

Numurkah Presidents Room and Council Chambers Booking Application Form



APPLICANT DETAILS

Organisation:	
Contact Person:	
Telephone Number:	
Email Address:	
Address:	
Postal Address (if different):	

EVENT DETAILS

Description of Event:		
Date and Time of Event:	___/___/___	___:___ am / pm
Approximate No of Attendees:		

HIRE FEES

The following hire fees are subject to change after the 1st July each year.

Facility / Description	✓	Hourly Rate	½ Day (4 hrs)	Full Day (8 hrs)	Max Fee (>12 hrs)
Presidents Room (including kitchen)	<input type="checkbox"/>	\$24.00	\$60.20	\$120.20	\$180.80
Council Chambers	<input type="checkbox"/>	\$18.00	\$60.20	\$120.20	\$180.80
Presidents Room & Council Chambers (including kitchen)	<input type="checkbox"/>	\$36.00	\$120.20	\$240.40	\$360.60
Set Up Fees	<input type="checkbox"/>	N/A	\$58.40	\$120.20	
Cleaning by Council	<input type="checkbox"/>	Will be charged at \$58.40 per hour and deducted from Bond			
REFUNDABLE ITEMS					
Bond		\$100			
More than One Area		\$150			



BOOKING DETAILS

Please indicate the booking details in the table below.

Additional use can be detailed in the table on page 4 such as rehearsals.

DESCRIPTION	DATES	TIME		HOURS	FEE
		FROM	TO		
PRESIDENTS ROOM Including Kitchen	___/___/___				\$
	___/___/___				\$
	___/___/___				\$
	___/___/___				\$
	___/___/___				\$
	___/___/___				\$
COUNCIL CHAMBERS	___/___/___				\$
	___/___/___				\$
	___/___/___				\$
	___/___/___				\$
	___/___/___				\$
	___/___/___				\$
CHAIRS (60 available)	<input type="checkbox"/>	Indicate if additional chairs required		#	No Fee

Office Use Only	TOTAL HIRE FEE (INC GST)	\$
Receipt No:	NON-REFUNDABLE DEPOSIT	-\$50.00
Receipt No:	BALANCE OF HIRE FEES OWING	\$
Receipt No:	REFUNDABLE BOND	\$
Receipt No:	KEY DEPOSIT	\$50.00



PUBLIC LIABILITY INSURANCE

All Hirers must have Public Liability Insurance to hire the Cobram Civic Centre

Do you have Public Liability Insurance for this event? Yes No

If 'Yes', please provide evidence (Certificate of Currency) and complete the following details:

Name of Insurance Company: _____

Policy Number: _____ Amount of Cover: _____

Expiry Date: _____

If you do not have public liability insurance cover, cover may be provided by Council's Casual Hirer's Policy subject to conditions and exclusions following.

Do you want to register under Council's Casual Hirer's Public Liability Insurance for this Event? Yes No

Does your event include any of the following activities?

A Fete or Market Yes No

A Sporting Activity Yes No

Is there to be an admission charge? Yes No

Are goods available for sale? Yes No

If you ticked 'Yes' to any of the above activities, insurance IS NOT available under Councils' Casual Hirer's policy. Please read the following information regarding insurance.

IMPORTANT NOTES ABOUT INSURANCE:

1. Completion of this form does not guarantee coverage. Coverage is determined by the insurance company in the event of a claim. Council does not guarantee insurance coverage in the event of any incident or claim.
2. As the event organiser, it is your responsibility to ensure that your event is properly insured. Council accepts no responsibility for your failure to properly insure your event and you should consult with your insurer to confirm whether or not adequate insurance cover is provided for your event.
3. You must provide evidence of adequate insurance coverage in order to conduct your event on Council managed property.
4. The following lists of activities are excluded from Council's Community Insurance Policy. Event organisers must determine and arrange their own insurance for these matters as required. This list does not contain all of the conditions or exclusions to the Council's Casual Hirer's Insurance Policy.

