

FORM

APPLICATION TO DISTRIBUTE FLYERS, FREE SAMPLES, SURVEYS & PETITIONS

Pursuant to Section 222 of Local Government Act and By-Law 4

This application will not be processed unless all details are completed correctly and relevant supporting documentation is provided



To successfully complete your permit application, you will be required to submit the following information and documents as part of this application (Please tick or cross appropriate boxes):

- Certificate of Currency of your Public Liability Insurance with a minimum cover of \$20 million, noting City of Port Adelaide Enfield as an interested party.
- A photo or picture of the flyer, petition, survey or sample to be handed out.

APPLICANT DETAILS

Mr Mrs Ms Other _____

Surname/Family _____ Given Name/s _____

Business or Organisation Name _____

Registered Company (Legal Entity – Name on Insurance)

Company ABN _____ Email Address _____

Address _____

Postal Address _____

Phone Number _____

Are you applying as:

- A business or organisation A registered charity or not for profit organisation
- An agent or subcontractor for State Government or Crown (including contractors of a State Government Minister, Department or Agency) An individual

ACTIVITY DETAILS

Type of activity:

- Distribution of Printed Materials (i.e., Flyers) Handing out free samples
- Petition Surveying

Please describe your activity

Number of people delivering the activity _____

Please note the maximum number of representatives allowed at the same location is four.

LOCATIONS

Road name and suburb _____

Will the activity run across multiple locations and/or dates? Yes No

If no, please provide the location, date and times for the activity.

If yes, please list the locations, dates and times for the activity.

FEES & CHARGES FOR MEDIA PRODUCTIONS

Fees apply for business promotions in the public space which are reviewed annually and included in the Fees and Charges Schedule.

APPLICANT'S AGREEMENT

I certify that the information on this form, as supplied by me, is true and complete.

Signature _____ Date _____

To return this form – send all documents by email to service@cityofpae.sa.gov.au or lodge in person at the Civic Centre, 163 St Vincent Street, Port Adelaide.

