Application for Permit to Occupy Doug Jennings Park and Moondarewa Spit

(TRUSTEE PERMIT / DEED OF INDEMNITY) LOT 528 ON WD6624

This Application must be submitted to Gold Coast Waterways Authority at least <u>6 weeks prior</u> to event.

QUERIES/PROBLEMS? If you have any queries or are having problems completing this form, please contact: Gold Coast Waterways Authority at 40-44 Seaworld Drive, Main Beach. Phone (07) 5539 7350.

1. APPLICANT DETAILS				
Individual/Organisation/Company (the				
Address:				
Company representative's name and p	position:			
Phone (Work):		Mobile:		
Contact person responsible for the da	y-to-day management of the	e event:		
Phone (Work):		Telephone (Hom	ne):	
Mobile:	Fax:		Email:	
Status of Organisation/Company (Cha If a Charitable or Non-Profit organisat				
2. DETAILS OF EVENT				
Name of Event:				
Will this be a fundraising event?:	Yes	□No		
If yes , purpose of funds raised:				
Area Required (refer to map) – mark re	equested area:			
Setup: Date:	Start Time:		Finish Time:	
Event: Date:	Start Time:		Finish Time:	
Clean-up: Date:	Start Time:		Finish Time:	
Target Group:		Anticipated atter	ndance:	
3. DESCRIPTION OF EVEN	(describe briefly the ever	nt and it's purpose)		



4. PUBLIC LIABILITY INSURANCE			
Copies of your current Certificates of Currency are to be lodged Damage insurance to an appropriate value for the continuance closure to your insurer by informing them of the full scope of ac Gold Coast Waterways Authority must be nominated as co-insu	e of a Permit to Occupy (Trustee Permit/Dee tivities of this event to ensure adequate co	ed of Indemnity). Please ensure you	fulfil your duty of dis-
5. LITTER MANAGEMENT			
Does your event require additional refuse disposal?	Yes	□No	
If yes , provide Site Plan indicating location, type and qu	yes, provide Site Plan indicating location, type and quantity of bins identified as follows:		
Who will be handling bin management for your event: _			
6. FOOD			
Will food be served or given away at the event?	☐ Yes	□No	
Will food be sold at the event?	☐ Yes	□No	
If yes , provide details as to the type of food that will be a	available at your event?		
Where food is being sold, you must comply with the Food Act 2 approval for a Limited Term Food Business Licence from the Cit 2 weeks prior to the event.			
7. ALCOHOL			
Will alcohol be available at the event? :			
Yes - alcohol will be sold or served at the event betw	veen the hours of	am/pm to	am / pm
	e following days:		
No - Alcohol will not be served or consumed at the e	vent. Go to question 8		
If yes , a Community Liquor Permit/Commercial Public Event Per Trading and Wine Development. A copy of permit must be prov	• •		nt of Tourism Fair
Who will be the holder of the permit?			
Name:Phone:	:	Fax:	
Address:			
How many alcohol dispensing and consumption areas v	will be available?		
Dispensing Areas:	Consumption Area	S:	
How will the boundaries of the dispensing and consump	otion areas be defined?		

A SITE MAP IS PROVIDED ON BACK PAGE FOR EASE OF USE



Permittee must provide ablution blocks to the satisfaction of the Ci	ty of Gold Coast. How	many portable toilets will you be provide	ling?
Male:Female:		Disabled:	
Who will be supplying the portable toilet facilities?:			
9. ELECTRICITY / WATER			
There is no electricity supply or water available in Doug Jennings F portable generators and water.	Park or Moondarewa S	pit. Permittee must provide his/her owr	n electricity with
10. TEMPORARY STRUCTURES / ADVERTISIN	G SIGNAGE		
Will you be erecting temporary structures at this event?	Yes	□No	
If yes , describe the type of structures e.g. marquees, tents, stalls, st	tage, food vendor, am	usement rides (e.g. jumping castle):	
Will you be erecting advertising signage?	Yes	□No	
If yes , please describe type of signage:			
11. EAST-WEST ROAD CLOSURE			
Will you require the east-west road to be closed during the event?	☐ Yes	□No	
If yes , provide detailed road closure plans showing traffic manager road closure times and wording for closure signage. Please note the public at all times. Refer to site map on back page for reference	nat access to the Seav	-	-
12. AQUATIC ACTIVITIES			
Is there an aquatic based activity as part of the event?	☐ Yes	□No	
If yes , provide details of all activities, water safety management pla and Moondarewa Spit.	n and a detailed map	showing location and proximity to Doug	Jennings Park
This information must be provided to Gold Coast Waterways Autho Authority is separate to this Permit To Occupy (Trustee Permit/De	-	-	quatic Event
Will you require the removal of watercraft in the Marine Stadium?	Yes	□No	
If yes , Gold Coast Waterways Authority must be notified at least 6 v	weeks prior to the eve	ent.	
13. NOISE			

An approval from the Licensing and Approval Section of City of Gold Coast must be provided to Gold Coast Waterways Authority at least **2** weeks prior to the event.



