

## **Stallholder Application**

This application is for a Stallholders permit under the Shire of Toodyay Activities on Thoroughfares and Trading in Thoroughfares and Public Places Local Law.

APPLICANT DETAILS				
Full Name:				
Organisation name:			BN:	
Main Address: (Residential	I / Premises Address includin	ng Suburb and Postcode)		
Postal Address: (if different in	from above)			
Phone (H):	(M):		):	
Email:				
PROPOSED STALL ASSIST Specify names of assistants and a		umber of Stall Assistan	ts:	
Name (1):		Name (2):		
Contact No:		Contact No:		
Name (3):		Name (4):		
Contact No:		Contact No:		
Name (5):		Name (6):		
Contact No:		Contact No:		
<b>DETAILS OF PROPOSED STALL</b> Will this be a regular stall or a one off event?		☐ Regular Occurrence ☐ One-Off Event		
Date (s):				
Time(s):				
Location:		_		
FOOD Will this stall sell food or pro-	vide food services:	☐ Food / drink	□ No Food / Drink	
GOODS OR SERVICES - Sp	pecify goods or services	s to be sold, hired, or offered	d for sale from the stall	

DESCRIPTION OF PROPOSED STALL  Provide an accurate floor plan and description of the stall
TYPE:
PLAN / LAYOUT OF PROPOSED STALL (attach photographs of the van, trailer, marquee or set up stall if available)
□ Plans attache
OTHER INFORMATION REQUIRED
□ Copy of Public Liability Insurance Certificate is attached.  **All Stallholders are required to have current and adequate Public Liability Insurance.**
<ul> <li>□ Copy of Certificate of Registration of a Food Business submitted. (Obtained from your local Council)</li> <li>All food stallholders must be registered under requirements of the Food Act 2008 and notify any LGA where they trade</li> <li>□ Payment of the amount of: \$ to cover the application and permit fee.</li> <li>Stalls run entirely for Charitable purposes may be exempt from any fee</li> </ul>
Signature: Date:

16/12/2022
Stallholder Application (All Rounder)
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	vent require the approval from the e	· · · · · · · · · · · · · · · · · · ·				
Event Name:						
Contact Name:		Title:				
Phone (H):	(M):		(W):			
Event Site Location:	(include Suburb and Postcode)					
Signature:			Date:			
OFFICE USE ONLY						
Fees payable \$:		□ Permit approved				
Conditions of approva	ıl:					
Receipt No:		Assigned Registration No:				
Date received: Signature of Registration Officer:						