

EVENT APPROVAL APPLICATION





EVENT APPROVAL APPLICATION

Please Note: an event is not approved until the City of Albany is satisfied that event organisers have met all conditions of the application and approval has been granted in writing.

SECTION A CONTACT DETAILS	
Name of Event Organiser/Applicant:	
Organisation/Business Name:	
Postal Address:	
Phone Number:	
Email Address:	
I have Read the Event Planning Guidelines: YES <input type="checkbox"/> NO <input type="checkbox"/>	
The Event Planning Guidelines is available online or from the Events Approval and Projects Officer on 08 6820 3035.	

SECTION B EVENT DETAILS	
Event Title:	
Event Description:	
Event Start Date:	
Event Start Time	
Event End Date:	
Event End Time:	
Bump-In Date:	
Bump-In Time:	
Bump-Out Date:	
Bump-Out Time:	
Is the Event Raising Money for Charity?	YES <input type="checkbox"/> NO <input type="checkbox"/>

If Yes, Please Provide the Charity Name and ABN as per the ACNC Registration:															
Anticipated Attendance:	Participants/Registrants:														
	Spectators:														
Entry to the Event:	Free <input type="checkbox"/> Donation <input type="checkbox"/> Ticketed <input type="checkbox"/>														
Cost, if Applicable:															
SECTION C															
LOCATION															
Location of Event:															
<p>If you wish to book the either the Albany Town Square or Albany Town Hall, you will need to complete either the Albany Town Square Booking Form or the Albany Town Hall Booking Form. Fees may apply.</p> <p>If you wish to book the Albany Heritage Park, please call 08 6820 3500 or email info@nationalanzaccentre.com.au.</p> <p>If you wish to book the Vancouver Arts Centre, please call 08 6820 3740 or email arts@albany.wa.gov.au.</p> <p>If you wish to book the Albany Leisure and Aquatics Centre, please call 08 6820 3400 or email alac@albany.wa.gov.au.</p>															
<p>If you would like to book a City of Albany Park or facility, please tick which reserve/facility is required.</p> <table border="0"> <tr> <td>1. Alison Hartman Gardens <input type="checkbox"/></td> <td>8. Eyre Park <input type="checkbox"/></td> </tr> <tr> <td>2. Apex Park – Lake Weerlara <input type="checkbox"/></td> <td>9. Frenchman Bay <input type="checkbox"/></td> </tr> <tr> <td>3. Bob Thompson Garden <input type="checkbox"/></td> <td>10. Lawley Park <input type="checkbox"/></td> </tr> <tr> <td>4. Bovell Park <input type="checkbox"/></td> <td>11. Middleton Beach Park <input type="checkbox"/></td> </tr> <tr> <td>5. Cull Park <input type="checkbox"/></td> <td>12. Nurses Memorial Gardens <input type="checkbox"/></td> </tr> <tr> <td>6. Ellen Cove <input type="checkbox"/></td> <td>13. Anzac Peace Park <input type="checkbox"/></td> </tr> <tr> <td>7. Emu Point <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> </table>		1. Alison Hartman Gardens <input type="checkbox"/>	8. Eyre Park <input type="checkbox"/>	2. Apex Park – Lake Weerlara <input type="checkbox"/>	9. Frenchman Bay <input type="checkbox"/>	3. Bob Thompson Garden <input type="checkbox"/>	10. Lawley Park <input type="checkbox"/>	4. Bovell Park <input type="checkbox"/>	11. Middleton Beach Park <input type="checkbox"/>	5. Cull Park <input type="checkbox"/>	12. Nurses Memorial Gardens <input type="checkbox"/>	6. Ellen Cove <input type="checkbox"/>	13. Anzac Peace Park <input type="checkbox"/>	7. Emu Point <input type="checkbox"/>	Other <input type="checkbox"/>
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<p>By booking a venue, the City of Albany can ensure that the location is not double-booked and that routine maintenance of park grounds is not in progress.</p> <p>This booking does not guarantee exclusive use. These areas are public spaces and the Crown Land (Reserves) Act does not allow for exclusive use.</p> <p>Please note, not all parks and gardens have public amenities available on site. If the</p>															



Contact Officer: Events Approval and Projects Officer
P: (08) 6820 3035 | E: eventsapprovals@albany.wa.gov.au
File Ref: CM.STD.3 | Synergy Ref: NAP1762093
Version: 16/01/2017

venue you wish to book is not on the form overleaf, please contact City of Albany Customer Service (08) 6820 3000.