For major events you may be required to provi Does your event require security?	ide security.	☐ Yes	_ No, G €	o to Question 15	
If yes , provide details of the company providin	g the security, includin	ng the number of se	curity officers and t	heir licence numbers:	
Security Company:		Officer/s & Lice	ence Number/s:		
15. COMPLIANCE WITH ACCESS	S AND EQUITY	PRINCIPLES			
Is the site accessible for wheelchairs and for people with disabilities?				Yes	No
Does the promotional material for the event sp	pecify if the event is wh	neelchair accessible	e?	Yes	□No
If the event is a regional/large public event, have appropriate disability access toilets been provided?			en provided?	Yes	□No
Has adequate and suitable disability parking b	een incorporated into	site plans?		Yes	□No
16. EMERGENCY FIRST AID ANI	D MEDICAL SEF	RVICES			
Who is supplying the first aid service?:					
Number of first aid personnel:		Number of fi	rst aid posts:		
Times/Dates services will start: Date	Start	am / p	m. Date	Finish	am / pm
Emergency Procedures: Describe the process emergency evacuation plan:			e and emergency s	ervices will be informe	d of the
17. FIREWORKS					
Will there be a fireworks display at the event?		Yes	☐ No, G o	to Question 18	
If yes,					
On what days?:	Time of Display:		Location	of Display:	
Licensed Operator supplying the fireworks:					
Phone:	Mobile		Fax:		
Licensed Contractor conducting the show:					
Phone:	Mobile		Fax:		
You must provide a copy of the Fireworks Operator's display notification form (submitted to the Department	*		ce, Fireworks Operato	r's Licence and a copy of	the fireworks
17. WET WEATHER ALTERNATIV					
Detail the contingency plans in case of incleme					



19. SITE PLAN

Please attach a site plan, which clearly indicates, but is not limited to, any of the following applicable to the event. A blank site map is provided overleaf for ease of use:

.....

- · All entrances and exits
- Emergency access routes
- Parking
- Stage location
- Seating arrangements
- Entertainment sites
- Security and police locations
- First aid posts
- · Lost children/property
- Drinking water sites

- Food/vendors/stalls
- · Liquor outlets
- Approved liquor consumption areas
- Non-alcohol areas
- Portable toilet facilities
- Fire extinguishers
- Litter/refuse containers
- Temporary structures
- Advertising signage
- · Fireworks launch site

20. APPLICATION CHECKLIST

Fully completed Application must be submitted with the following attachments:

- Copy of City of Gold Coast permits/approvals
- Event Management Plan
- Food Business Licence
- Copies of Public Liability Insurance and Property Damage Insurance certificates of currency
- Road Closure Plans/Traffic Management Plan
- Aquatic Activities Plan
- Emergency Evacuation Plan

- Copy of Certificate of Registration as a Charitable or Non-Profit Organisation
- Copy of Liquor Licence approval (if applicable)
- Copy of Fireworks acknowledgement (if applicable)
- Site plan
- Queensland Police Service comments/requirements

Officer ___

21. DECLARATION AND SIGNATURE

agree to abide by the conditions stipulat	ed in this application and its attachments.	
Company representative Name:	Signature:	Date:
22. FEES		
For Office Use Only	For Office Use Only	For Office Use Only
Bond	Park Usage	Refund of Security Bonds
Amount Received	Amount Received	Amount Received
Receipt Number	Receipt Number	Receipt Number
Receipt Date	Receipt Date	Receipt Date

Officer ___

I declare that all information supplied in this application is true and correct. If this application is approved and a permit/deed of indemnity issued, I

Application must be submitted to:

Officer

40-44 Seaworld Drive, Main Beach Qld 4217

P: 07 5539 7350 | mail@gcwa.qld.gov.au | gcwa.qld.gov.au



