



OFFICE USE: FEE: \$.....

RECEIPT NO:..... Date:.....

Approval for Amusement Device in Accordance with the Local Government (General) Regulation 2005

NOTE THIS APPLICATION MUST BE SUBMITTED TO COUNCIL NO LATER THAN 2 WORKING DAYS PRIOR TO THE EVENT (FAXES ARE ACCEPTABLE)

Details:

Amusement Device Name:

Amusement Device (workcover) Registration Number:

Owners Name:	Address to be located:.....
Owners Address:.....
.....
Phone No:.....	Dates of Operation:.....

COUNCIL APPROVES THE OPERATION OF THE ABOVE AMUSEMENT DEVICE IN ACCORDANCE WITH THE LOCAL GOVERNMENT (APPROVALS) REGULATION 1993, SUBJECT TO THE FOLLOWING CONDITIONS:

1. Provide a copy of Certificate of Plant Item Registration from WorkCover.
2. The applicant/owner providing evidence of Council confirming that a current contract of insurance or indemnity of at least \$10,000,000 to cover the abovementioned device. Policy name, number and expiry date.
3. That all conditions subject to which the device was registered under the Construction Safety Regulation 1950, are complied with and that the device is installed, erected, and operated in a safe manner.

I certify that the abovementioned matters have been completed:

Applicant Signature:..... Date:.....

OFFICE USE ONLY:
Before issuing this approval Council must be satisfied that the following documentation and matters have been attended to:

1. Council's receipt of the amusement devices registration certificate issued by Workcover NSW. This should include any special conditions if necessary.
2. That Council has sighted evidence of a current contact of insurance or indemnity of at least \$10,000,000.
DETAILS OF INSURANCE:
3. Council is satisfied that there exists for the device a current log book in terms of the Construction Safety Regulations 1950. (In accordance with Department of Local Government Circular 98/04 Ref. AF97/0350).

Signed Council Officer:..... Date:

TRIM 1979#714