<p>SECTION D</p> <p>MARKETING DETAILS</p> <p>The City of Albany would be pleased to help you promote your event and we have a range of promotional channels including Facebook, Twitter, Instagram and more.</p> <p>To be promoted through the City of Albany, the event must:</p> <ul style="list-style-type: none"> • Be held within the City of Albany • Have a broad appeal to residents and visitors • Not have religious or political affiliation • Not promote hateful or racist behaviours • Not promote commercial businesses (except where a business is an event sponsor and the promotion is focused upon the event, not the sponsor.) <p>To promote your event through the City of Albany, please send your promotional material to medialiaison@albany.wa.gov.au.</p> <p>Promotion through the City of Albany is not guaranteed and is subject to approval and space restrictions. The final decision is at the discretion of the City of Albany.</p>

<p>CITY OF ALBANY OFFICIAL ATTENDANCE</p> <p>Have you received funding from the City of Albany for this event? If yes, part of your funding obligations will be to invite members of Council, the Mayor and/or the City of Albany CEO.</p> <p>Please note, this is not a formal invitation. Formal invitation must be sent at least 4 weeks prior to the event. The invitation is to be addressed to the Mayor/CEO's Office, PO Box 484, Albany 6331 or emailed to staff@albany.wa.gov.au.</p>
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<p>SECTION E</p> <p>ENVIRONMENTAL HEALTH</p>		
<p>Is this Event Open to the Public:</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	
<p>FOOD</p>		
<p>Will there be Food Available at Your Event?</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>	
<p>If Yes, Please Provide Details: (Please use a separate sheet if required)</p>	<p>Food Businesses Registered in the City of Albany</p>	
	<p>Business Name & Contact Number:</p>	
	<p> </p>	
	<p> </p>	
	<p> </p>	
	<p> </p>	
<p>If bringing in food businesses from outside the City of Albany please provide a copy of Certificate of Food Business registration from their local government authority.</p>	<p>Food Businesses Registered Outside the City of Albany:</p>	
	<table border="1"> <tr> <td>Business Name and Contact Number:</td> <td>Food Business Certificate has</td> </tr> </table>	Business Name and Contact Number:
Business Name and Contact Number:	Food Business Certificate has	

		been Provided?
		YES <input type="checkbox"/> NO <input type="checkbox"/>
		YES <input type="checkbox"/> NO <input type="checkbox"/>
		YES <input type="checkbox"/> NO <input type="checkbox"/>
ALCOHOL		
Is this an Alcohol Free Event?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Is this Event being Advertised as BYO?	YES <input type="checkbox"/> NO <input type="checkbox"/> <input type="checkbox"/> If Yes, Please Provide Written Evidence that Permission to Consume Alcohol has been Given by the Land Holder.	
Is Alcohol being Provided at Your Event?	YES <input type="checkbox"/> NO <input type="checkbox"/> If Yes, Please Contact the Department of Racing, Gaming and Liquor on 1800 634 541 to Determine if you Need a Liquor License. I have attached a copy of my liquor license from Racing, Gaming and Liquor: YES <input type="checkbox"/> NO <input type="checkbox"/> OR <input type="checkbox"/> Department of Racing, Gaming and Liquor confirms that a Liquor License is not Required.	
NOISE MANAGEMENT		
Will there be Amplified Noise? <small>(i.e. recorded or live music, buskers, public address system, generators)</small>	YES <input type="checkbox"/> NO <input type="checkbox"/>	
If Yes, Please Provide Details: <small>(Please use a separate sheet if required)</small>	Type of Noise (Music, Generators, Other):	
	Please Provide Equipment Details:	
	What will be Done to Monitor and Minimise Noise Levels? <small>(Consider speaker location and orientation, distance to neighbours, use of generators, etc.)</small>	
TEMPORARY STRUCTURES		

