

## Installation of a Moveable Advertising Device

### Subordinate Local Law 1 (Administration) 2019

**PURPOSE:** This form will be used to process your application for installing a Moveable Advertising Device on a local government controlled area.

<b>IMPORTANT INFORMATION</b>
<ul style="list-style-type: none"> <li>A Moveable Advertising Device means an advertisement or sign that is <b>not</b> permanent and easily relocated or moved by a person.</li> <li>Permanent devices or devices that cannot be easily relocated or moved by a person may need temporary/building approval under the <i>Building Act 1975</i>. Please contact a building certifier to seek further advice.</li> <li>Applications will be assessed against the provisions within Schedule 9 of the <i>Fraser Coast Regional Council Local Law No.1 (Administration) 2019</i>.</li> </ul>

<b>APPLICANT DETAILS</b>			<b>Office use only – Name No:</b>		
Business Name			ABN:		
Position		Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss		
Surname			Given Name/s		
Postal Address					
Email					
Phone	M:		H:		W:

<b>PROPOSED LOCATION OF MOVEABLE ADVERTISING DEVICE</b>		<b>Office use only – Prop No:</b>		
Street Address, Suburb & Postcode				

<b>PUBLIC LIABILITY INSURANCE DETAILS</b>			
The applicant/s must for the duration of the term of the approval, maintain in full force and effect a standard public liability insurance policy in the joint names of the approval holder and the local government, covering their respective rights, interests and liabilities to third parties in respect of accidental death of, or accidental bodily injury to, persons or accidental damage to property and for an amount of no less than \$20 million for any single event and prior to the commencement of the activity. The applicant must also provide the local government with the certificate of currency for the standard public liability insurance policy that indemnifies the local government and the State against all actions, proceedings, claims, demands, costs, losses, damages, and expenses which may be brought against, or made upon, the local government or the State as a result of the activity.			
Name of insurance Company			Amount \$
Policy Number			Expiry Date / /

<b>MOVEABLE ADVERTISING DEVICE DETAILS</b>										
Quantity			Dimensions (mm)			W	x	H		
Purpose/Activity	<input type="checkbox"/> Real estate		<input type="checkbox"/> Commercial/Business		<input type="checkbox"/> Third Party		<input type="checkbox"/> Other			
A-Frame Device	<input type="checkbox"/> Y <input type="checkbox"/> N	Strut	<input type="checkbox"/> Y <input type="checkbox"/> N	Weighted	<input type="checkbox"/> Y <input type="checkbox"/> N	Corners Chamfered	<input type="checkbox"/> Y <input type="checkbox"/> N			

**FURTHER DETAILS**

Please provide details of signage wording and pictures etc. Details can be provided as attachments.

*Please note it is a condition of approval that the sign does not contain explicit, inappropriate, offensive, or irrelevant content.*

**ATTACHMENTS**

Evidence of Standard Public Liability of no less than \$20 million, incorporating cover for the associated activities.

☐

Any additional proposed information relating to your activity/s (in addition to Section 4 if applicable)

☐**Declaration**☐

I declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regards to any matters relevant to this application.

☐

In making an application, I agree to indemnify Fraser Coast Regional Council from and against all actions, claims, demands, notices, losses, damages, costs and expenses which Council may incur or become liable for in respect of the moveable advertising sign, or in any way in relation to the moveable advertising sign and this approval, and agree to keep in effect, during the continuance of this approval, an appropriate and current public liability policy with an indemnity of not less than \$20 million, which policy shall indemnify Fraser Coast Regional Council in respect of such actions.

**Applicant Signature:**

**Date:**

**Office Use Only**

Application Number:

CSO Initials:

☐ Declaration consent section signed

Date Created:

Receipt Number:

Amount Paid:

Comments: