Read the **Outdoor Event Guidelines** and **Outdoor Events Policy** before completing this form.

|  |  |
| --- | --- |
| **Market Title:**  | Click or tap here to enter text. |

|  |
| --- |
| **Location:** *The Events Team can assist in recommending locations or providing site maps.*  |
| Preferred Location:  | Click or tap here to enter text. |

|  |
| --- |
| **Applicant Details** |
| Name of Organisation: Click or tap here to enter text. | ABN: Click or tap here to enter text. |
| Postal Address: Click or tap here to enter text. |
| Suburb: Click or tap here to enter text. | State: Choose an item. | Postcode: Click or tap here to enter text. |
| Contact Person: Click or tap here to enter text. | Position: Click or tap here to enter text. |
| Phone: Click or tap here to enter text.       | Alternate Phone: Click or tap here to enter text. |
| Email: Click or tap here to enter text. | Fax: Click or tap here to enter text. |
| Web Site: Click or tap here to enter text. |

|  |
| --- |
| **Market Details:** |
| Market Dates:  | Start: Click here to enter a date. | Finish: Click here to enter a date. |
| Details  | Day: Click or tap here to enter text. | Frequency: Click or tap here to enter text. |
| Market Times:  | Start: Click or tap here to enter text.      | Finish: Click or tap here to enter text. |
| Times  | Set Up: Click or tap here to enter text.       | Removal: Click or tap here to enter text. |
| Further information:  | Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| Estimated Attendance:  | Participants: Click or tap here to enter text. | Spectators: Click or tap here to enter text. | Staff/Marshalls: Click or tap here to enter text. |
| Target Audience:  | Click or tap here to enter text. |
| Entry Fee/Ticket Price:  | Adult: $ Click or tap here to enter text. | Child: $ Click or tap here to enter text. | Concession: $ Click or tap here to enter text. |
| Other participant charges: Click or tap here to enter text. |

|  |
| --- |
| **Market Description:** |
| Aim/Purpose of the Market:  | Click or tap here to enter text. |
| Detailed description of the Market:  | Click or tap here to enter text. |
| Provide a brief history of the Market: | Click or tap here to enter text. |

|  |
| --- |
| **Road closures:**  |
| What road/s will be closed? | Click or tap here to enter text. |
| Times:  | Close: Click or tap here to enter text. | Open: Click or tap here to enter text. |
| Other details:  | Click or tap here to enter text. |

|  |
| --- |
| **Food & Alcohol:**  |
| **[ ]** Selling or Serving Food or Drink | **[ ]**  Selling or Serving of Alcohol  |

|  |
| --- |
| **Infrastructure:** *Details of all proposed infrastructure is to be included on the site map and incorporated into the various management plans requested.*  |
| **[ ]** Marquees  | Number: Click or tap here to enter text. | Details: Click or tap here to enter text. |
| **[ ]** Stage  | Number: Click or tap here to enter text. | Details: Click or tap here to enter text. |
| **[ ]** Fencing | Details: Click or tap here to enter text. |
| **[ ]** Other structures  | Details: Click or tap here to enter text. |

|  |
| --- |
| **Noise Management:** Complete this section if:* Your market has any **amplified sound** or other elements that will be louder than general crowd noise (e.g. **Speakers, bands, drums, PA systems, horns, starter pistols etc.**)
 |
| Expected sound level  | **[ ]**  more than 65dB(A) | **[ ]** 55dB(A)- 65dB(A) | **[ ]** less than 55dB(A) |
| Type of sound:  | **[ ]** Live music with drums/or sub-bass | **[ ]**  Amplified speech or music via low power sound system (PA) |
| [ ] Other: Click or tap here to enter text. |
| *A separate noise management plan may be requested in order to assess your application*  |

|  |
| --- |
| **Assessment Criteria**The following section outlines the key selection criteria for Markets. Further detail on what is required can be found in the City of Port Phillip’s Outdoor Events Policy - <http://www.portphillip.vic.gov.au/events-promotions.htm>  |

|  |
| --- |
| **Community Benefit**  |
| Click or tap here to enter text.  |

|  |
| --- |
| **Economic Impact** |
| Click or tap here to enter text. |

|  |
| --- |
| **Community Impact** |
| Click or tap here to enter text. |

|  |
| --- |
| **Ability to produce market and previous experience** |
| Click or tap here to enter text. |

|  |
| --- |
| **Environmental Impact and Sustainability**  |
| Click or tap here to enter text. |

|  |
| --- |
| **Other Information** |
| Click or tap here to enter text. |

|  |
| --- |
| **Reference Details** *Provision of two referees with full contact details are to be provided** *It is preferred that the referees are the approving authorities of other Markets which you have held*
 |
| **Referee One:**  |
| Market: Click or tap here to enter text. | Market Dates: Click here to enter a date. |
| Organisation: Click or tap here to enter text.       |
| Contact Name: Click or tap here to enter text. | Position: Click or tap here to enter text. |
| Phone: Click or tap here to enter text. | Email: Click or tap here to enter text.       |

|  |
| --- |
| **Supporting Documentation:** |
| [ ]  Initial Site Plan (including location of sound systems and speakers) | [ ]  COVID-19 Plan |
| [ ]  Copy of Certificate of Currency | [ ]  Risk Management Plan |
| **Further Documentation** *may be requested to support your original application. See the attached list for further detail.*   |

|  |
| --- |
| **Agreement:** By submitting this form you are agreeing with the following conditions:  |
| I declare that I am an authorised person to apply for the Market Permit and that all information in this application is true and correct. I have read the guidelines and accepted the conditions for Markets. I agree to comply with all permit conditions, local laws and all relevant legislation. I declare that all details provided are accurate and this Market will be organised and managed as described unless advised otherwise by the City of Port Phillip and/or its authorities. I understand that this Market Application does not constitute Market approval. |
| **Name:**  Click or tap here to enter text.A signature is not required  | **Position:**  Click or tap here to enter text. | **Date:**  Click here to enter a date.       |
| **Privacy Notification**The City of Port Phillip is collecting the personal information requested on this form for the purpose of determining the provision of Markets within the City of Port Phillip. The personal information will be used solely by the City of Port Phillip for this primary purpose and the directly related secondary purpose of sending you any further information relating to this process. The applicant understands that the personal information provided is for these purposes and that they may apply to council for access and/or amendment of the information. |

**Lodgement Details:**

**Email: (preferred method)**

Eventpermits@portphillip.vic.gov.au

**Post:**

Private Bag No 3

PO St Kilda 3182

**Deliver:**
St Kilda Town Hall
cnr Brighton Rd & Carlisle St
St Kilda Vic 3182

Emai

**Enquiries:**

Event Services

03 9209 6355

Eventpermits@portphillip.vic.gov.au