Building Application
Building services

Application for siting consent of a prescribed temporary structure - place of public entertainment

Building Act 1993
Building Regulations 2018
Knox Planning Scheme
Health Act 1958
Knox Community Laws

TO THE MUNICIPAL BUILDING SURVEYOR					
Event Applicant (Agent of Owner):					
Postal address:					Postcode:
Phone number:			Email:		
Owner of the land:					
Address:					Postcode:
Phone number:			Email:		
Indicate if the applicant is a lessee or licensee of Crown land to which this application applies (if applicable) YES or NO					
PROPERTY DETAILS					
No:	Street/road:		Suburb:		Postcode:
Lot/s:	LP/PS:	Volume:	Folio:	Crown allotment:	Section:
Parish:		County:	Municipal district: Knox		
Indicate is the land owned by the Crown or a public authority (if applicable) YES NO					
NATURE OF EVENT					
Event:					
Duration of event: from / / to / /					
SIGNATURE AND DATE					
Signature of owner or agent:					Date: