### Great Ocean Road Coast And Park Authority Event Application

\* indicates a required field

Please complete this form if you would like to conduct an event or activity on land managed by Great Ocean Road Coastal Authority.

If your event crosses various land managers, i.e., local government managed land, please use the following links to find the appropriate event application information:

<u>Surf Coast Shire Colac Otway Shire Corangamite Shire Moyne Shire Warrnambool City Council</u>

### **Event Location Details**

Local Government Area (LGA) v	where event will be held? *	
☐ Surf Coast Shire		
<ul><li>□ Colac Otway Shire</li><li>□ Corangamite Shire</li></ul>		
☐ Moyne Shire		
☐ Warrnambool City Council		
□ Other:		
Your event application may be shared	with relevant local shire councils.	
If across multiple LGAs, please	list	
Event Name *		
Type of event *		
Description/purpose of the eve target audience? *	ent. What are you trying to ac	hieve? Who is your
<b>Proposed Event Location</b> Address		

Will you O Yes O No	ı be charging aı	n entry fee? *		
If yes, v	what entry fee v	vill you be chargi	ng?	
Estimat	ed number of e	vent participants	? *	
Estimat	ed number of s	pectators? *		
Event w	ebsite or Faceb	ook Page		
Contac	ct Details			
Applica Ondivide Organisa		Organisation		
Title	First Name	Last Name		
Applica	nt ABN			
		used to look up the red the ABN correct	following information. ly.	Click Lookup above to
Informat	ion from the Austra	lian Business Registe	٢	
ABN				
Entity na				
ABN stat				
Entity ty	pe Services Tax (GST)			
Juda Q	Scrvices rax (UST)			

Must be an ABN.

DGR Endorsed ATO Charity Type

ACNC Registration
Tax Concessions

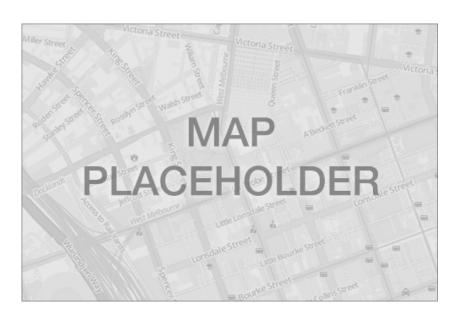
Main business location

#### **Phone Number \***

**More information** 

Must be an Australian phone number.
Email address *
Must be an email address.
Website
Website
Vous contract during accept if different to prince an extract (names and makile) *
Key contact during event if different to primary contact (name and mobile) *
Must be an Australian phone number.
Your Address * Address
Address Line 1 Suburb/Town State/Dravings Destands and Country are required
Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Event Timings
Note: All events must run at times inline with the Victorian EPA guidelines and regulations: https://www.epa.vic.gov.au/
Event Start Date (bump in) *
Bump in start time *
Event Date Finish (bump out) *
Bump out finish time *
Event Start Date (i.e. when the event is running) *
Event Start Time *
Event Finish Time *
Event Finish Time *

Event finish date (i.e. last day running) *			
Event Infrastructure			
Please indicate if your event involves any of the following    Signage     Start/Finish Lines     Inflatable structures     PA Systems and/or Music     Portable Toilets     Food Vendors     Stall Holders (eg Merchandise, sponsors)     Water-based Activities     Security     Stage/s and fencing     Fireworks, fires or similar			
Other Infrastructure (please specify)			
Provide a short description (100 words recommended) of your project - what are you out to do?			
Will you require access to power and water? *  ○ Yes  ○ No			
If yes, please provide details			
(if accessing power additional charges may apply)			
Will you require vehicle access to the site? *  ○ Yes  ○ No			
If yes, please provide details Address			



### Traffic Management

How will parking be managed? \*

Does this event involve any road closures? *	
<ul> <li>Yes</li> <li>No</li> <li>Note: Road closures must be applied for through the relevant LGA or Vic Roto discuss further.</li> </ul>	ads. Please contact directly
If yes please provide details	

## Waste Management

Are	e you	aware of Great Ocean Road Authority Plastic Reduction Policy?
0	Yes	
0	No	
Wil	ll you	r event require extra rubbish bins? *
0	Yes	

O No

#### If yes, how many Recycle and how many General Waste?

Please note this will be charged back to event organisers at \$35 per bin

### Alcohol

Will Alcohol be supplied/sold at the event? *  ○ Yes  ○ No  ○ BYO
Do you have a liquor licence for your event? *  O Yes  O No  C Looking to apply for one
If yes, please upload licence Attach a file:
Event Management
Have you discussed your event with any of the following authorities?  Department of Transport  Vic Police Ambulance Victoria DEWLP Parks Victoria Marine Safety Other:
What has been the feedback so far?
Supporting documents
Please provide any other supporting documentation, such as site maps, risk assessment, traffic plans etc.
Do you have Public Liability Insurance? *  ○ Yes ○ No
If yes, please attach a Certificate of Currency Attach a file:
Risk Assessment * Attach a file:
Site Layout Plan * Attach a file:

Other Documents Attach a file:	
If you would like to contact us to provide further documents o permits@greatoceanroadauthority.vic.gov.au	r information please send these to
Authorisation	
I am authorised to lodge this application. I understand t form is being collected by the Great Ocean Road Coast of assessing my event and may be shared with LGA's w relevant agencies.	And Parks Authority for the purpose
Privacy statement: The Great Ocean Road Coast and Paprotecting all personal and sensitive information consist the Privacy and Data Protection Act 2014, and the Health Records Act, 2001. if you have any questions about please email: info@GreatOceanRoadAuthority.vic.gov.ac	tent with the principles set out in th Privacy Principles as set out in the out the handling of your information
Authorised Person (full name) *	