

Application for a Consumption of Liquor in a Public Place Permit

Local Law No. 1, General Local Law 2023, Part 3 - Section 3.1

What you need to do for your application



Complete the form

Make sure all sections are complete and you have supplied all supporting documents.



Make a payment

Please supply your credit card details or include a cheque for payment of this application



Supporting Documents

Please ensure you attach all supporting documents to your application.

Fees Apply

A fee of **\$195.00** per permit applies.

An invoice will be raised on approval of application.

Office Use Only

RT 137

Receipt Number

Date Paid

Collection of Information

Colac Otway Shire is committed to protecting your privacy. The personal information requested on this form is being collected by Colac Otway Shire for the purpose of an event permit application and other related purpose. The personal information will also be disclosed to Local Laws, Risk and OHS, Emergency Management, Health Protection and Building and Statutory Planning departments for the purpose of assessing if further approvals may be required for the event.. It will not be disclosed to any other external party without your consent, unless required or authorised by law. If the personal information is not collected, the application for a permit for Consumption of Liquor in a Public Place cannot proceed. If you wish to alter any of the personal information you have supplied to Colac Otway Shire, please contact Council via telephone on 5232 9400 or email inq@colacotway.vic.gov.au. Council's Privacy Policy is available from our website: colacotway.vic.gov.au/Council-the-shire/Council-policies and all Council Customer Service Centres.

NOT VALID UNTIL PERMIT IS ISSUED

Applicant Details

First name

Last name

Company

Best phone number to contact you on

Email

Street address or postal address

Event Details

Name of event

Location of event (please specify the **EXACT** location)

Requested Date(s) and Times

Start Date

End Date

Start Time

End Time

Application for a Permit for Consumption of Liquor in Public Places

Event Details, cont.

Nature of event being held: Wedding Family Function Business Function Sporting Function
 Other, please specify

Number of people attending the event:

Will liquor be sold and/or served at the event? YES NO

If YES, then a liquor license is required from the Victorian Gambling and Casino Control Commission.

Is alcohol being brought to the event by patrons for their own consumption (BYO)? YES NO

Insurance Policy - Certificate of Currency

Applicant's Public Liability Insurance Policy Certificate of Currency noting Colac Otway Shire as an interested party (with proof of a minimum \$20 million Public Liability Insurance coverage attached).

Form of Indemnity

THIS INDEMNITY is given for the Event Name

For the period of Date of Event to Date of Event

D	D	M	M	Y	Y
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 to

D	D	M	M	Y	Y
---	---	---	---	---	---

Event Organiser

BACKGROUND

The Applicant has applied to the Council for authority to use a portion of a road or other public area within the municipal district under Council's Local Laws. In consideration for the Council agreeing to this use, the Applicant agrees to indemnify the Council and to hold Public Liability insurance at all relevant times, as outlined below.

INDEMNITY

The Applicant agrees to indemnify and to keep indemnified Colac Otway Shire and its servants (collectively, 'the Council') from and against all actions, costs, claims, charges, expenses, penalties, demands and damages whatsoever which may be brought or made or claimed against the Council, in connection with the Applicant's use of the road and/or public area under this Agreement.

The Applicant's liability to indemnify the Council shall be reduced proportionally to the extent that an act or omission of the Council directly contributed to the loss or liability.

INSURANCE

The Applicant agrees to, at all times during the period of the use of the road/public land to take out and keep current a Public Liability Policy of Insurance ("The Public Liability Policy"), to cover legal liability to third parties for personal injury or property damage as a result of an occurrence in connection with the Applicant's use of the road/public land under this Agreement.

The Public Liability Policy must extend to cover the Council in respect to claims for personal injury or property damage arising out of the negligence of the Applicant.

Please sign and have witnessed one of the following authorisations.

SIGNED, SEALED and DELIVERED by

Applicants name (please print)

Date

D	D	M	M	Y	Y
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Signature

Application for a Permit for Consumption of Liquor in Public Places

Form of Indemnity, cont.

In Victoria in the presence of

Witness (please print)

Date

D	D	M	M	Y	Y
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Signature

OR

THE COMMON SEAL OF

was herunto affixed in accordance with its articles association in the presence of

Director

Secretary

Authorisation

By signing this agreement, I hereby authorise/agree:

- I have read and completed the Consumption of Liquor in a Public Place Permit Application form in good faith and have adhered to all the requirements specified by the Colac Otway Shire Council. All details are accurate and true, whereby the event will be organised and managed as I have described, unless advised otherwise by the Colac Otway Shire Council.
- I agree to adhere to all of the requests made during the assessment and planning phase that may be stipulated by the Colac Otway Shire and other agencies. I understand that making this application does not constitute approval of a Consumption of Liquor in a Public Place permit.
- I also understand that a Council Officer will advise and guide me as to the next steps once all applicable application fees have been made. Payment should accompany this application.

Signature

Name

Signature

Date

D	D	M	M	Y	Y
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Payment by credit card

What you need to do for your application



Complete the form

Make sure all sections are complete and you have supplied all supporting documents.



Submit payment

Please attach this to the FRONT of your application/documents
This form will be destroyed upon completion of the payment process

Office Use Only

Application No

Amount

 \$

Receipt Type

Receipt No

Date

DO NOT SCAN - TO BE DESTROYED

Your Details

First name

Last name

Company

Best phone number to contact you on

Email

Residential or postal address

Description of payment (i.e. Rates, Permit Application, Invoice)

Amount to be charged

 \$

Amount in words

Credit Card Details

Name on card

Credit Card Number

VISA CARD

MASTERCARD

AMEX

Expiry Date

CIV

Signature