**Meeting Room:** **Senior Citizens Hall:**   **SARI Hall:**

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**Other:** Please List …………………………………..………………………………………………………

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Will the following be needed: Use of the Kitchen Hall Set Up Other

Please attach a set up plan for the facility as needed: Setting up will be at your cost.

**Date/s Required** From: ……………………………………… To: …………………………………………………..

**Times Required** From: ………………………………………… To: …………………….………….………………..

**Name of Applicant:** ……………………………………………….……………………...……………….…………………….

**Name of Organisation:** ………………………………………………………….…….……………….………………………

**Address:** ………………………………………………………………………………………..………………………………………

**Contact Ph. No:** ……………………………………..…**Email: .................................................................**

**Event Details**

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**Private event:** Do you have Public Liability Insurance? **Yes / No**

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Will Alcohol be available at your event?

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Please supply a copy of the appropriate licence. **Yes / no**

t****

**Public Event:** a) Copy of insurance is required

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Will Alcohol be available at your event?

t****

Please supply a copy of the appropriate licence. **Yes / no**

t****

b) Event Management Plan is required

The issuing of this permit is subject to:

***A. The permit holder paying the prescribed fees and deposit prior to the event.***

***B. The permit holder agreeing to the General Conditions of the permit as contained herein.***

***C. The permit holder agreeing to all Special Conditions which the Council may determine.***

***D. The permit holder providing a copy of appropriate insurances as required by either the general conditions or special conditions.***

**General Conditions of Permit**

1. **Food and drinks** – Preparation of food and drinks is **not** permitted in Halls/Meeting Room. Consumption **is** permitted in the Halls/Meeting Room.

2 The permit holder agrees to indemnify and to keep indemnified the Council, its servants and agents and each of them from and against all actions, costs, claims, damages, charges, and expenses whatsoever which may be brought or made or claimed against them or any of them arising out of or in relation to the issuing of the permit.

3 The permit holder, where appropriate, shall ensure that it is licensed or registered to carry out the activity authorised by the issuing of this permit.

4 Keys to be collected during normal office hours ;a key deposit of $30 is applicable and will be refunded on return of the key.

5 The permit holder shall ensure that any breakages of glass or spillage of food or drink are cleaned up immediately, or else a cleaning fee will apply. The Room is to be left in a neat and tidy condition with all rubbish to be disposed after use. Deposit will be withheld.

6 The hirer will be responsible for any loss or breakage of inventory items. If an item is broken please report the incident to the District Council of Peterborough. Kitchen items are **not** to be removed from the Meeting Room.

7 The hall/ room is to be left in a neat and tidy condition with all rubbish to be disposed after use. Deposit will be withheld.

8 All electrical lights, heaters and appliances must be switched off on vacating the Room. Urns emptied, sinks emptied and cleaned, all kitchen surfaces to be cleaned and wiped.

9 The hirer is responsible for the use of the facility, including the loss or damage to fixture, fittings and equipment. Repairing and/or replacing any damaged furniture, fixtures, fittings and equipment, and inventory items will be the responsibility of the permit holder. The Council will recover the cost of such repair and replacement from the permit holder.

10 In the event of an emergency, the room and all rooms in use are to be evacuated, emergency services notified immediately, and Council notified as soon as possible. No-one is to re-enter facilities until given the all clear by emergency services or Council management.

If any problems arise please call Greg Duggan on 0427864971.

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**I acknowledge that I have read and understand the permit conditions and agree to abide by the said conditions.**

**SIGNED FOR AND ON BEHALF OF THE PERMIT HOLDER:**

**NAME: POSITION:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**COUNCIL AUTHORISATION:**

**INSURANCE: YES / NO OTHER PERMITS REQUIRED: YES / NO**

**FEES PAID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DEPOSIT PAID: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**KEYS ISSUED: \_\_\_\_\_\_\_\_\_ NUMBER OF KEYS ISSUED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**