Form 213 – Standing Vehicle/Stall

Postal Address

Normanton QLD 4890

PO Box 31



Ontback by the Sea®

Internet

www.carpentaria.qld.gov.au council@carpentaria.qld.gov.au

Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or	Date:
print clearly and select boxes where applicable. Enter 'n/a' if the question does not apply.	Section B – Contact Details
Standing Vehicle/Stall Fee: \$	Business Private
Section A – Applicant/s Details	Contact Person:
Company Name:	Postal Address:
CAN/ARBN:	Suburb:
Title: (Mr, Mrs, Miss etc.)	State:
Surname:	Postcode:
Given Names:	Phone:
Position:	Mobile:
I declare the information provided in this application	Fax:
to be true and correct. Signature:	Email:
Date:	Section C – Business Details
	Business Name:
Title: (Mr, Mrs, Miss etc.)	
Surname:	
Given Names:	BN:
Position:	Street Address:
	Suburb:
I declare the information provided in this application to be true and correct.	State:
Signature:	
	Postcode:

Local Laws

Ph: 07 4745 2200

Fax: 07 4745 1340

Postal Address:	Model:
Suburb:	Туре:
State:	
Postcode:	Colour:
Phone:	Period For Which Licence Is Required:
Mobile:	Time: From: To:
Fax:	What Promotional Or Advertising Material Is To Be Used In Connection With The Activity?
Email:	
Lot Number:	
Plan Number:	
Parish:	
Section D – Site Details	Do You Intend To Use Any Amplification
Street Address Of Site:	Equipment?
Suburb:	Section F – Owners Consent
State:	Name:
Postcode:	Surname:
Products To Be Sold:	Street Address:
	Postal Address:
	Suburb:
	State:
Type Of Vehicle/Stall:	Postcode:
Proposed Storage Location Of Vehicle/Storage:	Phone:
Section E – Vehicle Details	Mobile:
Registration Number:	Fax:
Make:	Email:

Section G – Public Liability Insurance	Inspection
Name Of Insurance Company:	
	Recomme
	Rec Numb
Name Of Insured:	Account P
	Regulated
Policy Number:	☐ Yes ☐ No
Amount Of Cover:	Departme
\$	☐ Yes
Policy Expiry Date:	Application
	🗌 Yes
Section H - Lodgement	🗌 No
Please attach the following:	Authorised
A copy of your Public Liability Insurance Policy to the minimum \$ value required by Council. The Public Liability must indemnify the Council, in the prescribed form and manner, against all public liability claims arising from the operation of the	Signature:
business.	Date:
A copy of any other registration, Licence, permit or approval required under any other law.	Collection
A copy of the additional owner(s) consent (if applicable). This consent must state the applicant(s) name, the premises to which the application refers, provide details regarding the owner(s) consent to the application and be signed by the owner(s).	this form is Governmer legislation a unless auth
Section I – Authorisation	
I, being the owner of the property described in this application hereby consent to the afore-mentioned applicant(s) making this application.	
Signature:	
Date:	
Section J – Office Use Only	
Application Fee:	
\$	
Registration Number:	

Receipt Code:

ID Number:

Date:

ndation:

ber:

roperty Number:

parking approval required?

nt of Main Roads approval required?

n complies with Council Policy?

d Officer Name:

Notice: The personal information collected on for purpose of carrying out the Local nt functions in administering the relevant and will not be disclosed to any other party norised or required by law.