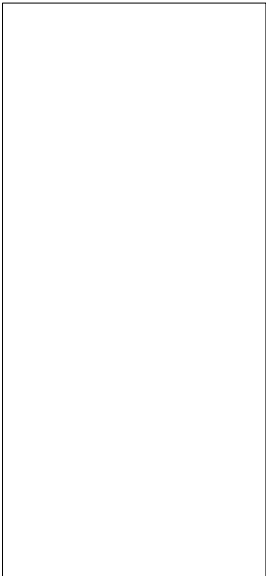




APPLICATION FOR COMMERCIAL USE OF LOCAL GOVERNMENT CONTROLLED AREAS AND ROADS (MOBILE VENDORS) NEW/RENEWAL FORM

Isaac Regional Council is collecting personal information you supply on this form in accordance with the Local Government Act 2009 and Local Law (control of advertising). The personal information collected on this form will be used to keep records on advertising signage. Your personal information will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless required by law or unless your permission is sought. Personal information is handled in accordance with the *Information Privacy Act 2009*.



APPLICATION DETAILS	
<input type="checkbox"/> New Application	<input type="checkbox"/> Renewal

APPLICANT DETAILS			
Name			
Business Name			
ACN/ARBN			
Postal Address			
Phone	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; text-align: center;">Mobile</td> </tr> </table>		Mobile
	Mobile		
Email			

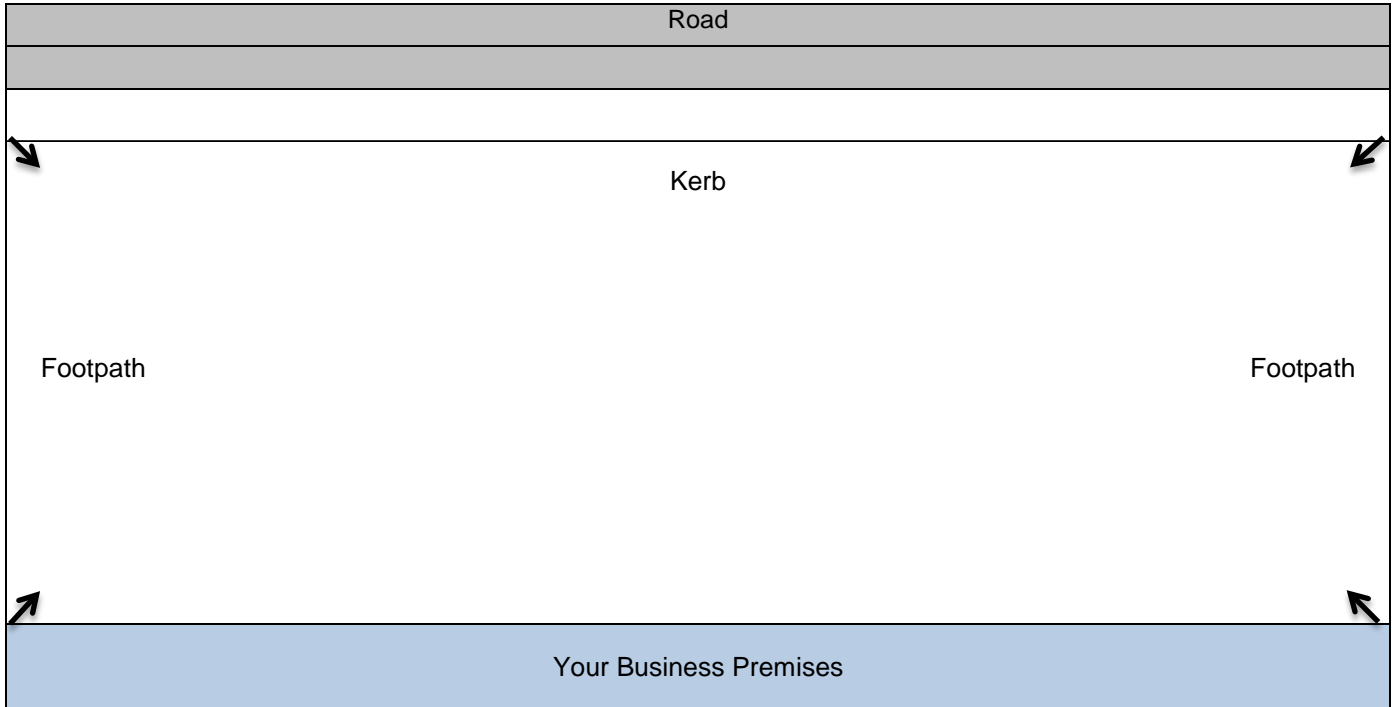
ACTIVITY TYPE													
<input type="checkbox"/> Mobile food vending	<input type="checkbox"/> Roadside vending	<input type="checkbox"/> Other											
Where do you propose to operate from													
Name of Premises/Area													
Street Address													
Lot on Plan													
Type of Vehicle/Stand/Stall													
Vehicle Registration Details	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Registration No.</td> <td style="width: 30%;"></td> <td style="width: 20%;">Make</td> <td style="width: 20%;"></td> </tr> <tr> <td>Model</td> <td></td> <td>Colour</td> <td></td> </tr> <tr> <td>Year</td> <td colspan="3"></td> </tr> </table>	Registration No.		Make		Model		Colour		Year			
Registration No.		Make											
Model		Colour											
Year													
Food License No. (if applicable)													
Products/services to be sold													
How do you propose to dispose of waste													
<input type="checkbox"/> Footpath dining	<input type="checkbox"/> Displaying goods for sale on footpaths												



Name of the Premises	
----------------------	--

Clearly identify on the diagram below or on a separate sheet:

- The width of the footpath outside your business
- Any obstructions on the footpath outside your business (power pole, street bin, parking meter, etc.)
- The location of each item
- The clearance distance to the curb and shop frontage when items are place in the preferred locations



Please Note scale plans 1:100 of the proposal may be required.

