

CITY OF WODONGA Environment and Community 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

PERMIT TYPE:

Street Stall:
 Raffle:

LOCATION:

Outside 'Reflections on High' wall, Coles - High St
 Outside ANZ bank - High St

Applicant	Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss			
	Given name:			
	Surname:			
	Address:			
	Suburb:		State:	Post code
	Phone (work):			
	Phone (home):			
	Mobile:			
	Fax:			
	Email:			
Details	Proposed date/s of stall/activity:			
	Time:			
	If food stall list range of foods offered:			
Food notes:	<p>If food is being sold, please refer to our website: www.wodonga.vic.gov.au for requirements. Alternatively you can contact our Environmental Health Department on (02) 6022 9300 or email: info@wodonga.vic.gov.au</p>			
Raffle notes:	<input type="checkbox"/>	<p>I have visited consumer Affairs Victoria website www.consumer.vic.gov.au and have read the fundraising guidelines regarding the Fundraising Appeals Act 1998, and I agree to apply to the Office of Fair Trading if our organisation/community group is not exempt from the act.</p> <p><i>You should be aware that raffles where prizes have a total retail value in excess of \$5,000 will require a permit from the Victorian Casino and Gaming Authority. there are also conditions set out regarding conduct of a small raffle. If you require further information regarding same, please contact the Victorian Casino and Gaming Authority on (02) 9651 3333.</i></p>		
	<input type="checkbox"/>	<p>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.</p>		

Signature of applicant: _____

Date: _____

Office Use Only:

Receipt number: _____	Date paid: _____	Booking/compliance No. _____
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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'.