



APPLICANT DETAILS		
Name of proprietor(s):		
Email:		
Postal address:		
Phone number:	Mobile number:	
BUSINESS DETAILS		
Trading name:	ABN/ACN:	
Premises address (if applicable):		
Trading location (name of building, reserve, street and address):		
General description of set up (e.g. van, table, tent):		
Description of good(s) or service(s) for sale/hire:		
BUSINESS OPERATION		
Dates from:	to:	Hours:
ADDITIONAL INFORMATION		
<i>Please ensure all boxes are ticked (✓) before submitting form</i>	<b>Yes</b>	<b>No</b>
Certificate of Currency for public liability insurance (minimum \$20 million) provided with this application	<input type="checkbox"/>	<input type="checkbox"/>
Accurate site plan and/or photographs of setup provided with this application	<input type="checkbox"/>	<input type="checkbox"/>
Applying to waive permit fee on the basis of a charitable/eligible community organisation	<input type="checkbox"/>	<input type="checkbox"/>
Evidence of the organisation's not-for-profit or charitable status	<input type="checkbox"/>	<input type="checkbox"/>
DECLARATION		
I/we, the applicant, declare that the information contained in this application is true and correct in every particular.		
Full name:	Position:	
Signature:	Date:	