

ROAD EVENTS AND ACTIVITIES TEMPORARY ROAD CLOSURE APPLICATION FORM

OFFICE USE ONLY					
DA No:					
Parcel No:					
Receipt No:					
Date:					
Receipt Key / Type: 187					

						PART	1 – A	PPLIC	ATION DE	TAILS
APPLICANT DE	TAILS									
Name				Co	Company					
Postal Address	stal Address			PC	PO Box Telephon			one		
Suburb	Suburb State			Po	Postcode Mobile					
Email			Cı	Customer Reference						
PROPERTY DET	TAILS									
Unit No	Unit No House No					Street				
Suburb				Site Area m ²						
Lot(s) Section				Deposited Plan (DP)						
Other					Strata Plan (SP)					
LOCATION										
Roadway	Footpath	Ro	oad Status		Cla	ssified		Unclassi	ified	
DATE & TIME O	F ACTIVITY									
Is the event a 'single date' or 'multiple date' event?			Sing	gle		Multiple Date				
Date(s)	Pate(s) Start Time Finish			sh T	Time					
ACTVITY TYPE										
More that	an 500 partic	ipants a	and spectato	ors (Deve	lopm	nent App	lication n	nay be red	quired)	
500 or fewer participants and spectators										
Police Controlled Event										
DESCRIPTION OF THE PROPOSED ACTIVITY / EVENT										
		<u>1</u>						- T	T-(-1	
No. of staff / volunteers										
DECLARATION										
I hereby make application to Council for permission to develop, as per plans and specifications submitted. I understand that if the information submitted is incomplete, the application may be delayed, rejected or more information may be requested. I undertake to develop in conformity with such approval and Acts and Codes.										
Applicant(s) Name								Date		
Applicant(s) Signature										

PLAN & SITE CHECKLIST		
PLEASE SUBMIT THIS COMPLETED CHECKLIST WITH YOUR APPLICATION.		
	Yes	N/A
Shown the direction of north on the plan or sketch?		
All contact information and details of the activity / event		
A Traffic Management Plan		
A Traffic Control Plan(s)		
A Risk Assessment to confirm the existing and likely risks that may arise to event patrons and other road users as a result of the activity / event		
A copy of your Public Liability Insurance		
Copies of approvals from other external authorities		
"Form 1 $-$ Notice of Intention to Hold a Public Assembly" form with lodgement confirmation from the NSW Police Force		
RMS Road Occupancy Licence Application		
NSW Police Force approval		
Approval to film (from Screen Hunter-Central Coast)		

PART 3 - LODGEMENT INFORMATION

HOW TO LODGE YOUR APPLICATION

Address the application to

General Manager Cessnock City Council PO Box 152 CESSNOCK NSW 2325

OR

General Manager Cessnock City Council DX 21502 CESSNOCK

Payment Method

By mail - Cheque, Money Order or Credit Card (complete the section below)

Lodge in person (between 9am – 4.30pm) at Council's Administration Building

Cessnock City Council 62-78 Vincent Street CESSNOCK NSW

You will need to spend some time with a Customer Service Officer when lodging your application. Typically you will require 30 minutes, however this may vary depending on the complexity of your application

Payment Method

In person - Cash, Cheque, Money Order, Mastercard, Visa, and/or EFTPOS.

How to Contact Us

Phone: (02) 4993 4300 Fax: (02) 4993 2500

Email:<u>council@cessnock.nsw.gov.au</u> www.cessnock.nsw.gov.au

Office Hours

9am to 5pm Monday to Friday *Payments are accepted until 4.30pm

Fees

Fees are calculated in accordance with Council's adopted fees and charges.

If you require further information regarding this request, please contact Council's Customer Service Centre on (02) 4993 4100

Cessnock City Council takes the privacy and security of personal information very seriously.

To eliminate the risk associated with Credit Cards, Council does not collect or store Credit Card information.

Credit Card payments are processed by Council's Call Centre using a call in or call back facility. Customers are able to select their preferred option.

If you wish to make payment via Credit Card, please nominate your preferred telephone contact number for our Customer Service Team to contact you on.

Payment Contact Name:	Payment Contact Phone Number: