

Application for Busking Permit

Please complete in BLOCK letters

Applicant Details

Title Name

Street No Street

Suburb State Postcode

Postal Address (if different from street address)

Phone B M

Email

(Required to be able to access busking booking calendar)

Date of Birth If under 16 years of age, the parental/guardian consent form must be completed and attached

Performance Name

Public Liability Insurance

- ☐ I have my own current PLI and a copy is attached
- ☐ I wish to apply for PLI under Council's cover until 30 June, 2024 @ \$29

Code of Conduct

- ☐ I agree to comply with the City of Launceston's Code of Conduct - Busking 05-Plx-022

Your Signature _____

Date / /

Please email completed form to CoLCustomerService@launceston.tas.gov.au

Personal Information Protection Statement

As required under the *Personal Information Protection Act 2004*

1.	Personal information is managed in accordance with the <i>Personal Information Protection Act 2004</i> 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.

File No.					
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Action Officer			Date Received		