Event notification form

This form advises City of Launceston of your intention to hold an event.

Please complete if you are planning to hold a public event, celebration or function   
and return it to our Events Facilitation Officer no later than 60 days before the event.

All Event Notification Forms will be reviewed and you may be contacted for more information.

If you have any questions, contact our Events Facilitation Officer on 03 6323 3380.

**City of Launceston assistance**City of Launceston supports the development of the vibrant and diverse event calendar in a number of ways:

* Council’s Events Facilitation Officer can provide information to assist event organisers, providing guidance and advice including the coordination of Council permits and licences.
* Council’s Event Sponsorship Program supports new and established events held in Launceston. For more information and how to apply please contact Grants and Sponsorship Officer on 03 6323 3217 (this document is not an application form for funding).

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| **Responsible Events in Launceston** |
| All Event Notifications should be completed with the following outcomes in mind:   * Ensuring the safety of volunteers, participants, visitors, attendees and surrounding residents; * Minimising the inconvenience to surrounding residences and businesses; * Considering access issues for people with disabilities, older people or people with prams; * Protecting parks, reserves and areas of natural vegetation from damage; * Being proactive in minimising the impact of noise on surrounding residents; * Minimising the impact of pollution on the local environment; * Complying with all relevant laws and regulations. |
| **Best Practice Reference Documents** |
| **WorkSafe Tasmania** - Work Health and Safety Act 2012, the Work Health and Safety Regulations 2012, codes of practice, including the Code of Practice for Risk Management of Agricultural Shows and Carnivals [www.www.worksafe.tas.gov.au](http://www.www.worksafe.tas.gov.au)  **WorkSafe Tasmania** - Storage and use of LPG at public events <http://worksafe.tas.gov.au/safety/safety_subjects/subject/gas_cylinders/storage_and_use_of_lpg_at_public_events>  **Department of Health and Human Services** - Guidelines for a Mobile Food Business  <https://www.dhhs.tas.gov.au/__data/assets/pdf_file/0004/208570/Guidelines_for_Mobile_Food_Businesses_Dec_2015.pdf>  **Meetings and Events Australia** - Accessible Events - A Guide for Meeting and Event Organisers <http://www.meetingsevents.com.au/downloads/Accessible_Events_Guide.pdf> Personal Information Protection Statement As required under the *Personal Information Protection Act 2004*   |  |  | | --- | --- | | 1. | Personal information is managed in accordance with the *Personal Information Protection Act 2004* and may be accessed by the individual to whom it relates, on request to Launceston City Council. | | 2. | Information can be used for other purposes permitted by the Local Government Act 1993 and regulations made by or under that Act, and, if necessary, may be disclosed to other public sector bodies, agents or contractors of Launceston City Council, in accordance with Council's Personal Information Protection Policy (17-Plx-005). | | 3. | Failure to provide this information may result in your application not being able to be accepted or processed. | |

**EVENT NOTIFICATION FORM**

Public Events

Please Print

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| --- | --- | --- | --- |
| Title |  | Given Name/s |  |

|  |  |
| --- | --- |
| Surname |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Unit/Street No |  | Street |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Suburb |  | State |  | Post Code |  |

Postal Address (if different from street address)

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| --- |
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|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Suburb |  | State |  | Post Code |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Phone | H |  | B |  | M |  |

|  |  |
| --- | --- |
| Email address |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Business Name |  | ABN |  |

*Although the information in this document has been researched and presented with due care and attention, City of Launceston accepts no responsibility for any errors or omissions that may have occurred within this publication.*

