

**City of Melville
Activities in Thoroughfares, Public Places and Trading Local Law 2014**

Section 1. Applicant Details

Full Name (person's name):			
Applicants Residential Address:	Unit no.	Street no.	Street name
	Suburb		Postcode
Postal Address: (If different to residential address)			
Phone:		Mobile:	
Fax:		Email:	

Section 2. Details of Event or Location(s) of Stall

Event Name (if applicable):
Event Location:
Proposed Date/s of Operation:
Proposed Hours of Operation:

Section 3. Details of Stall(s)

Details of Food Stalls (continue on separate sheet if more space needed)	
Name of business:	Local Government where registered
Details of Non Food Stalls (continue on separate sheet if more space needed)	
Name of business:	Items Sold

Declaration

I confirm that all of the businesses listed on this application have public liability insurance to the value of \$10million and I have copies of the certificate of currency for each business.

I confirm that each food business listed has provided me with a copy of their food business registration certificate.

OFFICE USE

Health Application Number: _____

CS/CA Officer: _____

Stall Holders Application fees (all fees applicable as indicated below):

Note: Fee Increases may apply 1 July each financial year

Application/Daily Fee: \$55 Application fee

