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| Badge |  | **Public Event Application**  **Pursuant to Section 56A Vehicle & Traffic Act 1999** |

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|  | **EVENT DETAILS** | | | | | | | |  |
| Event name | | | | | | | | |  |
|  |  | | | | | | | |  |
| Event location | | | | | | | | |  |
|  |  | | | | | | | |  |
| Event Type | | | Event date | | | Event start time | | Event finish time |  |
|  | New  Established |  |  |  | |  |  |  |  |
| Event setup start time | | | | | | Event pack-down finish time | | |  |
|  |  | | |  | |  | | |  |
| Has event course been previously granted a permit | | | | | | | | |  |
|  | Yes  No (if yes, provide details) | | | | | | | |  |
| Have other permits / permission been granted in relation to this event, ie (local council, private  property owner) | | | | | | | | |  |
|  | Yes  No (if yes, provide evidence of permission) | | | | | | | |  |
| Public liability insurance certificate provided | | | | | | | | |  |
|  | Yes (must be provided prior to police permit being granted) | | | | | | | |  |
| Number of participants | | | | | | Age range of participants | | |  |
|  |  | | |  | |  | | |  |
|  | | | | | | | | |  |
|  | **CONTACT NAMES** | | | | | | | |  |
| 1. Organiser / Event Coordinator (to whom permit will be issued) | | | | | | | | |  |
|  | . | | | | | | | |  |
| Address | | | | | | | | Suburb |  |
|  |  | | | | | |  |  |  |
| Phone | | | | | | Fax | | |  |
|  |  | | |  | |  | | |  |
| Mobile | | | | | | Email | | |  |
|  |  | | | |  |  | | |  |
|  |  | | | | | | | |  |
| 1. Event management company (if applicable) | | | | | | | | |  |
|  |  | | | | | | | |  |
| Phone | | | | | | Fax | | |  |
|  |  | | |  | |  | | |  |
| Mobile | | | | | | Email | | |  |
|  |  | | | |  |  | | |  |
|  |  | | | | | | | |  |
| 1. Event Traffic Management Company & Contact Person | | | | | | | | |  |
|  |  | | | | | | | |  |
| Mobile | | | | | | Email | | |  |
|  |  | | | |  |  | | |  |
|  |  | | | | | | | |  |
|  | **FULL DESCRIPTION OF THE EVENT AND PURPOSE** | | | | | | | |  |
|  | **Please outline a description of the event and stipulate if any road closures are required.** If a road/s require closure, a Traffic Management Plan is required. A map / description of the proposed route is also required. | | | | | | | |  |
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|  | **TRAFFIC AND TRANSPORT MANAGEMENT** |  |
| Route or location | |  |
|  | Traffic Management Plan attached |  |
|  | |  |
|  | Not required – state reason |  |
|  | |  |
| Extra Parking Requirements | |  |
|  | Parking organised – details attached (ie Cenotaph) |  |
|  | |  |
|  | Parking not required – state reason |  |
|  | |  |
| Impact on public transport | |  |
|  | Yes (if yes, state action to be taken, ie Metro to be contacted by organiser) |  |
|  | |  |
|  | No |  |
|  | |  |
| Traffic management requirements unique to this event | |  |
|  | Yes (if yes, please state ie, (closure of Tasman Bridge) |  |
|  | |  |
|  | No |  |
|  | |  |

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|  | **MINIMISING IMPACT ON NON-EVENT COMMUNITY AND EMERGENCY SERVICES** |  |
|  | Access for local residents, businesses, hospitals and emergency vehicles |  |
|  | Actions to minimise impact on non-event community attached ie, (letterbox drop, business notification) |  |
|  | |  |
|  | This event does not impact the non-event community on the main route (or location) or detour routes |  |
|  | |  |
| **REQUIRED NOTIFICATION TO MEDIA OUTLETS** | |  |
|  | Further to any advertising of the event by the event organiser/s , a Public Notice must be published in The Mercury newspaper seven (7) days prior to the event where road closures are required. This will be managed by Tasmania Police at a cost to the organisation. A draft copy of the media release must be attached to this application.  Yes, draft copy attached  No |  |
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|  | **SAFETY RELATED STRATEGIES** |  |
|  | (ie, Marshals / Paramedics / Signage / Road closures / Ambulance / First Aid |  |
|  | |  |

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|  | **OTHER NECESSARY INFORMATION** |  |
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|  | **APPLICATION APPROVED FOR SUBMISSION TO TASMANIA POLICE** | | |  |
| Approved by (Name of applicant – Name that will appear on the permit) | | | Date |  |
|  |  |  |  |  |
|  | | | |  |

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|  | **TRAFFIC CONTROL PLAN** |  |
| Police traffic control required | |  |
|  | No  Yes (details on plan) |  |
| Motor cycle marshals | |  |
|  | No  Yes (details on plan) |  |
|  | |  |
| Lead vehicle | |  |
|  | No  Yes (details on plan) |  |
|  | |  |
| Rear vehicle | |  |
|  | No  Yes (details on plan) |  |
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| **Attach map of event route. (Compulsory)** |  |

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|  | **RETURN THE COMPLETED FORM TO:** |  |
|  | [Southern.Traffic@police.tas.gov.au](mailto:Southern.Traffic@police.tas.gov.au) or forward to Tasmania Police PO Box 21 Hobart Tas 7000 |  |
|  |  |  |