EVENT NOTIFICATION



www.derwentvalley.tas.go (03) 6261 8500	v.au	P.O. Box 595 New Norfolk TAS 7140					
Event contact:							
Organisation:							
Address:							
Phone: (must be a phone that is con	ntactable during bu	siness hours)		Email:	-		
EVENT DETAILS							
Event name:							
Event location:							
Event date(s):							
Time to event:	from	am/pm	to		am/pm	Overnight?	☐ Yes ☐ No
Required set-up date	e and time:						
Completion clean-up	date and time	e:					
Expected numbers of	of attendees:						
Is event is on Counc	il owned land	or private					

EVENT DESCRIPTION (UP TO 500 WORDS)

EVENT DETAILS

Will the event require hire of a Council owned or operated hall, park or reserve?	☐ Yes ☐ No
Will the event require road closures or traffic management?	☐ Yes ☐ No ☐ Unsure
Do you intend to erect any temporary portable structures, e.g. tents, marquees, stages, jumping castles, side show alley attraction or stalls ckind?	☐ Yes ☐ No of any
Will food be served/sold at the event?	☐ Yes ☐ No
Will alcohol be served/sold at the event?	☐ Yes ☐ No
Have you prepared an event risk management plan?	☐ Yes ☐ No
Will your event have over 1,000 people or more present for two hours o more?	r ☐ Yes ☐ No
Will there be loud music/ loud noise?	☐ Yes ☐ No
Will there be animals?	☐ Yes ☐ No
Will there be pyrotechnics?	☐ Yes ☐ No
INSURANCE	
Please attach a copy of the events Public Liability Insurance and return	to Derwent Valley Council.
Completed by Event Organiser/authorised person:	
Signature E	Date

RETURN COMPLETED FORM AND ABOVE REQUIREMENTS TO COUNCIL

IN PERSON	MAIL	EMAIL
Council Chambers Circle Street New Norfolk	Customer Service Derwent Valley Council PO Box 595 New Norfolk TAS 7140	dvcouncil@dvc.tas.gov.au

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