Please Print and use tick boxes

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Event Details** | | | | | | | | | | | | | |
| Name of event: | |  | | | | | | | | | | | |
| Proposed event venue name & address:   **NB**: A booking hire agreement may be required if venue/ land is Council owned. | |  | | | | | | | | | | | |
| Date(s) of Event: | |  | | | | | | | | | | | |
| Time of event: | | Start | | | |  | | | | Finish | |  | |
| Date of bump in: | |  | | | | | | | | | | | |
| Time of bump in: | | Start | | | |  | | | | Finish | |  | |
| Date of bump out: | |  | | | | | | | | | | | |
| Time of bump out: | | Start | | | |  | | | | Finish | |  | |
| Contact name during bump in/out: | |  | | | | | | | | | | | |
| Contact number during bump in/out: | |  | | | | | | | | | | | |
| Contact name during event: | |  | | | | | | | | | | | |
| Contact number during event: | |  | | | | | | | | | | | |
| Complaints number during event: | |  | | | | | | | | | | | |
| Describe the event: | | | | | | | | | | | | | |
| Who will be attending? |  | | | | | | | | | | | | |
| Number of persons expected onsite at any one time (including staff and contractors)? |  | | | | | | | | | | | | |
| Is this a new event? | ☐Yes ☐No | | | | | | | | | | | | |
| If **no**, how long has it been running? |  | | | | | | | | | | | | |
| Are you charging an entry fee at the event? | ☐Yes ☐No | | | | | | | | | | | | |
| Have you submitted a City of Launceston funding application? | ☐Yes ☐No | | | | | | | | | | | | |
| Would you like to receive further/information on funding available? | ☐Yes ☐No | | | | | | | | | | | | |
| Do you have Sponsors involved with the Event? | ☐Yes ☐No | | | | | | | | | | | | |
| If **yes**, who are they: | | | | | | | | | | | | | |
| **Insurance** | | | | | | | | | | | | | | |
| Do you hold Public Liability insurance? If **yes**, please attach a copy to this form. If **no**, please seek independent advice on your events insurance requirements. | | | ☐Yes ☐No | | | | | | | | | | | |
| Does your Public Liability insurance cover this event? | | | ☐Yes ☐No | | | | | | | | | | | |
| Are you hiring staff for this event? | | | ☐Yes ☐No | | | | | | | | | | | |
| If **yes**, do you have WorkCover Insurance? If **yes**, please attach a copy to this form. | | | ☐Yes ☐No | | | | | | | | | | | |
| **Marketing / Ticketing / Communication** | | | | | | | | | | | | | | |
| Is the event announced? | | | ☐Yes ☐No | | | | | | | | | | | |
| Is the event ticketed? | | | ☐Yes ☐No | | | | | | | | | | | |
| Will the Mayor and/or Aldermen be invited to perform official duties at this event? | | | ☐Yes ☐No | | | | | | | | | | | |
| Do you accept Companion Cards? | | | ☐Yes ☐No | | | | | | | | | | | |
| Does the event have a website or Facebook page? | | | Website URL: | | | | | | | | Facebook URL: | | | |
| Would you like the event listed on the Council website:  www.destinationlaunceston.com.au/ www.launceston.tas.gov.au/lcc/ | | | ☐Yes ☐No | | | | | | | | | | | |
| If **yes**, please write a blurb and attach on email 1 - 3 high resolution pictures. | | | | | | | | | | | | | | |
| If schedule permits, would you like the event shared on the City of Launceston's Facebook page? | | | ☐Yes ☐No | | | | | | | | | | | |
| Will you require any road / street signage to be installed? | | | ☐Yes ☐No | | | | | | | | | | | |
| If **yes**, please provide the following:  Signage type / Signage size / Proposed locations for signage / dates installed / copy of signage artwork.  **NB** From time to time, City of Launceston can place posters in the Visitor Centre and Town Hall, Customer Service. | | | | | | | | | | | | | | |
| Have you prepared a consultation plan for this event including when and how you will advise neighbouring residents and businesses of the event? | | | ☐Yes ☐No | | | | | | | | | | | |
| When and how you will advise emergency and essential services of the event? | | | | | | | | | | | | | | |
| **Location** | | | | | | | | | | | | | | |
| Please provide detailed information on the exact location of your event. Please advise if you would like to be provided with an aerial map to mark your location. | | | | | | | | | | | | | | |
| If using a park or reserve, do you require vehicle access? Please note that vehicle access is subject to agreement and a traffic management plan must be provided. A Hiring Agreement and a Key will be necessary and charges will be incurred. | | | | ☐Yes ☐No | | | | | | | | | | |
| **Utilities** | | | | | | | | | | | | | | |
| Will you require access to power at the event? Please note power may not always be available and there may be charges associated with getting power to some areas. | | | | ☐Yes ☐No | | | | | | | | | | |
| Will you require access to water at the event? Please note water may not always be available and there may be charges associated with getting water to some areas. | | | | ☐Yes ☐No | | | | | | | | | | |
| **Access** | | | | | | | | | | | | | | |
| Are accessible toilets available? | | | | ☐Yes ☐No | | | | | | | | | | |
| Do you have clear, unobstructed paths of travel both inside and out? | | | | ☐Yes ☐No | | | | | | | | | | |
| Do you need ramps for any area? | | | | ☐Yes ☐No | | | | | | | | | | |
| Does signage include use of symbols? | | | | ☐Yes ☐No | | | | | | | | | | |
| Have you included accessible parking bays? | | | | ☐Yes ☐No | | | | | | | | | | |
| **Permits and Licences** | | | | | | | | | | | | | | |
| **Liquor** | | | | | | | | | | | | | | |
| Will alcohol be sold or served at your event? If a Council reserve park or sportsfield, City of Launceston must give landowner consent. | | | | ☐Yes ☐No | | | | | | | | | | |
| If yes, what measures will be put in place to prevent under-age drinking and promote responsible serving? | | | | | | | | | | | | | | |
| If alcohol is being sold, do you have a Liquor Licence?  If **yes**, please attach a copy to this form | | | | ☐Yes ☐No | | | | | | | | | | |
| **Raffles** | | | | | | | | | | | | | | |
| Are you running a raffle, bingo or other gaming activity? | | | | | ☐Yes ☐No | | | | | | | | | |
| If yes, do you need a permit? If **yes**, please attach a copy to this form. | | | | | ☐Yes ☐No | | | | | | | | | |
| **Food** | | | | | | | | | | | | | | |
| Will food be sold or provided at the event? | | | | | | | | | ☐Yes ☐No | | | | | |
| Will food be provided by a vendor who is registered under the Food Act?  If no, a temporary food licence may be required. | | | | | | | | | ☐Yes ☐No | | | | | |
| **Temporary Structures** | | | | | | | | | | | | | | |
| Will the event include hoeckers, marquees, shade structures? | | | | | | | | ☐Yes ☐No | | | | | | |
| Will these be secured with weights or pegged?  Please note that it is the City of Launceston’s preference that all temporary structures are secured with weights and you may not be permitted to use pegs in certain areas. | | | | | | | | ☐Weighted ☐Pegged | | | | | | |
| Will the event include a stage? | | | | | | | | ☐Yes ☐No | | | | | | |
| Will the event include bank seating / grandstand? | | | | | | | | ☐Yes ☐No | | | | | | |
| Will the event include a gantry? | | | | | | | | ☐Yes ☐No | | | | | | |
| Will the event include rides / Amusements? | | | | | | | | ☐Yes ☐No | | | | | | |
| Will you have any tables or chairs? | | | | | | | | ☐Yes ☐No | | | | | | |
| Will you have any other temporary structures? | | | | | | | | ☐Yes ☐No | | | | | | |
| If **yes**, please describe: | | | | | | | | | | | | | | |
| **Road Closures and Traffic Management** | | | | | | | | | | | | | | |
| Will the event occur on and/or alter normal access to a public footpath, roadway or nature strip? | | | | | | | | ☐Yes ☐No | | | | | | |
| Will the event disrupt or alter normal trading for local businesses? | | | | | | | | ☐Yes ☐No | | | | | | |
| If yes to either, have you sought approval of your Traffic Management Plan / Road Closure? | | | | | | | | ☐Yes ☐No | | | | | | |
| Will you require vehicle access to the site to set up equipment and for suppliers? | | | | | | | | ☐Yes ☐No | | | | | | |
| Will you require the use of any CoL Carpark or Parking bays for your event? | | | | | | | | ☐Yes ☐No | | | | | | |
| **Public Transport Disruptions** | | | | | | | | | | | | | | |
| Will the event result in any disruption to public transport services? | | | | | | | | | ☐Yes ☐No | | | | | |
| If yes, please give details: | | | | | | | | | | | | | | |
| **Fireworks** | | | | | | | | | | | | | | |
| Are you planning a fireworks display?  If a Council reserve, park or sportsfield, City of Launceston must give landowner consent. | | | | | | | ☐Yes ☐No | | | | | | | |
| If yes, do you have a certificate of currency and safety plan for the qualified pyro technician?  If **yes**, please attach a copy to this form. | | | | | | | ☐Yes ☐No | | | | | | | |
| If yes, have you advised the local fire station? | | | | | | | ☐Yes ☐No | | | | | | | |
| If yes, have you advised the Aviation Authority? | | | | | | | ☐Yes ☐No | | | | | | | |
| If yes, have you notified local residents warning of the possible effects on pets and ways to minimise impact on pets? | | | | | | | ☐Yes ☐No | | | | | | | |
| **Management Plans** | | | | | | |  | |  | | |  |  | |
| Have you notified Tas Police in writing of this event? | | | | | | | ☐Yes ☐No | | | | | | | |
| If **yes**, which branch? | | | | | | |  | | | | | | | |
| Have you notified Ambulance Tasmania about your event? | | | | | | | ☐Yes ☐No | | | | | | | |
| If **yes**, which station? | | | | | | |  | | | | | | | |
| Have you notified the Tas Fire about your event? | | | | | | | ☐Yes ☐No | | | | | | | |
| If **yes**, which station? | | | | | | |  | | | | | | | |
| Have you notified the State Emergency Service (SES) about your event? | | | | | | | ☐Yes ☐No | | | | | | | |
| If **yes**, which branch? | | | | | | |  | | | | | | | |
| **Site Layout Plan** | | | | | | | | | | | | | | |
| Have you prepared a site layout plan? | | | | | | | ☐Yes ☐No | | | | | | | |
| Have you considered the following?   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | * Amenities (power, tap water) | * Entry / exit points | * Evacuation routes (pedestrian + vehicle) | | * Marquees and stalls | * Parking | * Road closures | | * Toilets (existing and temporary) | * Stages | * Information tent | | * Licensed liquor   outlets (bars) | * First Aid post | * Signage | | * Water hazards | * Amusement rides | * Lighting equipment | | * Public hydration station | * Refuse and recycling | * Exclusion zones | | * Designated smoking area(s) | * Firefighting equipment | * Event boundaries | | | | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Emergency and Risk Management** | | | | | | | | | |
| Have you prepared an Emergency Management Plan? | | ☐Yes ☐No | | | | | | | |
| Have you prepared a Risk Assessment? | | ☐Yes ☐No | | | | | | | |
| Have you considered the following?   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | * Crowd management | * Traffic Management during event bump in / bump out | * Contractor’s safety plans | | * Marking of exclusion zones | * Fire hazards | * Evacuation plans | | * Electrical and gas safety | * Responsible alcohol service | * Hazardous equipment | | * Sharps and syringes | * Adverse weather conditions | * Complaints | | * Water hazards | * Safety warden document | * Slip, trip, fall &burn   hazards | | * Venue specific hazards | * UV radiation | * Missing person | | * Bump in / bump out timings | * Incorrect advertising / media | * Armed hold up | | * Waste management | * Anti- social behaviour | * Accessibility access | | | | | | | | | | | |
| Name of Safety Officer: | |  | | | | | | | |
| Contact Number of Safety Officer: | |  | | | | | | | |
| Contact Name of First Aid provider: | |  | | | | | | | |
| Contact Number of First Aid Provider: | |  | | | | | | | |
| Are you hiring security staff for this event? | | ☐Yes ☐No | | | | | | | |
| If **yes**, name of company? | |  | | | | | | | |
| If **yes**, how many staff? | |  | | | | | | | |
| Have you read the Best Practice Reference documents listed? | | ☐Yes ☐No | | | | | | | |
| **Environmental Management** | | | | | | | | | |
| Have you arranged for bins to be provided at the event? | | ☐Yes ☐No | | | | | | | |
| Have you arranged for post event clean up, including rubbish removal? | | ☐Yes ☐No | | | | | | | |
| Have you arranged for sun protection and shade? | | ☐Yes ☐No | | | | | | | |
| Will patrons have access to drinking water? | | ☐Yes ☐No | | | | | | | |
| Will there be music or other amplified sounds at the event? | | ☐Yes ☐No | | | | | | | |
| If yes, do you have measures to reduce noise? | | ☐Yes ☐No | | | | | | | |
| Please describe your noise reduction plans | | | | | | | | | |
| Have you provided adequate toilets for event patrons, staff and contractors? | | ☐Yes ☐No | | | | | | | |
| Will the event include a Petting Zoo? | | ☐Yes ☐No | | | | | | | |
| Will the event include camping areas? | | ☐Yes ☐No | | | | | | | |
| Will the event be Smoke Free?  **NB** A Smoke-Free Management Plan must be submitted to [public.health@dhhs.tas.gov.au](mailto:public.health@dhhs.tas.gov.au) for all events where a Place of Assembly licence is required (1000 or more people at any one time for more than 2hours). | | ☐Yes ☐No | | | | | | | |
| Has the event been approved to include Designated Smoking Area(s)? | | ☐Yes ☐No | | | | | | | |
| **Other** | |  |  | |  | |  | | |
| Is there any further information you would like to tell us, or request? | | | | | | | | | |
| **Declaration** | | | |  | |  | |  |  |
| . I/we have read and understood the contents of Event Notification Form and agree to accept responsibility for the safe operation and management of the Event and the suitability of any Management Plans prepared. Further, I/we accept responsibility for obtaining any necessary permits and licenses and for complying with all relevant laws and regulations. I/we understand that a copy of this Event Notification Form and any relevant attachments may be provided to Tasmanian Police for their information. I/we acknowledge that this form is provided by Council for information only, is not legal advice and that no liability rests with the Council for any failure on my/our part to take or not take any required action. | | | | | | | | | |
| Name |  | | | | | | | | |
| Position |  | | | | | | | | |
| Signature |  | | | | | | | | |
| Date | \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ | | | | | | | | |

Completed applications need to be returned to City of Launceston in one of the following ways:

**Mail** Events Facilitation Officer **Email** [Contactus@launceston.tas.gov.au](mailto:Contactus@launceston.tas.gov.au)

City of Launceston **in Person** Customer Service Centre

PO Box 396 Town Hall, 18-28 St John Street, Launceston, Tasmania 7250 Launceston, Tasmania 7250

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| --- | --- | --- | --- | --- | --- | --- |
|  | **File No. SF4604** | | | | | |
| **EO** |  | **OD** |  | **Box** |  |
| **Doc. No.** | | | | | |
| **Action Officer** | | | **Date Received** | | |
| **Kimberley Pease** | | |  | | |