|  |  |  |
| --- | --- | --- |
| Badge |  | **Public Event Application****Pursuant to Section 56A Vehicle & Traffic Act 1999****& Section 49AB Police Offences Act 1935** |

|  |  |  |
| --- | --- | --- |
|  | **EVENT DETAILS** |  |
|  | Event name |  |
|  |       |  |
|  | Event location |  |
|  |       |  |
|  | Event Type | Event date/s | 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, i.e. (local council, state government, private property owner) |  |
|  | [ ]  Yes [ ]  No (if yes, provide evidence of permission)       |  |
|  | Public liability insurance certificate provided (Ensure coverage level is suitable for your event) |  |
|  | [ ]  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 | State | Postcode |  |
|  |       |  |       |  |       |  |       |  |
|  | Phone | Fax |  |
|  |       |  |       |  |
|  | Mobile | Email |  |
|  |       |  |       |  |
|  |  |  |
|  | 1. Event management company/ organisation/ club name (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.      |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  | **TRAFFIC AND TRANSPORT MANAGEMENT** |  |
|  | Route or location |  |
|  | [ ]  Traffic Management – plan attached |  |
|  |  |  |
|  | [ ]  Not required – state reason       |  |
|  |  |  |
|  | Extra Parking Requirements |  |
|  | [ ]  Parking organised – details attached (i.e. Cenotaph) |  |
|  |  |  |
|  | [ ]  Parking not required – state reason       |  |
|  |  |  |
|  | Impact on public transport |  |
|  | [ ]  Yes (if yes, state action to be taken, i.e. Metro to be contacted by organiser)       |  |
|  |  |  |
|  | [ ]  No |  |
|  |  |  |
|  | Traffic management requirements unique to this event |  |
|  | [ ]  Yes (if yes, please state i.e. Closure of Tasman Bridge)       |  |
|  |  |  |
|  | [ ]  No |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  | **MINIMISING IMPACT ON NON-EVENT COMMUNITY AND EMERGENCY SERVICES** |  |
|  | Access for residents, businesses, hospitals, and emergency vehicles |  |
|  | [ ]  Actions to minimise impact on non-event community attached i.e. (resident/ 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/ examiner 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 |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  | **SAFETY RELATED STRATEGIES** |  |
|  | (i.e. Marshals / Paramedics / Signage / Road closures / Ambulance / First Aid)      |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  | **OTHER NECESSARY INFORMATION** |  |
|  |       |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  | **TRAFFIC CONTROL PLAN** |  |
|  | Police traffic control required |  |
|  | [ ]  No [ ]  Yes (details on plan)       |  |
|  |  |  |
|  | Motorcycle marshals |  |
|  | [ ]  No [ ]  Yes (details on plan)       |  |
|  |  |  |
|  | Lead vehicle |  |
|  | [ ]  No [ ]  Yes (details on plan)       |  |
|  |  |  |
|  | Rear vehicle |  |
|  | [ ]  No [ ]  Yes (details on plan)       |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  | **Attach map of event route/track. (Compulsory)** |  |
|  |  |  |
|  | [ ]  Course/ Route/ Track Map – attached |  |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
|  | **RETURN THE COMPLETED FORM TO:** |  |
|  | Southern DistrictEmail to southern.traffic@police.tas.gov.au (Preferred Method)Post to Tasmania Police PO Box 21HOBART TAS 7000Northern DistrictEmail to nthn.dss.admin@police.tas.gov.au (Preferred Method)Post to Tasmania Police PO Box 45LAUNCESTON TAS 7250 Western DistrictEmail to western.district.administration@police.tas.gov.au (Preferred Method)Post to Tasmania Police PO Box 19 BURNIE TAS 7320 |  |
|  |  |  |