGEMENT DETAILS				
Attach a copy o	f your emergency response and risk management documentation.				
	TAILS OF FIRST AID INCLUDING A MINIMUM OF ONE (1) QUALIFIED FICER. EMERGENCY SERVICES MAY BE REQUIRED TO BE NOTIFIED.				
	te that your event has been registered with the Department of Health: th.wa.gov.au/Articles/A_E/Events-registration				
	SURE THE FOLLOWING DOCUMENTATION ARE PROVIDED WITH THIS N. ANY MISSING DETAILS MAY DELAY THE PROGRESS OF YOUR N.				
Valid ce	ertificate of currency to the value of twenty million dollars (\$20,000,000)				
Site Pla	n & Layout				
Certifica	Certificate of Structural Integrity for a Temporary Structure/ Marquee (if applicable)				
Food Stalls – Submit list of food stalls and application form for each stallholder					
Approved Traffic Management/ Road Closure Documentation (if applicable)					
Emergency Response & Risk Management Procedures					
Event has been registered with the Department of Health					
Form 5	- Certificate of Electrical Compliance (to be completed on the day of the event)				
DECLARATIO	ON CONTRACTOR OF THE PROPERTY				
I declare	e as the Applicant, all the information supplied on this form is true and correct.				
I understand that the City of Kalgoorlie Boulder accepts no responsibility for injury or liability.					
I understand that the City may require additional information to support this application.					
	stand that submission of this form is under consideration and does not, in any way, ee approval.				
Full Name	Date				
Signature					
	Refer to the City's Schedule of Fees & Charges				
	COA: 22010153 Receipt Number:				

All applications & supporting documentation are to be submitted to mailbag@ckb.wa.gov.au at least 60 working days prior to the event.