

Council Endorsement – Short Term Liquor Licence Application

Section 1: Applicant to complete

Applicant name	
Premises address and nature of premises	
Function/Event	
Licence number (if applicable)	
Licence Category Type	Short Term

Short Term Liquor Licence Information

Event Dates and Hours

Dates		Hours	
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Capacity and plan of licensed premises

Overall capacity at any given time							
Attach plan of licensed area	<table border="1"> <tr> <th>Attached?</th> <th>Yes</th> <th>No</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	Attached?	Yes	No			
Attached?	Yes	No					

Plan – Please attach a copy of the plan

Application – Please attach a copy of the short term application

Risk Management Plan – Please attach a copy of the risk management plan (for class 3 only)

Optional - Please provide additional comments, or attach additional documents, if this may assist council to understand your Short Term liquor application (e.g describe the function or event that is occurring, how liquor will be supplied, will licensed security personnel be used etc.)

Form purpose

This form allows council to provide comment about relevant development approvals, consents, permits and exemptions for the premises.

Completion of this form by council does not constitute approval of the licence application.

Approval or refusal of your licence application will be determined by Consumer and Business Services (CBS) after it is submitted with CBS.

Comments:

Section 2: Council to complete

I confirm all relevant planning and development approvals, consents and exemptions required in connection with this short term application have been obtained – **Yes No N/A**

I confirm the proposed trading hours, capacity and premises plan sought for the short term licence are suitable – **Yes No N/A**

If all relevant approvals have not been obtained, what steps or processes (e.g. variation to development approval), remain outstanding?

Comments:

Optional – Please attach additional documents, e.g. support letters with conditions, decision notification forms, if this may assist the applicant or the Licensing Authority

Name	
Position	
Council	
Signature	
Date	