

Application for Busking Permit

OFFICE USE ONLY

Permit fee:	
Receipt no:	
CS Officer:	

Please note: when deciding whether or not to issue a permit, an Authorised Officer must consider all the criteria as set out in Council's Local Law.

Applicant details

Full name:	
Address:	
Suburb:	Postcode:
Phone number/mobile:	Fax number:
Email address:	

Company name:
ABN number:
Address to which this permit applied (if different from above):

Public liability insurance details

Policy number	Insurer	Expiry date	Amount of cover

You must attach a copy of Certificate of Currency for public liability insurance. A minimum cover of \$5 million is required.

Busking details

Date	Time	Location	Details

Declaration

I that the above information is true and correct. I agree to abide by all terms and conditions specified in the permit.

Applicant signature:

Date

We respect your privacy. We will not sell or give away your personal information, unless required by law. Occasionally, we may use your details for our own research purposes or to let you know about other council information. If you want to see your personal data, modify your details, or if you receive information from us you do not want in the future please contact 8571 1000.

 Phone 8571 1000  Fax 8571 5196  council@cgd.vic.gov.au	 TTY: 133 677 Speak and listen: 1300 555 727 Internet: www.iprelay.com.au  TIS: 13 14 50	Find us online  www.greaterdandenong.com  www.facebook.com/greaterdandenong  www.twitter.com/greaterdandy  www.youtube.com/citygreaterdandenong
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