



# APPLICATION FOR STREET COLLECTORS PERMIT

## LOCAL LAW PART 8

*Street traders include buskers, raffle ticket sellers, street stalls, charity collectors, door to door collectors.*

### BUSINESS / ORGANISATION DETAILS:

Organisation Name: \_\_\_\_\_

Organisation Postal Address: \_\_\_\_\_

(the address permit will be posted / emailed to) \_\_\_\_\_

Contact Person: \_\_\_\_\_

BH  
Phone: \_\_\_\_\_

### APPLY FOR A PERMIT TO:

- Be Present in a Street
  - And/or call from residence to residence and solicit or collect gifts of money or subscriptions
  - Not for Profit Organisation
- (Please tick the appropriate box)

### TRADING DETAILS:

Goods to be sold: \_\_\_\_\_

Purpose of Trading: \_\_\_\_\_

**Trading Duration** – Permits will only be issued for a maximum of 7 days – no further permits will be issued until any existing permit has expired unless an exemption to the above is granted.

Day	Date	Start Time	Finish Time
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

**Trading Location** – Please tick one box only

- Victoria Street (East Side), Nhill
- Lochiel Street, Dimboola
- Jeparit
- Other (please specify): \_\_\_\_\_
- Victoria Street (West Side), Nhill
- Lloyd Street, Dimboola
- Rainbow

## GENERAL CONDITIONS OF STREET TRADERS PERMIT:

### A All Permits

1. This permit authorises the holder to trade on land not normally occupied by the vendor. At no stage does this permit authorise the sale of food products.
2. No selling is permitted which is in direct competition with established traders.
3. Any instructions issued by a Member of the Police Force or an Officer of the Council must be observed.
4. Emergency Access Clearways must be preserved at all times.
5. No trailing power cords or undue interference with pedestrian traffic permitted.
6. **The Street Traders Permit holder shall hold Public Liability Insurance of a minimum of a \$5 million cover for the use hereby permitted by this Street Traders Permit.**

### B Advertising Promotions

1. No charge is to be made for the public to view an advertising promotion or display area.

### C Selling/Free Distribution of Goods

1. Selling of goods shall be restricted to homemade goods, craft goods, second hand goods, donated goods, Hindmarsh Shire Council related goods exclusive to the seller and with their own emblem, etc., unless otherwise approved.
2. Selling of food for immediate consumption will not be approved in normal trading hours Monday to Friday and up to 1:00pm Saturday if it is deemed by Council to be in a manner detrimental to local shops selling food and servicing the general public. The selling of food at all times must be approved subject to conditions imposed by Council's Environmental Health Officer. All vendors wishing to sell food must apply for a Temporary Food Registration and complete the appropriate Food Safety Program Template.

**I/We the undersigned have read and understand the above conditions and indemnify Council against all actions resulting from the sale of goods.**

\_\_\_\_\_  
Signed

\_\_\_\_\_  
on behalf of Organisation/Club

\_\_\_\_\_  
Please print name

\_\_\_\_\_  
Date

**Street Trader and Collectors Permit Fee**

-

**\$45.00**

**STORE OWNER/OPERATOR TO COMPLETE.**

I/We hereby give permission for the Organisation/Club detailed above to have a street stall in front of my/our place of business at the location above:

\_\_\_\_\_  
Owner/Operator Signature

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Date

**ATTACHMENT CHECKLIST**

- Risk Management Plan (Risk Management form on website / Customer Service Centres)
- Copy of Certificate of Currency for Public Liability Insurance / HSC Insured's Certificate
- Copy of Receipt

**STATEMENT BY APPLICANT**

*I warrant that the information set out above is true and correct.*

\_\_\_\_\_  
Signed

\_\_\_\_\_  
on behalf of Organisation/Club Name

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Date

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**OFFICE USE ONLY**

**Date Received:** \_\_\_\_\_ **Receipt Number:** \_\_\_\_\_

**Local Laws Officer Comments:**

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**Recommendation:** Grant Permit / Refuse Permit    **Date:** \_\_\_\_\_

**Authorised Officer:** \_\_\_\_\_

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