APPLICATION FOR OCCUPANCY PERMIT PLACE OF PUBLIC ENTERTAINMENT

Division 2 - Regulation 186(1) **Building Act 1993 -** Building Regulations 2018 **Application Fee - \$770.60** (Office Use Only – Code 6309)



TO Municipal Building From	Surveyor, M	loira Shire	Council						
Owner of Land			Agent of Owner of	Land		[
Event Applicant's Name			I						
Postal Address				Post Code					
Contact Name									
Email Address				Contact Nu	ımber				
Name of Event									
Ownership Details (If Agent of	of Owner is liste	ed above)							
Owner Name									
Postal Address				Post Code					
Email Address				Contact Nu	ontact Number				
Address Address	property where	the event is p	roposed to be held)						
Property Owner's Conse	nt		Copy attache	d YES		NO			
Existing Property Details	Information reg	arding existin	a buildinas proposed to be	used for the eve	n#1				
					enty				



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Period	of Occupation											
Day		Mon		Tues		Wed	Thurs	Fri	S	at	S	un
Date												
Comme	ncement Time											
Conclu	sion Time											
Number	r of Persons											
Note	Specify the ma						participants	to be in				
Locatio	n for Occupancy	Permit	Disp	lay								
Note	Must be in a p accessible to t			ition								
Prescri	bed Temporary S	Structure	es									
Is it prop	osed to have any	tempora	ary									
	stands for more persons?	Yes		No			or Marquees ea more tha		Yes		No	
	exceeding n floor area?	Yes		No			ricated build ing 100m ² ?		Yes		No	
Note – If	you answered Y	ES abov	e, pl	ease p	rovid	e furthe	r details in	the table b	elow			
Type of	Structure											
Size/Ca	pacity of Structure	e										
VBA Oc (provide c	c Permit No											
Hire Co	mpany Name											
Hire Co	mpany Contact Pe	erson										
Hire Co	mpany Email							Hire Compa Contact No	ny			
	ary Structure Erec Registration No	ctor's										

NOTE

- Structural details/certification may also be required for temporary structures that do not require a Victorian Building Authority (VBA) Occupancy Permit
- Location of all temporary structures to be indicated on the site plan for the event

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



Phone: 03 5871 9222

Fax: 03 5872 1567

NRS: 133 677

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Safety Officer's Details								
Safety Officer's Name								
Address				ı	Post Cod	е		
Email Address				(Contact N	lumber		
Qualifications (Provide Documents)								
Safety Officer's Name								
Address					Post Cod	le		
Email Address				(Contact I	Number		
Qualifications (Provide Documents)								
Toilet Facilities	of all ovioting	and partab	lo/tom	noror	v toilet fo	oilition		
Nominate the number and location NOTE	_	·			-			
Facilities should be distril			ible a	cros				
Location	No of	Female				No of Male)	
	Closet Fixtures	Wash Ba	sins	Close	Closet Fixtures Urinal		Wash I	Basins
TOTAL								
Location	No of Dis	sabled			No o	f Disabled	1	
Location	(unise		Fer	male	Female		<u> </u>	
	Closet Fixtures	Wash Basins	Clo	oset tures	Wash Basins	Close	t Male	Wash sins
			1 120	larco	Dasino	Tixture	.5	
TOTAL								
TOTAL								
Drinking Water								
How many drinking water fountains	s do you propo	se to provi	de?					
Where will the drinking water fount	ains be locate	d?						
NOTE								
NOTE The location of all proposed	d drinking wa	ter fountaii	ns / ta	aps m	ust be n	ominated o	on the si	te
The location of all proposed drinking water fountains / taps must be nominated on the site plan for the event								
Drinking water fountains sh	iouia be aistri	ibuted as e	veniy	as p	ossible			
Unsafe Area								
Are there any unsafe areas where ie. Portable generators, stages etc	•	ess should	be res	stricte	YE:	s 🔲	NO	
If yes, details and location must be included on site plan								

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Emergency Management & Evacuation Plan				
Have you prepared an emergency management and evacuation plan for the proposed event?	YES		NO	
NOTE • An emergency management and evacuation plan must be included and evacuation plan must be included.	ded with t	his ap _l	plication	
Lighting				
Will the event be conduction after daylight hours?	YES		NO	
If yes, details of location and lighting must be included on site plan				
First Aid				
Will a First Aid Room be provided?	YES		NO	
Dimensions of First Aid Room				
NOTE • You must indicate on site plan location of first aid room				
Fire Services				
Is there any existing firefighting equipment such as fire extinguishers, hose reels and hydrants that are located within the venue?	YES		NO	
If yes, indicate the type and location on event site plan				
Will additional firefighting equipment be provided within the venue?	YES		NO	
If yes, indicate type and location on the event site plan				
Other Features				
Is it proposed to have any				
Fireworks / Explosives / Flammable Materials	YES		NO	
Amusement Rides	YES		NO	
Naked Flames ie. Theatrical Productions	YES		NO	
Alcohol sold or provided for benefit	YES		NO	
Activities within Council's Parks, Gardens or Reserves ★	YES		NO	
Activities on roadways or footpaths ★	YES		NO	
Traffic Management Plan / Changed traffic conditions	YES		NO	

NOTE

- * Must be approved by Council
- Further information will be required should the event include any of the above listed features
- Location of fireworks, amusement rides, naked flames and the like must be marked on the site plan for the event

Moira Shire Council **ABN:** 20 538 141 700 Post: PO Box 578, Cobram, Vic 3643 **Cobram Administration Centre:** 44 Station Street, Cobram Yarrawonga Service Centre: 100 Belmore Street, Yarrawonga

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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 checklist**
	Location and use of all structures
	Any existing underground services (call dial before you dig)
	Amenity locations
	Width of exits and locations and passageways
	Drinking water locations
	Fire extinguishers, hydrants, hose reel locations
	First Aid Stations min 24m² with basin (if over 5000 Occupancy)
	Vehicle entry and exit points
	Public exclusion areas or unsafe areas
	Site boundary fencing – including the type of fence
	Lighting locations (if conducted after daylight hours)
Applicant'	s Declaration
Ι,	am authorized to apply for this Permit on behalf of
	(Organisation)
	()
Signature of Agent of Ow	
	receipt of application and payment please allow at least 20 working days are required for ssing of a Division 2 Occupancy Permit.
·	vent held on Council land must be approved by Council

Any event on Council controlled roadways and footpaths must be approved by Council

Collection Statement: Moira Shire Council is collecting personal information for your Building Permit application as required under the Building Act 1993 and Building Regulations 2018, which Council has a responsibility to administer. The information collected will be used for the purpose of your Building Permit application and/or a directly related purpose. Information may be disclosed to the Victorian Building Authority (VBA) or if required or authorised by law. If you do not provide the information required, Council will not be able to process your application.

You can find out more about how we use and protect your information by viewing our Privacy Statement on our website www.moira.vic.gov.au.

