

SHIRE OF WAROONA APPLICATION FOR TRADING IN A PUBLIC PLACE

DETAILS OF APPLICANT			
BUSINESS NAME:			
GIVEN NAMES:			
LAST NAME:			
MOBILE NUMBER:			
WORK NUMBER:			
EMAIL ADDRESS:			
ADDRESS:			
	TOWN/CITY:	POSTCODE:	

TRADING INFORMATION	
LOCATION OF PROPOSED TRADING ACTIVITY: (A plan should be submitted indicating locations)	
NATURE OF PROPOSED TRADING ACTIVITY: (Describe how the goods will be displayed, sold and/or services offered)	
DETAILS OF PROPOSED STALL: (eg, trailer, cart, table, vehicle)	
Full name & address of any assistants who may be engaged at any one time in trading:	
Proposed commencement date and other proposed date/s of operation (if applicable):	

OTHER INFORMATION		
VEHICLE REGISTRATION NUMBER:		
FOOD BUSINESS REGISTRATION: (Copy to be provided)		
PUBLIC RISK INSURANCE: (Copy to be provided)		
Is a Police Clearance attached (no more than 3 months old)?		

I HAVE ATTACHED A COPY OF MY CURRENT FOOD BUSINESS REGISTRATION AND PUBLIC RISK INSURANCE.				
SIGNATURE:	DATE:			

FEES	
Application & 2 Day License	\$50.00
Application & 7 Day License	\$132.00
Application & 30 Day License	\$185.00
Application & 90 Day License	\$295.00
Application & 180 Day License	\$295.00
Application & 365 Day License	\$490.00