



## FOOTPATH TRADING PERMIT APPLICATION FORM

**Applicant's name:** \_\_\_\_\_

**Business name:** \_\_\_\_\_

**ABN:** \_\_\_\_\_

**Postal address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Footpath trading application type:**

- ☐ On-street dining      ☐ Vending / other      ☐ Signage

**Proposed daily footpath trading times:** \_\_\_\_\_ to \_\_\_\_\_

**Proposed occupancy limit of the footpath trading area (if applicable):** \_\_\_\_\_

**Proposed footpath trading days:**

- ☐ Monday      ☐ Thursday      ☐ Saturday  
☐ Tuesday      ☐ Friday      ☐ Sunday  
☐ Wednesday

**Location and size (m<sup>2</sup>) of proposed footpath trading area:**

*Please also attach a scale site plan with setbacks clearly defined.*

\_\_\_\_\_

\_\_\_\_\_



kingborough.tas.gov.au

Civic Centre, 15 Channel Hwy, Kingston, Tasmania 7050 Locked Bag 1, Kingston Tasmania 7050  
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**Details of proposed furniture (e.g. size, materials, colours for tables, chairs, umbrellas, screens etc.):**

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### Application attachment checklist

*Please attach copies of the below documentation with your application:*

- ☐ Certificate of Currency for at least \$10M Public Liability Insurance
- ☐ If you plan for alcohol to be consumed in the footpath trading area, evidence of a valid liquor license, which incorporates proposed footpath trading area.
- ☐ Scaled site plan showing the location and dimensions of the proposed footpath trading area, with setbacks clearly identified and in compliance with minimum footpath zones.

**A footpath trading permit incurs a fee as set by Council which is listed in the annual Fees and Charges Schedule. Permits are issued or renewed annually from 1 July each year on receipt of payment of the annual fees.**

If your application is successful do you agree to comply with all the conditions of this permit and assume all responsibility for any and all liabilities that arise as a direct result of your footpath trading in the municipality:

- ☐ Yes ☐ No

By signing below you declare that all information provided in this application is true and correct.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

#### Privacy Statement

Completion of this form may require the disclosure of personal information. The intended recipients of this information are officers of the Kingborough Council in order to advance the purposes of this form and to carry out Council business. The Personal Information Protection Act 2004 and Council's Privacy Policy regulate the use of this information, which will not be disclosed to any other party, except with your permission or if required or authorised by law. You may make application to access or amend personal information held by Council by contacting the Customer Service Unit on 6211 8200. Should you not provide the information sought, Council will not be able to process this form.



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