Will Your Event Include Temporary Structures? (i.e. marquees, spectator stands, stage, bouncy castle, water slide or movie screen etc)	YES <input type="checkbox"/> NO <input type="checkbox"/>											
If Yes, Please Provide Details. (Please use a separate sheet if required)	<table border="1"> <thead> <tr> <th data-bbox="571 347 1102 398">Description</th> <th data-bbox="1102 347 1364 398">Size (m²)</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	Description	Size (m ²)									<p>Please note, a Form 2 – Application for Certificate of Approval will be required for each structure over 3 x 3m². This form will be provided by the Events Approval and Projects Officer when approval is granted.</p>
Description	Size (m ²)											
Will Your Event Include Amusements? (i.e. amusement rides, petting zoo, etc)	YES <input type="checkbox"/> NO <input type="checkbox"/>											
If Yes, Please Provide Details: (Please use a separate sheet if required)	<table border="1"> <thead> <tr> <th data-bbox="571 936 858 1014">Business Name</th> <th data-bbox="858 936 1364 1014">Type of Amusement</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	Business Name	Type of Amusement									
Business Name	Type of Amusement											
	<p>Please note, a Form 5 - Certificate of Electrical Compliance will be required for each structure. This form will be provided by the Events Approval and Projects Officer when approval is granted.</p>											
SIGNAGE AND FENCING												
Will Your Event Have Temporary Signage?	YES <input type="checkbox"/> NO <input type="checkbox"/> Please note that third party signage on private property is not permitted in the City of Albany. This means that signage advertising an event is not permitted on land other than that where the event is located.											
Will Your Event Include Boundary Fencing, Crowd Control Fencing or have Barriers Installed?	YES <input type="checkbox"/> NO <input type="checkbox"/> Please note, a Form 2 – Application for Certificate of Approval will be required for the installation/structure. This form will be provided by the Events Approval and Projects Officer when approval is granted.											
WASTE MANAGEMENT												
Will Your Event Require Additional Waste Bins?	YES <input type="checkbox"/> NO <input type="checkbox"/>											

If Yes, Please Arrange Through a Suitable Provider.	Provider	No of Bins	Location
	Time of delivery:		
	Time of collection:		

PEAK BODIES	
Is your event sanctioned by a peak body?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If yes, please detail what peak body has sanctioned your event?	

SECTION F TRAFFIC MANAGEMENT	
Will Your Event Include Any of the Following: Road Closures, Traffic Modifications, Additional Parking or a Transport Network (i.e. Buses)?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If Yes, Please Provide Details: <small>(Please use a separate sheet if required)</small>	Please note, a full Traffic Management Plan may be required.
I Have Attached all Relevant Permits/Traffic Management Plans:	YES <input type="checkbox"/> NO <input type="checkbox"/>

SECTION G COMMUNITY ENGAGEMENT	
Does Your Event Impact on Surrounding Residents and/or Businesses by Way of Road Closures, Noise or Other Circumstances?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If Yes, Please Provide Evidence of Notification.	I have attached a copy of stakeholder notification YES <input type="checkbox"/> NO <input type="checkbox"/> Attach <input type="checkbox"/>

SECTION H RESERVES AND SERVICES															
Do You Require Connection to the City's Electrical Power?	YES <input type="checkbox"/> NO <input type="checkbox"/>														
If Yes, Please Provide Details:	<p>Please note, power is <u>not</u> available at all locations. 10 amp <input type="checkbox"/> 15 amp <input type="checkbox"/> 3 phase <input type="checkbox"/></p> <p>Please note, a Form 5 - Certificate of Electrical Compliance will be required for each outlet. Each appliance is required to be tested and tagged. Compliance will be checked.</p> <p>Note, electricity consumption 3 phase connections for high impact events will be charged at 100% of cost.</p>														
Will You be Providing Your Own Power/Generators?	YES <input type="checkbox"/> NO <input type="checkbox"/>														
If Yes, Please Provide Details:	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Name of Supplier</th> <th style="width: 40%;">Location on Site</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr> <td colspan="2">Please provide the location/s on your site plan</td> </tr> <tr><td> </td><td> </td></tr> </tbody> </table>	Name of Supplier	Location on Site									Please provide the location/s on your site plan			
Name of Supplier	Location on Site														
Please provide the location/s on your site plan															
Do You Require Connection to the City's Water Supply?	YES <input type="checkbox"/> NO <input type="checkbox"/>														
Do You Require Access to Locked Bollard/Gate Areas?	YES <input type="checkbox"/> NO <input type="checkbox"/>														
If Yes, Please Provide Location/Details:															
Please note, water is <u>not</u> available at all locations.															

