

LICENCE PERMIT APPLICATION Tables and chairs Local law 46.2.3

Permit application fee applies

**CITY OF WODONGA** Protection Local Law

(Local Law No. 1 of 2014)

ABN: 63 277 160 265**Tax Invoice****In person:** 104 Hovell St, Wodonga, VIC 3690**Phone:** (02) 6022 9300**Post:** PO Box 923, Wodonga, VIC 3689 **Fax:** (02) 6022 9322 **Email:** info@wodonga.vic.gov.au

Applicant	Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss
	Given name/s:
	Surname:
	Organisation/trading name:
	Address:
	Suburb: State: Post code
	Phone (work):
	Phone (home):
	Mobile:
	Email:
I hereby apply for a permit to have tables on display. (If this application relates to food items is a health permit required?) Yes <input type="checkbox"/> No <input type="checkbox"/>	Location:
	No. of tables:
	No. of chairs:
	Hours of operation:
Please indicate where the tables and chairs will be placed, (or attach plan):	Property boundary
	Kerb line
<input type="checkbox"/>	I understand that public liability insurance is required to the minimum value of \$10 million with Wodonga Council's interest noted, and confirming items subject to the permit are covered outside the premises, and have attached a copy of my insurance with this application.
Signature of applicant: _____ Date: _____	

Office Use Only:

Receipt number: _____	Date paid: _____	Licence prepayment No. _____
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Payment options



In person - EFTPOS, credit card, cheque* or cash

Mail options - cheque or credit card (please complete credit card details below):

Card number:

Expiry date:

CCV number
(three digit number on back of card)

Name on card:

Signature:

* Please make cheques payable to 'Wodonga City Council'.