

Footpath Obstruction or Outdoor Dining Application

Compliance



Please contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable.

Information Privacy Act 2009 collection notice – Council is collecting this information in order to process your application. This information will not be disclosed to any third party without your written or verbal authorisation unless required by law.

APPLICANT DETAILS

Surname		Given names	
Postal address		State	Postcode
Contact number	Email address		
Position (e.g. <i>business owner, president of organisation, etc</i>)			

BUSINESS / ORGANISATION DETAILS

Business / organisation name			
Postal address		State	Postcode
Contact number	Email address		
ACN / ABN			
Not for Profit? <input type="checkbox"/> Yes <input type="checkbox"/> No			

APPLICATION DETAILS

<input type="checkbox"/> Footpath Obstruction Permit <input type="checkbox"/> Outdoor Dining Permit	
Proposed use (<i>please tick one or more of the following that apply</i>)	
<input type="checkbox"/> Dining tables / chairs <input type="checkbox"/> Display goods for sale <input type="checkbox"/> Sandwich board / A frame sign <input type="checkbox"/> Selling raffle tickets <input type="checkbox"/> Other (<i>please specify</i>):	
Operating location	
Days of operation <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday	
Hours of operation From <input type="checkbox"/> am <input type="checkbox"/> pm To <input type="checkbox"/> am <input type="checkbox"/> pm	
Site plan Please draw a site plan on the below diagram that clearly identifies the following: <ul style="list-style-type: none">the width of the footpath outside your business or intended operating location;the type of obstructions that are presently on the footpath outside your business or intended operating location (power pole, street bin, parking meter, etc.);	

- the preferred location of each item for which a permit is sought:
 - Display table m2 each;
 - Display stand m2 each; and
- the clearance distance to the kerb and shop frontage etc. when items are placed in your preferred locations (minimum width of 2 metres to be maintained clear of obstructions at all times).

ROAD	
KERB	
↙ FOOTPATH	FOOTPATH ↘
BUSINESS / PREMISES	

PUBLIC LIABILITY INSURANCE

Please complete the below and provide Council with photocopy of your Public Liability Insurance Policy.

The policy must:

1. Name the insured as the business / organisation applying for the permit; and
2. List the North Burnett Regional Council as an interested party; and
3. Provide a minimum cover value of \$20,000,000.00.

In the event your policy does not list the North Burnett Regional Council, please contact your insurer to organise this minor amendment to be made to the 'interested parties' section of the policy prior to applying for this permit.

Name of insurance company: _____

Name of insured: _____

Policy number: _____

Policy expiry date: _____

Copy of Public Liability Insurance attached

DOCUMENTS REQUIRED TO BE LODGED WITH THIS APPLICATION

- Evidence of a current Public Liability Insurance Policy; and
- Site plan

Failure to provide the required information may delay the processing of your application.

FEE SCHEDULE

Please see current Fees & Charges Schedule for relevant fees
[\(https://northburnett.qld.gov.au/fees-and-charges/\)](https://northburnett.qld.gov.au/fees-and-charges/)

DECLARATION

I, _____ declare that the information provided above is true and correct.

Signed

Dated

LODGEMENT OF YOUR APPLICATION

MAIL Chief Executive Officer, PO Box 390, Gayndah, Qld 4625

EMAIL admin@northburnett.qld.gov.au

TELEPHONE 1300 MY NBRC (1300 696 272)

IN PERSON Visit our customer administration offices 8.30am – 4.30pm (closed 11.30am – 12.30pm)