## **Lease/Licence Waiting List Application Form**

**Privacy Notice:** Council is collecting the personal information you supply on this form for the purpose of updating the community facility waiting list and vending applications. Some of this information may be given to relevant Council Officers for the purpose of processing your application. Council deals with personal information in accordance with law, including *Information Privacy Act 2009*.



This form is to be completed by an applicant who is expressing an interest in obtaining a lease or licence from Council. Completion of this form does not guarantee the applicant a lease or licence when/if one becomes available.

P: 07 4932 9000 | E: enquiries@rrc.qld.gov.au | W: rockhamptonregion.qld.gov.au | PO Box 1860, Rockhampton 4700 | ABN: 59 923 523 766

Applicant Details						
Applicant Details						
Applicant/organisation name:						
Contact name:	me: Position:					
Postal address:						
Contact number:	Email:					
Organisation's Current Location						
Street number and name:						
Suburb:		State:	Postcode:			
Organisation's primary activities:						
Is the organisation incorporated? ☐ Yes ☐ No						
Public Liability Insurance (Please note a copy of your public liability insurance and indemnity statement is required for all Council tenants)						
Name of insurer:	Po	Policy number:				
Policy limit:	E	xpiry date:				
Agreement Information						
What type of agreement are you seeking?						
☐ Mobile food vendor seeking a permit to operate in Council parks						
☐ Sport, recreation or community organisation						
Mobile Food Vendor (please complete this section if a mobile food vendor)						
What parks do you propose to trade at?						
What goods or services are you proposing to sell?						

What requirements do you have? (eg. size, set up etc.)						
Provide details of your method of waste disposal:						
Sport, Recreation or Community Organisation (please complete this section if a sport, recreation or community organisation)						
Current membership:		Males	Females	Total		
	Juniors					
	Seniors					
	Total					
Proposed usage days and time:	Monday		to	<u>.</u>		
	Tuesday		to			
	Wednesday		to			
	Thursday		to			
	Friday		to			
	Saturday		to			
	Sunday		to			
Why does the organisation want to relocate?						
Preferred new location: (e.g. suburb or locality)						
How will relocating benefit the organisation?						
How will relocating benefit the community?						
Please identify the facilities your organisation requires:						
☐ Fields Type:			Number:			
☐ Court surfaces Type:			Number:			
☐ Building Size:						
☐ Kitchen						

$\square$ Change rooms					
☐ Toilets	Number:				
☐ Field lighting	Lux level:				
☐ Other	Provide details:				
Provide details on whether your organisation intends on building new infrastructure: (eg. a new club house or fields)					
Provide details on whether your organisation will be applying for grants to fund the proposed works:					
Book Latelly and					
available:	nether your organisation has the capability of developing a green field site if no suitable facilities are				
Supporting Doc	cumentation				
Supporting Doc					
Please remember to please food vendors:	provide the following supporting documentation when submitting this form:				
'	on of Currency for Public Liability Insurance				
☐ Applicable licence					
☐ Proposed site plar					
☐ Weekly Schedule					
Sport, recreation or c	ommunity organisations:				
☐ Certified copy of C	Certificate of Incorporation (must be signed by a justice of the peace)				
$\square$ Copy of the organ	isation's Constitution				
☐ Copy of most rece	ent audited Financial Statements				
☐ Copy of Certification	on of Currency for Public Liability Insurance				
☐ Copy of Risk Man	agement Plan				
☐ Weekly Schedule/	Draw				