

APPLICATION TO RENEW OUTDOOR EATING FACILITY PERMIT

Town of Cambridge Trading In Public Places Local Law



1 Bold Park Drive
Floreat WA 6014
Telephone: 9347 6000
www.cambridge.wa.gov.au

APPLICANT'S DETAILS		APPLICATION NO:	
Business Name:			
Business Residential Address:		Postcode:	
Business Postal Address:		Postcode:	
ABN Number:			
Applicant Name:			
Email:			
Phone:		Mobile:	

Hereby make application for a permit to establish and conduct and Outdoor Eating Facility pursuant to Town of Cambridge Trading in Public Places Local Law.

DETAILS OF PROPOSED OUTDOOR EATING FACILITY

PROPOSED HOURS AND DAYS OF OPERATION			
DAY	HOURS	DAY	HOURS
Monday		Friday	
Tuesday		Saturday	
Wednesday		Sunday	
Thursday			

NUMBER OF TABLES, CHAIRS AND ANY OTHER STRUCTURES		
Number of Chairs:	Number of Tables:	Number of Umbrellas:
Type and number of other structures:		

PLEASE ATTACH A COPY OF YOUR CURRENT PUBLIC LIABILITY INSURANCE
Public liability insurance attached: <input type="checkbox"/>

APPLICANT DECLARATION

I hereby declare that:

- the food business is registered and I am the licensed proprietor of the food business, as required by S110 of the Food Act 2008.
- the business holds a current public indemnity insurance policy for not less than \$10 million and a certificate of currency of that policy is attached.
- the consumption of alcohol is / is not permitted in the outdoor eating facility.
- any additional chairs, tables and/or structures are subject to review.

Applicant Name:	
Signature:	Date:

LODGING THE APPLICATION

- In person: Town of Cambridge, 1 Bold Park Drive, Floreat WA 6014
- By mail: Town of Cambridge, PO Box 15, Floreat WA 6014
- By email: mail@cambridge.wa.gov.au