

Prescribed Activity Application: Conduct Roadside/Itinerant Vending

Local Law No. 1 (Administration) 2020

You MUST complete ALL questions unless the form indicates otherwise. Incomplete forms or forms without all necessary information and documentation will result in your application not being a properly made application.

1. APPLICATION TYPE

Itinerant Vending (no set location) Roadside Vending (set location)

** Application must comply with Council's Roadside Vending policy and Dept Transport & Main Roads Roadside Vending Guidelines.*

2. APPLICANT DETAILS

Note: The applicant is the person who will hold the permit and will be legally responsible for complying with the applicable conditions. A business name or trust is not a legal entity and should not be entered in this field as the applicant. Where a person or company operates a business, the applicant is the person or company.

Applicant (person(s) or company/organisation):

DOB (if person):

Business Trading Name:

ABN:

Postal Address:

Telephone: H: W: M:

Email:

Contact for Application:

M:

On-Site/Emergency Contact:

M:

3. OPERATING TIMES

Period of Operation: 12 months

Seasonal-dates: *From:* *To:*

Days and Times of Operation:

| | | |
|------------------------------------|--------------------|---------------------|
| <input type="checkbox"/> Monday | Start Time: | Finish Time: |
| <input type="checkbox"/> Tuesday | Start Time: | Finish Time: |
| <input type="checkbox"/> Wednesday | Start Time: | Finish Time: |
| <input type="checkbox"/> Thursday | Start Time: | Finish Time: |
| <input type="checkbox"/> Friday | Start Time: | Finish Time: |
| <input type="checkbox"/> Saturday | Start Time: | Finish Time: |
| <input type="checkbox"/> Sunday | Start Time: | Finish Time: |

Chief financial

OFFICE USE

Receipt Type: 28

Payment Amount: \$166.00
(Additional approval fees will be charged by invoice)

Receipt No:

CSO:

4. VEHICLE DETAILS

Will a vehicle be used for the activity? No – go to next section. Yes – complete details below.

Make:

Model:

Registration Number:

State of Registration:

5. EQUIPMENT DETAILS

Is a trailer used? Yes No

Trailer Registration Number:

Trailer Dimensions:

Additional Equipment: Marquee Stand/s

Table/s Other:

Marquee Size: (m)

6. STATIONARY VENDING LOCATION

7. GOODS AND SERVICES TO BE SOLD

Provide details of the goods and services to be sold:

8. SUPPORTING INFORMATION (attach if more space and detail needed)

What measures will be taken to ensure that the activity does not significantly detract from the capacity of the road to provide safe vehicular and, where relevant, pedestrian thoroughfare?

What measures will be taken to ensure existing services located in, along, over or adjacent to the road/local government controlled area will not be adversely affected?

9. PUBLIC LIABILITY INSURANCE

Certificate of Currency must be provided prior to the event/activity and:

- Note Douglas Shire Council as an interested party;
- Coverage is for at least \$20 million; and
- Cover the scope and dates of the activity.

Name of Insured:

Name of Insurer:

Policy No:

Policy Expiry Date:

10. RELEASE AND INDEMNITY

In consideration of Douglas Shire Council ("Council") issuing me/us with The Approval for the purpose described or allowed under The Approval ("the activity/activities"), I/we:

1. release and discharge Council and Council's agents, servants, officers and insurers ("the Related Parties") from and in respect of all liability, claims, losses, damages or proceedings which I/we may have (either now or accruing in the future) against Council and/or the Related Parties in respect of, or arising out of, or in connection with the activity/activities;
2. agree that the release and discharge given under clause 1 may be pleaded by Council and the Related Parties as a bar to any action, suit or proceeding commenced now or taken at any time by Council and/or the Related Parties, against Council and/or the Related Parties, or to which Council and/or the Related Parties is or are joined as a party or parties, in respect of, or arising out of, or in connection with the activity/activities; and
3. agree that I/we am/are liable for and shall indemnify Council and the Related Parties against any liability, claim, loss, damage or proceeding in respect of, or arising out of, or in connection with the activity/activities.
4. The release and indemnity provided by you under 1-3 is, however, reduced to the extent that the Council and/or any of the Related Parties have caused or contributed to the relevant liability, claim, loss or damage.

The covenants given under this document are binding upon me/us and my/our heirs, executors, successors and permitted assigns.

11. CHECKLIST AND SUPPORTING DOCUMENTS

| | Applicant Supplied | N/A | Officer Checked |
|--|--------------------------|--------------------------|--------------------------|
| Have you read the conditions below and have all sections been completed and form signed? | <input type="checkbox"/> | | <input type="checkbox"/> |
| Copy of a Road Corridor Permit (RCP) if the nominated site is on a State Controlled Road. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Attach a copy of your Public Liability Insurance . | <input type="checkbox"/> | | <input type="checkbox"/> |
| Attach a Site Plan (see Guide to Site Plan below) – Roadside Vending (set location) Only | <input type="checkbox"/> | | <input type="checkbox"/> |
| Attached Food License (if applicable) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Attached copy of Vehicle registration certificate/s | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Photo's of vehicle and set-up | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

6. DECLARATION

To the Chief Executive Officer, Douglas Shire Council

I / We make application under *Local Law No. 1(Administration) 2020* for approval to conduct the prescribed activity outlined in this application form and declare that the information provided by me in this application is true and correct, and agree to comply with all requirements and conditions as approved.

Print Name:

Signature:

Dated:

Douglas Shire Council – Privacy Collection Notice:

Douglas Shire Council collects and manages personal information in the course of performing its activities, functions and duties. We respect the privacy of the personal information held by us. The way in which the council manages personal information is governed by *the Information Privacy Act 2009* (Qld). We are collecting your personal information in accordance with *the Local Government Act 2009* so that we can assess and finalise your application. Generally, we will not disclose your personal information outside of Council unless we are required to do so by law, or unless you have given us your consent to such disclosure. For further information about how we manage your personal information please see our Information Privacy Policy.

12. SITE PLAN CHECKLIST

Attach a site plan, which clearly indicates all of the following applicable to the activity:

- | | |
|---|--|
| <input type="checkbox"/> Location of vending area | <input type="checkbox"/> Site entrances/exits |
| <input type="checkbox"/> Set up details including all equipment | <input type="checkbox"/> Waste/refuse facilities |

13. PRESCRIBED FEES (Applicable from 1 July 2024 to 30 June 2025)

| | |
|--|--------------------------------------|
| <input type="checkbox"/> New Application/Transfer Fee | \$ 166.00 |
| <i>Area Use/Impact Fees (Invoiced to business when approved)</i> | <i>See Fees and Charges Schedule</i> |