

PERMIT APPLICATION FORM

GPO Box 373, Canberra ACT 2601 P 02 6271 2888 | F 02 6273 4427 events@nca.gov.au nca.gov.au **f y**

	Event details	Indemnity
Event Name Event Organiser	Note: the Event organiser is the person or whose name the Public Liability Insurance the event (not required for weddings).	
Location		,,,,,
Event Date	Event Start Time Even	hereby indemnify and will keep indemnified the Commonwealth, its officers, employees and agents from and against all actions, claims, demands,
	Setup Date/Start Time Pack-down	n Date/ Finish Time costs and expenses (including the cost of defending or settling any action, claim
Estimated Number of Spectators Estimated Number of Participants		or demand) made, sustained, brought or prosecuted in any manner based upon, occasioned by or attributable to any injury,
	Your details	to any person (including death) or loss of or damage to property which may arise
Contact Name Postal Address Phone		from or be a consequence of any unlawful or negligent act or omission of the person or organisation, its officers, employees or agents in carrying out the activity.
E-mail		Signed
Mobile Event proposal and executive summary	Event overview	Date

Please include an accompanying site plan and any other documentation to support your application.

Do you intend to

Yes

Errect any structures

Close a road or lake

Signage

Vehicles access to site

If yes, a works approval is required (fess apply).

Ye

No

No

Will you require power