

Application For A Division 2 Occupancy Permit

For a Place of Public Entertainment

Part 5 Building Act 1993 Building Regulations 2018 Part 14, Regulation 186(1)

From	<input type="checkbox"/> Owner of land	<input type="checkbox"/> Agent of owner of land
Event Applicant's Name:		
Event Applicant's Postal Address:		
Contact Person's Name:		
Contact Person's Telephone Numbers:		Mobile:
Contact Person's Email Address:		
Ownership details (Only if agent of owner listed above)		
Owner's Name:		
Owner's Postal Address:		
Owner's Telephone Numbers:		Mobile:
Owner's Email Address:		
In accordance with Section 54 of the Building Act 1993, I hereby apply for an Occupancy Permit for a Place of Public Entertainment at:		
Address _____ (Address of property where the event is proposed to be held)		
Property owner's consent	Copy attached	Yes <input type="checkbox"/> No <input type="checkbox"/>
Name of the property (where applicable)		
Existing Property Details		
Information regarding existing buildings proposed to be used for the event:		
You are required to attach a copies of the most current Annual Essential Safety Measures Reports for the buildings		Copies attached Yes <input type="checkbox"/> No <input type="checkbox"/>

Name of Event							
Period of Occupation							
Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Date							
Commencement Time							
Conclusion Time							

Number of Persons	
Note: Indicate the maximum number of persons to be in attendance at the event at any one time ie. includes participants and spectators	

Location for the Display of Occupancy Permit				
Note: Must be in a prominent position accessible to the Public.				
Prescribed Temporary Structures				
Is it proposed to have any temporary:				
Seating stands for more than 20 persons?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Tents or Marquees with a floor area more than 100 m ² ?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Stages exceeding 150m ² in floor area?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Prefabricated buildings exceeding 100m ² ?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Note: If the answer to any of the above is Yes, please provide details below				
Type of Structure:				
Size/Capacity of Structure:				
VBA Occ Permit No (provide copy):				
Hire Company Details:				
Hire Company Contact Person				
Temporary Structure Erector's Name and Registration No.				
Hire Company Contact Telephone		Hire Company Email Address		
Note: <ul style="list-style-type: none"> Structural details/certification may also be required for temporary structures that do not require a Victorian Building Authority Occupancy Permit Location of all temporary structures to be indicated on the site plan for the event 				

Safety Officers' Details	
Name:	
Address:	
Mobile:	Email:
Qualifications (Provide Documents):	
Name:	
Address:	
Mobile:	Email:
Qualifications (Provide Documents):	

Toilet Facilities											
Nominate the number and location of all existing and portable/temporary toilet facilities.											
Note: Facilities should be distributed as evenly as possible across the event site.											
Location	No of Female		No of Male			No of Disabled [Unisex]		No of Disabled			
	Closet Fixtures	Wash Basins	Closet Fixtures	Urinals	Wash Basins	Closet Fixtures	Wash Basins	Female Closet Fixtures	Female Wash Basins	Male Closet Fixtures	Male Wash Basins
TOTAL											

Drinking Water	
How many drinking water fountains do you propose to provide?	
Where will the drinking water fountains be located?	
Notes <ul style="list-style-type: none"> The location of all proposed drinking water fountains/taps must be nominated on the site plan for the event. Drinking water fountains should be distributed as evenly as possible 	
Unsafe Areas	
Are there any unsafe areas where public access should be restricted ie. portable generators, stages etc.	
Yes <input type="checkbox"/>	No <input type="checkbox"/> If yes provide details and indicate locations on site plan.
Emergency Management & Evacuation Plan	
Have you prepared an emergency management and evacuation plan for the proposed event?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
Note: An emergency management and evacuation plan must be provided with this application.	
Lighting	
Will the event be conducted after daylight hours?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, provide details of lighting and detail on site plan.	
First Aid	
Will a First Aid Room be provided?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Dimensions of First Aid Room:	
Note: Location of first aid room to be indicated on site plan	
Fire Services	
Is there any existing fire fighting equipment such as fire extinguishers, hose reel and hydrants that are located within the venue?	
Yes <input type="checkbox"/>	No <input type="checkbox"/> If yes indicate type and location on event site plan
Will additional fire fighting equipment be provided within the venue?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes indicate type and location on the event site plan.	
Other Features	
Is it proposed to have any:	
▪ Fireworks/Explosives/Flammable Materials	Yes <input type="checkbox"/> No <input type="checkbox"/>
▪ Amusement Rides	Yes <input type="checkbox"/> No <input type="checkbox"/>
▪ Naked Flames ie. [Theatrical Productions]	Yes <input type="checkbox"/> No <input type="checkbox"/>
▪ Alcohol sold or provided for benefit	Yes <input type="checkbox"/> No <input type="checkbox"/>
▪ Activities within Council's Parks, Gardens or Reserves*	Yes <input type="checkbox"/> No <input type="checkbox"/>
▪ Activities on roadways or footpaths*	Yes <input type="checkbox"/> No <input type="checkbox"/>
▪ Changed traffic conditions/Traffic Management Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>
* Must be approved by Council.	
Note: <ul style="list-style-type: none"> Further information will be required should the event include any of the above listed features. Locations of fireworks, amusement rides, naked flames and the like must be marked on the site plan for the event. 	

Site Plan	Provide a Full Scaled Site Plan showing the extent of the site boundary fencing, permanent features and all details as outlined. ** Refer to the attached checklist**
<input type="checkbox"/>	Location and use of all structures
<input type="checkbox"/>	Any existing underground services (call dial before you dig)
<input type="checkbox"/>	Amenity locations
<input type="checkbox"/>	Width of exits and the locations and passageways
<input type="checkbox"/>	Drinking water locations
<input type="checkbox"/>	Fire extinguisher, hydrant, hose reel locations
<input type="checkbox"/>	First Aid Stations min 24m ² with basin (if over 5000 Occ)
<input type="checkbox"/>	Vehicle entry points
<input type="checkbox"/>	Public exclusion areas or unsafe areas
<input type="checkbox"/>	Site boundary fencing – including the type of fence
<input type="checkbox"/>	Lighting locations (if conducted after daylight hours)

Applicant's Declaration:
I, _____ am authorised to apply for this Permit on behalf of

Signature of Owner/Agent of Owner	Date
Fee	\$410.00

- Notes:**
1. At least 20 working days are required for processing of a Division 2 Occupancy Permit.
 2. Any event held within the Swan Hill Rural City Council Gardens or Reserves must be approved by Council's Events Unit.
 3. Any event on Council controlled roadways or footpaths must be approved by Council's Engineering Department.
 4. Council is collecting this information in accordance with Regulation 186 of the Building Regulations 2018. The personal information will be used solely by Council for the purpose of processing the Occupancy Permit Application. You may access this information by contacting Council on 5036 2333. If you fail to provide this information your application may not be processed.