



City of Port Lincoln

Template No 2-9-T4

Address: Level One, Civic Centre, 60 Tasman Terrace, Port Lincoln SA 5606
Postal Address: PO Box 1787, Port Lincoln SA 5606
Email: plcc@plcc.sa.gov.au **Web:** www.portlincoln.sa.gov.au
Telephone: (08) 8621 2300 **Fax:** (08) 8621 2399

COUNCIL BY-LAW PERMIT APPLICATION

- | | |
|---|--|
| <input type="checkbox"/> Moveable Signs By-law No.2 | <input type="checkbox"/> Local Government Land By-law No.4 |
| <input type="checkbox"/> Roads By-law No.3 | <input type="checkbox"/> Dogs By-Law No.5 |

Refer to the relevant By-law for activities which require permission from Council

APPLICATION FORM PART A

I, (name)
 Of (address)
 On behalf of
 (organisation)
 Phone no..... Fax no
 Mobile no Email

Hereby apply for permission to:

2-9-T1 Events in Parks & Reserves form, 2-9-T2 Busking & Entertainment form, 2-9-T3 Street Stalls form, 2-9-T5 Display of Banners & Signs form

- | | |
|--|---|
| <input type="checkbox"/> Place a moveable Sign (By-law No.2) | <input type="checkbox"/> Use fireworks (By-law No.4) |
| <input type="checkbox"/> Camp (By-Law No.3) | <input type="checkbox"/> Play or practice Golf or other games (By-law No.4) |
| <input type="checkbox"/> Post bills, advertisements etc on vehicles, buildings,
fixtures or roads(By-Law No.3 &4) | <input type="checkbox"/> Use model aircraft, boats or cars (By-law No.4) |
| <input type="checkbox"/> Distribute printed material (By-Law No.3) | <input type="checkbox"/> Other activity |

At (location)
 On (date/s)
 Between the hours of

The purpose of the activity is:

Will a music system or amplified sound system be used Yes No

Additional requirements:

I declare that I have read and agree to comply with the "General Conditions of Permit".

Signature of Applicant **Date**.....

Please provide details and contact number of a person who will be the supervisor and responsible for the set-up, removal and clean up of the site (if applicable)

..... (name)

.....(address)

Mobile no Other phone contact.....

I declare that I have read and agree to comply with the “General Conditions of Permit”.

Signature of Supervisor Date.....

Property Occupier’s Consent

As a courtesy, if you are to be located outside of a business/s, the consent of the property occupier must be sought .

..... (name)

.....(address)

Signature Date.....

Office Use Check List

Completed and authorised form to be registered as PERMIT APPROVAL & scanned

Approval Code: **PERMIT**

Pages to be copied and returned to the Applicant as the Permit

Part A complete YES NO

Permit Fee Applicable YES NO

\$..... (GL 1060351)

Special Conditions

.....
.....
.....
.....
.....
.....
.....

For Election signs – issue current Guidelines for Control of Election Signs (LGA website)

For Moveable Signs on Vehicles - refer to Guidelines for Moveable Signs on Vehicles (LGA Website)

Please note this approval does not secure sole access to this area.

SIGNED FOR AND ON BEHALF OF THE COUNCIL

.....

Name: _____

Position: _____

Date: _____

This permit is not valid unless signed by an authorised officer of the City of Port Lincoln

OFFICE USE:

Moveable Sign Permit	File 20.712.3
Local Govt Land	File 2.9.1.3
Electoral signs, post bills etc	File 2.9.1.3
Fire works	File 5.71.5.1