

**APPLICATION FOR A DIVISION 2 OCCUPANCY PERMIT
(for a Place of Public Entertainment)**

**HOBSONS
BAY CITY
COUNCIL**



Building Act 1993 | Building Regulations 2018 | Part 13 | Regulation 186 | Form 15

Applicant

Owner or Agent _____
Postal Address _____
Contact person _____
Email _____
Postcode _____
Mobile _____
Telephone _____

Ownership Details (only if agent of owner is listed above)

Owner _____
Postal Address _____
Email _____
Postcode _____
Telephone _____

Property Details

Property Name _____
Number & Street _____
Suburb _____
Email _____
Mobile _____
Telephone _____

Event Details

Event Name _____
Organiser _____
Address _____
Mobile _____
Postcode _____

Event Duration

From (start date) _____ / _____ / _____ To (end date) _____ / _____ / _____
Start time _____ End time _____

Number of Persons

Number of maximum persons to be in attendance at the event at any one time _____

Prescribed Temporary Structures

Will the event include temporary structures (if yes, provide location on site plan) YES ☐ NO ☐

Temporary Structure Type _____
Size (length x width = m²) / Capacity _____
Victorian Building Authority Occupancy Permit Number _____
Hire Company Name _____

Seating stands for more than 20 persons YES ☐ NO ☐
Stages exceeding 150m² in floor area YES ☐ NO ☐
Tents or Marquees exceeding 100m² in floor area YES ☐ NO ☐
Prefabricated buildings exceeding 100m² not placed directly on the ground YES ☐ NO ☐

Safety Officer Details

Name _____
Qualifications _____
Address _____
Mobile _____
Postcode _____

Security/Crowd Control

Company Name _____
Primary contact during event _____ Mobile _____
Number of crowd controllers/security offices to be provided for the duration of event _____

OFFICE USE ONLY

Ledger Number: 56200.5509 Cashier ID: _____ Amount: \$1000 Receipt: _____ Date: _____

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First Aid

Name of First Aid provider _____

First Aid facilities/rooms to be provided YES ☐ NO ☐

Number of first aid officers _____

Drinking Water (if yes, location must be provided on site plan)

Number of drinking water fountains to be provided _____

Toilet Facilities (locations must also be provided on site plan)

	Closet Fixtures	Wash Basins	Urinals
Number of Disabled Facilities	_____	_____	_____
Number of Disabled (Unisex) Facilities	_____	_____	_____
Number of Female Facilities	_____	_____	_____
Number of Male Facilities	_____	_____	_____

Unsafe Areas

Are there any unsafe areas where public access should be restricted ie; portable generators, stages etc. (if yes, provide details and locations on site plan) YES ☐ NO ☐

Exits

Nominated location and width of all exit gates/doors provided on site plan YES ☐ NO ☐

Emergency Evacuation

Emergency Management Plan/Procedure for the event provided with application YES ☐ NO ☐

Lighting

Will the event be held after daylight hours (if yes, provide details on site plan) YES ☐ NO ☐

Fire Services

Is there any existing fire fighting equipment such as fire extinguishers, hose reel and hydrants that are located within the venue (if yes, type and location must be indicated on site plan) YES ☐ NO ☐

Other Features

Is it proposed to have any (if yes, further information on these features will be required);

Fireworks/Explosives/Flammable Materials	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Amusement Rides	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Naked Flames	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Additional Fire Services (Fire Extinguishers)	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"/>

Notes:

- 1 Application fee of \$1000 must be paid when making application.
- 2 At least 20 working days are required for processing of a Division 2 Occupancy Permit.
- 3 Any event held within the City of Hobsons Bay Parks, Gardens or Reserves must be approved by Council's Events Unit.

Fees - A payment link will be emailed once the application has been lodged

In accordance with Section 54 of the Building Act 1993, I hereby apply for an Occupancy Permit for a Place of Public Entertainment at the above nominated address

I am authorised to apply for this permit on behalf of the client and hereby undertake to comply with requirements of the Building Act 1993, Building Interim Regulations 2017 and the Building Code of Australia and any special conditions as required by an Authorised Office of the Council. I understand by making this application I will be invoiced for an application fee.

Signature

Owner/ Agent _____ Date _____

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