SECTION I MARKET STALLS	
Will There be Non-Food Market Stallholders Available at Your Event?	YES <input type="checkbox"/> NO <input type="checkbox"/>

If Yes, Please Detail the Goods Sold: (Please use a separate sheet if required)	
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SECTION J ANCILLARY EVENTS	
Does this Event have Any Ancillary Components or Events Attached to it? e.g. Workshops or Similar Pre or Post Main Event.	YES <input type="checkbox"/> NO <input type="checkbox"/>
If Yes, Please Provide Details: (Please use a separate sheet if required)	

SECTION K OTHER ASSOCIATED ACTIVITIES	
Is there Any Other Associated Activity that has Not Been Mentioned? (e.g. Fireworks, Aerial Display, Drone Activity, etc.)	YES <input type="checkbox"/> NO <input type="checkbox"/>
If Yes, Please Provide Details: (Please use a separate sheet if required)	

SECTION L SITE PLAN REQUIREMENTS	
<p>I have attached a site plan detailing the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Location/dimensions of all aspects of temporary infrastructure (marquees, bouncy castles, etc.) <input type="checkbox"/> First aid <input type="checkbox"/> Water <input type="checkbox"/> Toilets <input type="checkbox"/> Evacuation/muster points <input type="checkbox"/> Food vendors <input type="checkbox"/> Amenities <input type="checkbox"/> Emergency service access 	

YES NO

Please note, this list is not exhaustive and may include many other conditions.

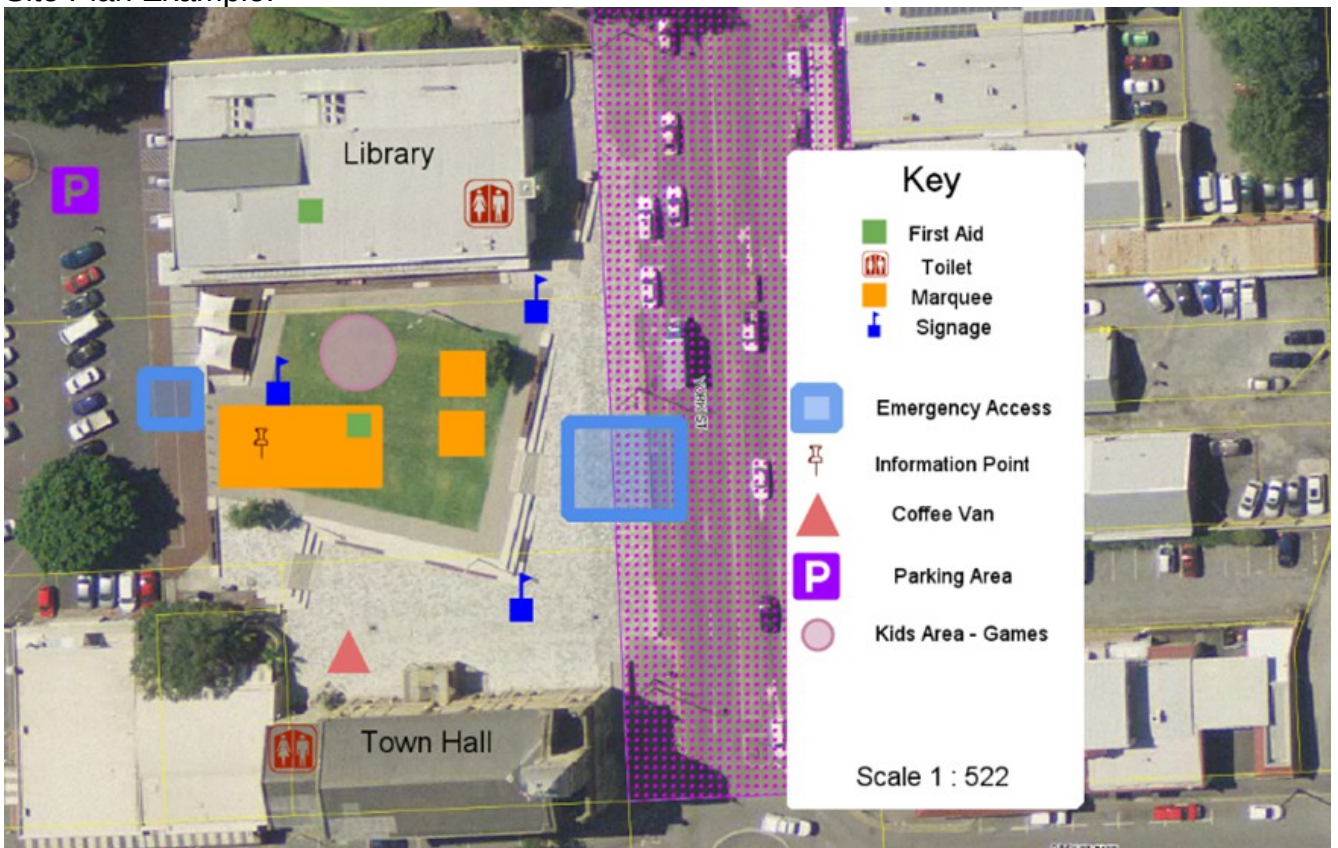
Other things that may be applicable to your event could include:

- Permanent structures on the site i.e. buildings, toilet blocks
- Stages (include dimensions)
- Generators
- Speakers
- Lighting towers
- Amusement rides (specify types)
- Fire extinguishers/hose reels or location of firefighting equipment
- Marshalls

We suggest using Google Maps. However, we need a clear picture of what your site will look like. This is also important for emergency management purposes.

If your event involves walking, cycling, running or swimming, please also include a route map.

Site Plan Example:



RISK ASSESSMENT TOOL

Please enter the corresponding score into the input column if the condition applies to your event.

This form will determine the level of risk associated with your event. Please refer to the table at the end of the document to see the level of risk associated with your event.

Please note: this document will not automatically calculate. Please manually calculate your final score.

Number of Patrons Attending	Score	Input
More Than 10,000	40	
5,000 – 10,000	30	
1,000 – 5,000	20	
500 – 1,000	15	
200 – 500	5	
100 – 200	2	
Less than 100	1	
Less than 50	0	
Entry Restrictions		
Open to General Public; Free or Prior Numbers not Known, General Admission	4	
Function for Select Membership, Pre Sold Tickets and Allocated Seating	2	
Private “Family” Function i.e. Birthday, Wedding etc.	1	
Crowd Dynamics		
Harsh Environment Crowd Pushing and Competition Almost Always Occurs	15	
Hostile Elements – Reasonable Possibility of Crowd Pressures at Some Stage (Sporting Fixtures etc.)	7	
Elderly, Mobility Impaired, Require Assistance and Close Supervision	4	
Young Children Requiring Close Supervision	2	
Healthy, Predominantly Good Mobility – Static Crowd	0	
Lighting		
Lighting Dimmed or Extinguished	10	
Normal Lighting	2	

Held During the Day (Daylight Hours) – Open Air or Building With Windows	1	
Duration		
Greater than Eight Hours	10	
Between Four and Eight Hours	4	
Between Two and Four Hours	2	
Between One and Two Hours	1	
Up to One Hour	0	
Structures		
Spectator Stand Temporary (Score per Stand)	10	
Temporary Facilities or One Off Event	5	
Stage and Support System - Temporary - Complex (Score per Stage)	4	
Stage Permanent or Temporary Simple	2	
Marquee - Large Area Greater than 200m2 (Score per Marquee)	4	
Marquee - Medium 55m2 to 200m2 (Score per Marquee)	2	
Marquee or Stall - Small Less than 55m2 (Score per Marquee/Stall)	1	
Egress Difficulty		
Multi Storey Building or Basement with Only Stair Access to Open Space	10	
2 Storey Building	6	
Complex Single Storey Building, Multiple Areas	4	
Simple Single Storey Building – One Area	1	
Open Air	0	
Type of Use		
Pyrotechnical Display (Fireworks)	10	
Entertainment with Amplified Music	10	
High Risk Activities – Crowd Interaction	2	
Medium Risk Activities	1	
Low Risk Activities	0	
Sub-Total:		
Drugs and Alcohol – Multiplier		
Alcohol Banned or Traditionally Consumed in Moderation	Multiply the Sub-Total by 1	