EXCLUSIONS

Claims relating to the following activities are excluded from the Council's Casual Hirer's insurance policy:

Child minding and child care services / Sporting activities / Products Liability for children's toys / Festivals / Markets / Music Concerts / Events where an admission fee is charged / Entertainers and performers / Grandstands / Sub Contractors / Security Personnel / Child Molestation / Terrorism / Electronic data / Fireworks / Amusements (includes children's rides, animal rides, jumping castles etc).

CONDITIONS OF HIRE

Moira Shire Council
ABN: 20 538 141 700
Post: PO Box 578, Cobram, Vic 3643
DX: 37801, Cobram

Cobram Administration Centre:
44 Station Street, Cobram
Yarrowonga Service Centre:
100 Belmore Street, Yarrowonga

Phone: 03 5871 9222
Fax: 03 5872 1567
NRS: 133 677

Email: info@moira.vic.gov.au
moira.vic.gov.au



ACCESS

Access to the venue will not be granted until payment of the Bond. For after-hours hire, keys can be collected from the Numurkah Visitor Information Centre during business hours and must be returned by 12noon on the next business day following use of the facility.

CLEANING

The facilities used must be left in a clean and tidy condition. All rubbish is to be removed and placed in the bins provided. Cleaning equipment is available in the kitchen including a vacuum cleaner and broom. If Council considers that any area has not been left in a suitable condition resulting from the hire, cleaning costs may be deducted from the Bond.

TABLES AND CHAIRS

60 chairs are available and hirers are required to move, set up, clean and return tables and chairs to the storage area after use of the facility.

SET UP

Hirers are required to set up for their own event. Set up arrangements are to be made at the time of booking and should be conducted on the day of the event, or the day prior, subject to other bookings.

RETURN OF BOND

The refundable bond will be returned to the hirer after completion of the Cleaner's Report (page 6)

Payment of the refundable Bond will be deposited directly into the applicants nominated bank account, please provide the following information:

Name of Bank: _____

BSB: _____ Account No. _____

Name of Account: _____

Authorisation:

Print Name: _____ Signed: _____

Alternatively, you can have the Bond refund made by cheque in the name of the applicant and posted to the address on this application form.

I declare that I have read and fully understand this Application and agree to comply with and be bound by the terms and conditions contained herein relating to the hire of the Presidents Room and Council Chambers.

Name: _____ Signature: _____ Date: _____

Personal Information collected by Council is used for municipal purposes as specified in the Local Government Act 1989. The Personal Information will be used by Council solely for the purposes of administration of hiring the President Room and Council Chambers Numurkah and or a directly related purpose. Council may also disclose this information to other organisations if required by legislation. The applicant understands that the Personal Information provided is for the above purpose and that he or she may apply to Council for access to and/or amendment of the information. Requests for access and or correction should be made to Council's Privacy Officer.

Moira Shire Council

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OFFICE USE ONLY - CHECKLIST

Before Event		
Deposit Paid	<input type="checkbox"/>	Receipt # _____
Payment of hire fees	<input type="checkbox"/>	Receipt # _____
Payment of Bond	<input type="checkbox"/>	Receipt # _____
Applicant signed Conditions of Hire	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Public Liability Certificate provided	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Entered into Booking System	<input type="checkbox"/> Yes	<input type="checkbox"/> No
After Event		
Keys returned	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Inspection of venue conducted and Cleaner's report completed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Inspection report submitted to Cobram Office	<input type="checkbox"/> Date: ____ / ____ / ____	
Bond returned to applicant	<input type="checkbox"/> Yes	<input type="checkbox"/> No



CLEANERS REPORT

Date of Hire:		
Event Details:		
Date of Inspection:		
Area/s Inspected:	<input type="checkbox"/> Presidents Room <input type="checkbox"/> Council Chambers	
Was additional cleaning performed by Cleaner? Yes <input type="checkbox"/> No <input type="checkbox"/>	No of Hrs	Details of additional cleaning including areas
Damage Identified? Yes <input type="checkbox"/> No <input type="checkbox"/>	Location and details of the damage. Please provide an estimate of the cost to repair or replace where possible.	
Name:		
Signed:		
Date:		

Please submit this report to Council within 24hrs of inspection via fax to (03) 5872 1567

