

APPLICATION FOR SITING APPROVAL

Prescribed Temporary Structures

Building Act 1993, Section 57(1)(a)

| TO: | | | | | |
|--|---|----------------------|---------|--------------------------------|--|
| The Municipal Building Surveyor | | | | Telephone: 5355 0200 | |
| Ararat Rural City Council, PO Box 246, Ararat | | | | Facsimile: 5355 0279 | |
| Email: building@ararat.vic.gov.au | | | | | |
| | | | | | |
| FROM: | | | | | |
| | f the land: | Event Organiser: | | Hirer of Temporary Structures: | |
| Organization/Company/Owner name: Telephone: | | | | | |
| Address: | | | | Facsimile: | |
| Contact person: Mobile: | | | | | |
| Contact persons e-mail address: | | | | | |
| PROPERTY DETAILS: | | | | | |
| Number: | Number: Street/Road: | | | Suburb: | |
| Name of venue or location: | | | | | |
| EVENT: | | | | | |
| Event Name: | | | | | |
| Event Organisers Name: | | | | | |
| Event Organisers Address: | | | | Telephone: | |
| TYPE OF PRESCRIBED TEMPORARY STRUCTURES: | | | | | |
| Type of Temporary Structure Size (length : | | Size (length x width | h = m2) | Victorian Building Authority | |
| | | | | Occupancy Permit number | |
| | | | | | |
| | | | | | |
| | | | | | |
| Note: A scaled site plan and floor plan of each structure must be submitted with this application. | | | | | |
| DURATION OF EVENT: | | | | | |
| Start date which structures will be occupied | | | Date: | | |
| End date which structures will be occupied | | | Date: | | |
| BUILDING PRACTITIONER DETAILS: | | | | | |
| Name of practitioner erecting the structure: Registration No: | | | | | |
| Practitioner Phone number: Email: | | | | | |
| Name of practitioner providing certificate of compliance: Registration No: | | | | | |
| Practitioner Phone number: Email: | | | | | |
| APPLICANTS DECLARATION: | | | | | |
| I am authorised to apply for this permit on behalf of the client | | | | | |
| And I hereby undertake to comply with the requirements of the Building Act 1993, Building Interim | | | | | |
| Regulations 2017, the Building Code of Australia and any special conditions as requested by an | | | | | |
| Authorised Officer of the Council. I understand by making this application I will be invoiced for an | | | | | |
| application fee. Signature of owner/event organiser/hirer: Date: | | | | | |
| Signature of owner/event organiser/hirer: Date: Print Name: | | | | | |
| Print Name: Notes: 1. A scaled site plan and floor plan must be submitted with this application | | | | | |
| NOLES. | 2. Minimum fee of \$430.00 (final fee advised upon MBS assessment of application) | | | | |
| | 3. Types of structures include tents, marquees, booths, seating stands, stages, platforms other prefabricated | | | | |
| | Buildings and the like. | | | | |
| Council is collecting this information in accordance with Section 57 of the Building Act 1993. | | | | | |

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