

**REQUEST TO USE COUNCIL LAND**

**About you**

**About your event**



Contact Name

Contact address/email address

Contact telephone number

Name of Organisation

Please provide as much information as possible. Please attach any relevant documentation or additional pages.

Where would you like to use? (Please attach map or plan if appropriate)

|  |
| --- |
| What is the event/usage? |

|  |  |
| --- | --- |
| Date of event |   |
| Start and end times (including set up and take down) |   |
| How many people do you think will be attending? |   |
| Have you received Council funding towards your event? |   |

**Do you intend to use or have any of the following at your event?**

Food vendors Yes/No

Stalls selling other products Yes/No

Live/recorded music or entertainment/PA Yes/No

Generators Yes/No

Inflatables/fairground equipment Yes/No

Fireworks Yes/No

Staging Yes/No

Gas Yes/No

Public toilets/portaloos Yes/No

Alcohol Yes/No

Animals Yes/No

If the answer to any of the above is yes the Council will require further information, should permission be granted.

**Have you applied or do you intend to apply for any statutory approvals or**

**licences e.g. public entertainments licence?** Yes/No

**The Council will require the following for most events:**

* **Public Liability Insurance**
* **A risk assessment**
* **Event Management Plan**
* **List of any vendors/traders and evidence that they are registered with their local Council.**

If these are already in place, please provide copies with your application. If they are not already in place, these will be required as a condition of use.

Please return this form with the relevant documentation to the email address or the postal address below.

landand.property@causewaycoastandglens.gov.uk

Land and Property Section

Causeway Coast and Glens Borough Council

66 Portstewart Road

COLERAINE

BT52 1EY

Telephone number for enquiries: 028 7034 7174/7219

I confirm that the information provided on this form is to the best of my knowledge accurate and correct.

Signed: Date:

Position within Organisation: