

KEMPSEY SHIRE COUNCIL

Civic Centre, 22 Tozer Street, Kempsey 2440
PO Box 3078, West Kempsey 2440
Phone 02 6566 3240 Fax 02 6566 3245
Web: www.kempsey.nsw.gov.au Email: ksc@kempsey.nsw.gov.au



APPROVAL TO OPERATE AN AMUSEMENT DEVICE (CONSTRUCTION SAFETY ACT)

Application is hereby made for an approval under Part F Section 68 of the Local Government Act in respect of the following property.

PROPERTY DESCRIPTION (where activity to be carried out)

No:	Street:	Location:	Postcode:
Lot No:	DP or Section:	Nearest Cross Street:	

BRIEF DESCRIPTION OF PROPOSAL AND LOCATION PLAN

ADDITIONAL INFORMATION

Additional information outlined overleaf on Page 2.

APPLICANT

Name:	Phone (BH):
Address:	Fax:

OWNER

Name:	Phone (BH):
Address:	Postcode:

APPLICANT'S AUTHORITY

I/We hereby:-
Consent to Kempsey Shire Council displaying and copying this application and supporting documentation, including designs, for the purpose of obtaining, when necessary, public comment.

Applicant's Signature: _____ Date: _____

OWNER'S CONSENT

I/We, _____ of _____

Being the owner/s of the land to which this application relates, hereby consent to the making of this application and hereby grants Council the power of entry to carry out inspections in relation to any land or building to which this application relates.

Owner's Signature(s) _____ Date: _____

Note: All owners must sign if owned by a company the consent must be under Company Seal.

OFFICE USE ONLY

Amount: \$	Receipt No:	Allocation No:
Property LA No/File:	Register No:	Acknowledged:

ADDITIONAL INFORMATION

Description of Device _____ Registration No _____

_____ Expiry Date _____

Date(s) of Operation _____

Name of Insurance Company _____

Policy Number _____ Policy Expiry Date _____

Note: The Insurance Cover is to be for a minimum of \$20 million. Attach copy of policy.

Large empty rectangular area for providing additional information or attaching documents.