DURATION OF PROPOSED ACTIVITY

Duration License is Required	Start	am/pm	Finish	am/pm
Specific Days of Operation	<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday	<input type="checkbox"/> Thursday
	<input type="checkbox"/> Friday	<input type="checkbox"/> Saturday	<input type="checkbox"/> Sunday	
Specific Times of Operation	Start	am/pm	Finish	am/pm

ADVERTISING

Any Proposed Advertising Signage	<input type="checkbox"/> Yes <input type="checkbox"/> No
Details of the signage	
How the signage will be secured whilst displayed	

CONSENT OF OWNER/S OF LAND

This is the name, address and signature of the owner/s of the premises. If there are additional owners, please attach additional owner information.

Name	
Postal Address	

Version: 4

Form No: PECS-084

Authorised by: Director Planning Environment and Community Services

Document Maintained by: Local Laws

Next Review Date: 05.05.2018

ABN 39 274 142 600 PO Box 97 Moranbah QLD 4744 P 1300 472 227 F (07) 4941 8666 www.isaac.qld.gov.au

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Phone		Mobile	
Email			
I/We, being the owner of the land described in this application support the operation of the prescribed activity.			
Signature			Date
Print Name			
Signature			Date
Print Name			

LIABILITY INSURANCE

All applications/s must

- (a) For the duration of the term of the approval, maintain in full force and effect a standard liability insurance policy:
- (i) In the joint names of the approval holder and the local government and
 - (ii) Covering their respective rights, interest and liabilities to third parties in respect of accidental death of, or accidental injury to, person or accidental damage to property and
 - (iii) for an amount of no less than Ten Million Dollars (\$10,000,000.00) for any single event and
- (b) Prior to the commencement of the activity, provide the local government with a certificate of currency for the standard liability insurance and
- (c) Indemnify the local government and the State against all actions, proceedings, claims, demands, costs, losses, damages and expenses which may be brought against, or made upon, the local government or the state as a result of the activity

Insurance Company Name			
Name of Insured			
Policy Number		Amount	\$
Policy Expiry Date			

ADDITIONAL CRITERIA FOR THE GRANTING OF AN APPROVAL

The proponent must satisfy each one of the following values. The response must be in writing and must detail how the information was collected and how the proponent intends to satisfy each value.

1. The prescribed activity for which the approval is sought must not unduly interfere with the proper use of the local government controlled area or road
2. There must be a public demand for the prescribed activity in respect of which the approval is sought
3. The physical characteristics of the local government controlled area or road must be suitable for the prescribed activity
4. The prescribed activity must not cause nuisance, inconvenience or annoyance to –
 - The occupier of any land which adjoins the location of the prescribed activity or
 - Vehicular traffic or
 - Pedestrian traffic
5. The prescribed activity must not have a detrimental effect on the amenity of the surrounding area
6. If the prescribed activity is **mobile roadside vending or stationary roadside vending** -
 - Whether the prescribed activity for which the approval is sought is competitive with business activities operated from fixed premises in the local government area and

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- Whether the business activities operated from the fixed premises are sufficient to meet public demand for goods or services proposed to be sold as part of the operation of the prescribed activity and
- Whether the grant of the approval will result in the substantial competition between the applicant for the approval and the operators of business activities operated from fixed premises in the local government area and
- Whether the goods or services proposed to be sold as part of the operation of the prescribed activity, or similar goods or services, are available for sale from fixed premises near the location of the prescribed activity

ATTACHMENTS

Please attach the following:

1. A statement covering the criteria for the granting of an approval
2. A detailed site plan/diagram showing
 - Exact location of proposed operation
 - Distance from any major landmark, road/street boundaries
3. A copy of the Registration Certificate for each vehicle to be used in the activity
4. A certificate of currency for Liability Insurance Policy to the minimum value of Ten Million Dollars (\$10,000,000.00) is required by Council. The standard liability insurance must indemnify Isaac Regional Council and the State against personal injury and property damage claims arising from the operation of this activity
5. A copy of the additional owner/s consent (if applicable). This consent must state the applicant/s name, the premises to which the application refers, provide details regarding the owner/s consent to the application and be signed by the owner/s

DECLARATION

I/We agree to abide by the conditions of the permit and agree to indemnify Isaac Regional Council and the State against all personal injury and property damage which Council may incur or become liable for. I declare the information provided in this application to be true and correct and have read, understand and will comply with the Conditions of Approval in this application.

Signature		Date	
Print Name			
Signature		Date	
Print Name			

PAYMENT METHODS

Credit Card Payment	<input type="checkbox"/> MasterCard			<input type="checkbox"/> Visa Card		
Card Holder Name						
Card Number		Expiry Date		CCV		
Total Amount Owing	\$					

Or
In person by making your payment at any Council Office within the region from 8.30am to 5.00pm Monday to Friday using a range of payment options including cash, cheque, credit card or EFTPOS.

Once completed please send form and any attachments with payment of fees within 14 day either:
 In person at your local Isaac Regional Council Office or
records@isaac.qld.gov.au or
 ISAAC REGIONAL COUNCIL,
 PO BOX 97, MORANBAH QLD 4744

DEPARTMENT USE ONLY			
Date Received		Fees Received	
Receipt No.		License No.	
<input type="checkbox"/> Approved as per application <input type="checkbox"/> Application NOT approved		<input type="checkbox"/> Approved with modifications (see notes below)	
Notes			
Processed by	Signature		Date
	Print Name		