## **EVENT SUBMISSION - FORM**

## PART 1A

Name of enquirer	
1	
Organisation / Group	
Postal address	
1 Cotal addi coo	
Postcode	
. 00.0000	
Contact telephone number(s)	
Email address	
Email address	
PART 1B	
I AIXI ID	

Name of event	
Date(s) of event	
Time(s) of event	
Set up / clear up time	
Duration of event	
Nature of event & event description  Location of event	
Who owns the land	
Has permission been sought	
from the landowner	
Target audience	
(demographic – age, etc)	
Target attendance figure	
(anticipated attendees)	

PART 2		
Will you be selling alco	hol?	
YES 🗆	If you've marked 'yes' then please be aware that you may need to make a licensing application for which there is an associated fee.	
Will there be commercial traders?		
YES 🗆	If you've marked 'yes' then please be aware that you may need to make a licensing application for which there is an associated fee.	
Will you be making an charitable collections?		
NO □ YES □	If you've marked 'yes' then please be aware that you may need to make a licensing application.	
Will there be any entertainment? (please give details)		
Will you be selling food? (please give details)		
Will you be erecting a structure?		
Will you be making any traffic management proposals?		
Do you have public liab	oility insurance?	
NO □ YES □ £	If you've marked 'yes' then please state how much below .	