BYO Alcohol; Alcohol is Sold / Provided and / or Illicit Drug Use is Likely	Multiply the Sub-Total by 2	
Total Score:		

Risk Rating	Score	Likelihood	Approval	Surveillance Frequency
Low Risk	0 to 10	Serious incident unlikely	Formal approval in accordance with Council policy. Provide guidance notes to operator/owner to advise building limitations and capacity. No Risk Management Plan or Risk Assessment required	Inspect in accordance with Council Policy
Medium Risk	11 to 25	Serious incident will occur at some stage	Formal approval required. Issue Certificate of Approval. Provide guidance notes to operator/owner to advise building limitations and capacity. No Risk Management Plan required. Emergency Plan Checklist for an Event mandatory Consider Risk Assessment	Events - Inspect set-up
Medium Risk	26 to 50	Serious incident will occur at some stage	Formal approval required. Issue Certificate of Approval. Provide guidance notes to operator/owner to advise building limitations and capacity. No Risk Management Plan required. Emergency Plan Checklist for an Event mandatory Risk Assessment mandatory Consider Risk Management Plan	Events - Inspect set-up
High Risk	50 to 100	Serious incident often occurs	Formal approval required. Issue Certificate of Approval mandatory. Emergency Plan Checklist for an Event mandatory Risk Management Plan mandatory	Events - Inspect and monitor

EMERGENCY PLAN CHECKLIST FOR AN EVENT

It is extremely important to have considered various emergencies that might occur at an event, and to undertake some planning as to how such emergencies should be handled.

The following 'Emergency Plan Checklist for an Event' should not be regarded as complete. There will always be differences due to the type of event, the locality and the facility. Event administrators should build upon the following list but at least it will give you a head start.

SECTION A	
Who will communicate and coordinate any emergency service response?	
Name:	
Mobile Contact Number:	
Who will be the second contact in case the first person is unavailable?	
Name:	

Mobile Contact Number:	
Where will emergency services be directed to gain access to your event site?	
Where will event patrons and staff be directed to in case of an evacuation?	
How will the person coordinating the emergency service response be identified?	
How will you communicate this information to your event staff and patrons? (i.e. Run sheet, Pre-event debrief?)	
How will First Aid be administered to patrons?	
How will a response to fire be managed /please detail any fire or first aid equipment located at the event site?	

SECTION B – PUBLIC LIABILITY INSURANCE	
Do you have Public Liability Insurance that Covers the Event?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, what level of Public Liability Insurance do you have? Please provide a dollar amount:	\$

SECTION C – FIRST AID/AMBULANCE	
Will you have an ambulance on site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you have a First Aid person on site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name:	
Phone:	
Accreditation:	
Expires:	
Name (Secondary):	
Phone:	



Accreditation:	
Expires:	

SECTION D – SECURITY		
Will there be a police presence at your event?		
Will you need security at your event?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Security/ Crowd Control Coordinator:		
Company:		
Phone:		
Emergency Contact:		
Number of Security Personnel assigned for Licensed Areas:		
Number of Security Personnel assigned for general event patrolling:		
Details of Security Personnel assigned for the event (If applicable) <i>Please attach additional sheet if required</i>		
Security Personnel Name:	Company:	License Number:

THIS APPLICATION WILL NOT BE ACCEPTED UNLESS SIGNED

The City of Albany requires applications to be submitted a minimum of 60 days prior to your event.

The City of Albany may require an extended event processing time depending on the complexity of your event. Please contact the Events Approval and Projects Officer to discuss your event if you are unsure.

Applicants are required to read the Event Planning Guidelines before signing the application.

<p>I have read and understood the information provided and have enclosed the appropriate forms, site plans and application fee.</p>
<p>Name (please print): _____</p>
<p>Signature: _____</p>
<p>Date: _____</p>