

# McKinlay Shire Council

29 Burke Street, Julia Creek  
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[Email reception@mckinlay.qld.gov.au](mailto:Email_reception@mckinlay.qld.gov.au)



## Activities on Parks and Reserves Permit Application Form

### Section 1 – Applicant details

Full Name:

Telephone:  Mobile:

Facsimile:  Email:

Address:

### Section 2 – Business details

Contact name for this application:

Telephone:  Mobile:

Facsimile:  Email:

Company Name: (if applicable)

Trading Name: (if applicable)

Address of Premises:

Real Property Description: Lot No.  Plan No.

Postal Address of Premises:

### Section 3 – Activity Details

Name of Park:

Type of Activity or Function:

Date  Time From:  To:

Duration:  No of Persons Attending (approx):

## Section 4 - Terms and Conditions

1. The area is to be left in a clean and tidy state
2. No alcohol in park area (unless otherwise approved)
3. No glass receptacles are to be used
4. Council is to be indemnified against any claim which may arise as a result of the activity
5. All food preparation and distribution to comply with Health Service requirements
6. All electrical cords, fittings, switchings, etc are to be in accordance with the Australian Standards
7. Provide adequate controlled access for pedestrians where applicable
8. If necessary, keys are to be collected from the front counter of Council office
9. Driving speeds in excess of 10kph are not permitted

I / We have read and agree to abide by Council's Conditions

Signature (Please sign):

Signature (Please sign):

Date (Day/Mth/Yr): / /

Date (Day/Mth/Yr): / /

## Section 5 – Current Approval Details

*IF REQUIRED: Details of other approvals, permits or permits required under another Local Law*

Approval Type	Approval Number	Office Use Only
Building Approval		
Plumbing and Drainage Approval		
Development Approval		
Trade Waste Approval		
Other - please specify		

## Section 6 – Public Liability Insurance

A copy of the Public Liability Insurance Policy, to the minimum \$ value required by Council, must accompany applications. The policy shall name the insured as 'the applicant' for the Permit and the Council.

Name of Insurance company: \_\_\_\_\_

Name of Insured: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Amount of Cover: \$ \_\_\_\_\_

Policy Expiry Date: \_\_\_\_\_

Checklist		Office Use Only	
Have you completed all sections of this form.	<input type="checkbox"/> Activities on Parks and Reserves Application Form	Receipt No.	Access No.
Have you attached your Public Liability Policy.	<input type="checkbox"/> Public Liability Insurance	Registration No.	Lience No.

Signature (Please sign):

Signature (Please sign):

Date (Day/Mth/Yr): / /

Date (Day/Mth/Yr): / /