

# Shop Approval Form

to accompany permit applications for activities conducted outside premises owned by another party

## SHOP DETAILS

COMPANY NAME \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

POSTAL ADDRESS \_\_\_\_\_

\_\_\_\_\_

PHONE (BH) \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

## ACTIVITY DETAILS

DATE/S \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

TIME/S starting time \_\_\_\_\_ finishing time \_\_\_\_\_

TABLES  
Yes  No CHAIRS  
Yes  No BUSKING  
Yes  No A-FRAME SIGN  
Yes  No 

## AUTHORISATION TO BE SIGNED BY SHOP MANAGER/OWNER

I, \_\_\_\_\_ (name) give permission to \_\_\_\_\_ (name)  
to carry out the activity described above outside the premises owned/managed by me.

SIGNATURE

DATE

## RETURN OPTIONS

**CONTACT US**  
Phone 03 5760 2600  
Fax 03 5762 5537  
Email [council@benalla.vic.gov.au](mailto:council@benalla.vic.gov.au)

**IN PERSON**  
Visit the Council's Customer Service Centre  
at 1 Bridge Street East, Benalla

**MAIL**  
Send this form back to us together with  
the relevant permit application  
Benalla Rural City Council,  
PO BOX 227, BENALLA VIC 3671

OFFICE USE

Date received Receipt number 

### Information Privacy

The Council will only use and disclose information for the purpose/s for which it is collected. Visit [www.benalla.vic.gov.au](http://www.benalla.vic.gov.au) for more information.