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| REF: |  |

**LANGEBERG MUNICIPALITY**

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| **APPLICATION TO HOST AN EVENT IN LANGEBERG MUNICIPAL AREA** |

**PLEASE NOTE THAT ALL FIELDS WITH AN ASTERIX • ARE COMPULSORY FIELDS**

* **NAME OF EVENT**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **EVENT VENUE** **(Name & full address):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Erf No. /Farm Name & No.**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **OWNER OF EVENT VENUE**: (Written authorization must be attached)

**NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Contact No**. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **DATE/S OF PROPOSED EVENT**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **SET-UP**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **STRIKE DOWN**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **TIMES OF EVENT (FOR EACH DAY):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **SIZE OF EVENT: Please Tick The Relevant Box** **Participants & Spectators**

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| **Small** | < – 100 |  | * **NUMBER OF SPECTATORS**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Medium** | 100 – 1000 |  | *(NB. Specify for each event day)* |
| **Large** | 1000 – 3000 |  | * **NUMBER OF PARTICIPANTS**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Very Large** | 3000 - > |  | *(NB. Specify of each event day)* |
|  |  |  |  |

* **EVENT ORGANISER / RESPONSIBLE PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **PERSON MAKING THE APPLICATION** *(if not Event Organiser):* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **COMPANY / ORGANISATION NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **DESIGNATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TEL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **TYPE OF EVENT: PLEASE TICK THE RELEVANT BOX**

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| * Sports / Action |  | * Launch / Exhibition |  |
| * Concert / Music Festival |  | * Corporate / Private Party |  |
| * Charity Fundraiser/Run /Walk |  | * Night Market / Switch on of Festive Lights |  |
| * Carnival |  | * Religious Festival / Event |  |
| * Fete, School Carnival etc. |  | * Cultural / Minstrel Events |  |
| * Weddings / Birthdays, etc. |  | * Fireworks / Pyrotechnic Displays |  |
| * Ceremonial Event / Annual ritual |  | * Market |  |
| **Other** – Please Specify: |  |  |  |

* **BRIEF DESCRIPTION OF EVENT:**

*A Site Layout Plan and Water & Waste-Water Plan MUST be attached.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **WARDS IMPACTED BY EVENT:**

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* **EVENT REQUIREMENTS 1-12 = COMPULSORY FIELDS – MUST BE COMPLETED!**

**1. AMPLIFIED SOUND / PA SYSTEM? NO YES**

The WC Noise Control Regulation PN 200 / 2013, 20 June 2013 (attached) MUST be complied with.

**2. STRUCTURES / STAGES / MARQUEES / TENTS? NO YES**

*If yes please contact Building Control Officer, Langeberg Municipality: Ockie Brand at 023 614 8000*

**3.** **GROUND DISTURBANCE** *(e.g. driving pegs, marquee/stage anchors, etc. into the ground)* **WHICH COULD IMPACT ON SERVICES** e.g. electrical cables /pipelines, **AND/OR ON ENVIRONMENTALLY SENSITIVE AREAS?**

**NO YES**  *if yes please provide details*

DETAILS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Vending / Catering /Food Stalls: NO YES** NUMBER OF FOOD STALLS: \_\_\_\_\_\_\_\_

*NB. Certificates of Acceptability are required for food stalls*

*Contact Cape Winelands District Municipality: Health - Robertson - (S. McClean @ 023 626 8324)*

*Montagu - (H. Thiart @ 023 614 2710)*

**LP GAS USAGE** **NO YES**  *if yes please provide details*

DETAILS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. ALCOHOL SALES / CONSUPTION: NO YES** *if yes please provide copy of liquor licence*

Alcohol Sale / Consumption Hours: From: .....………………… To: ……………………..

The granting of an Event Permit by the Langeberg Municipality does not authorize the sale / consumption of alcohol. A separate application must be made to the Liquor Licensing Tribunal of the Western Cape Liquor Authority.

**6.** **FIRE CERTIFICATE: NO YES** *if yes please provide proof*

*Please contact* ………………………………………………….…. @ (………….)………………………………………………………..

**7.** **PUBLIC LIABILITY INSURANCE**? **NO YES** *if yes please provide proof*

**8**. **ROAD CLOSURES REQUIRED?** **NO** **YES** *if yes, please provide details*

* **ROADS**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **SECTION OF ROADS (S)**: Langeberg Municipality Roads - Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **TIMES**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For Langeberg Municipal Roads contact Maynard Johnson @ 082 7716 613

For Cape Winelands District (Rural) Roads contact Kobus du Toit @ 082 8298 916

**9. TRAFFIC CONTROL REQUIRED**? NO YES *if yes please provide details*

* SECTION OF ROAD (S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* TIMES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**10. OTHER SERVICES REQUIRED**:

* ELECTRICITY? NO YES *if yes please provide details*

DETAILS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For Langeberg Municipal Electricity contact: Chris Vorster @ 023 626 8266

* WATER? NO YES  *if yes please provide details*

DETAILS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* WASTE WATER REMOVAL? NO YES *if yes please provide details*

To confirm requirements for events on farms, contact Breede Gouritz Catchment Management Agency (Worcester): 023 346 8000

For contractors to dispose sewage at Municipal Sewer Works, Maynard Johnson 082 7716 613

* SOLID WASTE REMOVAL? NO YES *if yes please provide details*

Contact: Manager**:** Solid Waste Management(GM Slingers – 023 616 8000 / 084 601 6463)

DETAILS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any other requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **11. NEIGHBOURS CONTACTED**? NO YES *if yes, attach proof*

Identify neighbours and send notice of event. The notice to neighbours MUST include the event organiser’s name & telephone no. and an alternative contact person.

Identify the property descriptions of the neighbouring properties. Contact Langeberg Municipality: P. Albanie - 023 615 8000 for contact details for the owners of the properties.

* **12. DOES THE USE REQUIRE LAND USE AUTHORISATION IN TERMS OF THE LANGEBERG LAND USE PLANNING BYLAW, 2015?** NO YES

If yes, please contact the Manager: Town Planning, Langeberg Municipality:

K. Brand - 023 614 8000

**SIGNATURE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **APPLICATION** **DATE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE NOTE:

Submission of this application does not mean the Municipality has approved your event. Your event may only proceed once the municipality formally gives approval and a permit is issued.

**INDEMNITY FORM**:

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(print full name)*

ID No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in my capacity as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(designation)*

of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (full name of institution/company) being duly authorised hereto on behalf of the aforementioned institution with regard to

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (state purpose/event)

with full knowledge of such declaration, declare as follows:

1. The Company hereby indemnifies and holds Langeberg Municipality, its directors, agents and servants harmless against:
2. any damage to the Langeberg Municipality property, whether movable or immovable, including any consequently damage or loss directly or indirectly flowing from physical damage to such property or any act or omission on the part of the Company, its servants or agents;
3. liability in respect of any claims which may be lodged or instituted against the Langeberg Municipality arising out of damage to the property, whether movable or immovable, of any third parties, including any consequential damage direct of indirectly flowing from physical damage to such property;
4. liability in respect of the death or injury to any person, including a servant of the Langeberg Municipality and any consequential damage or loss flowing therefrom; and
5. any legal cost or expenses reasonably incurred in connection with claims or actions arising out of the foregoing, whenever the damage, loss, injury or death contemplated in (a), (b), or (c) above is due to or arises out of, whether directly or indirectly, the event or activities specified above.
6. In addition, the Company shall have no claims against the Langeberg Municipality in the event if it being under-insured or should their claims being repudiated.
7. It is specifically recorded that this indemnity conferred upon the Langeberg Municipality shall not extend to damage loss, injury or death which is predominantly due to the misconduct or gross negligence of the Langeberg Municipality or of any servant of the Langeberg Municipality acting within the course and scope of his or her employment.

Signed on this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_\_, at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(place)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature** **Date**

**Witnesses**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature** **Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature** **Date**

**Check list**

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| --- | --- | --- | --- |
| **Number** | **Item** | **Applicant** | **For Official use only** |
| 1 | Owners written authorization |  |  |
| 2 | Detailed site plan layout |  |  |
| 3 | Land use authorization – Town Planning Department (zoning certificate) |  |  |
| 4 | Structural Engineers certificate of compliance for all structures |  |  |
| 5 | List of all food vendors with Certificates of Acceptability and Business Licences |  |  |
| 6 | Solid Waste Management Plan |  |  |
| 7 | Transport and Traffic Management Plan with road closures |  |  |
| 8 | Liquor License |  |  |
| 9 | Disaster Management Plan |  |  |
| 10 | Incident Management Plan |  |  |
| 11 | Waste Water Management Plan |  |  |
| 12 | Fire Prevention Plan |  |  |
| 13 | Public Safety Management Plan including crowd control |  |  |
| 14 | Noise Control / Reduction Plan |  |  |
| 15 | Event Communication Plan |  |  |
| 16 | Community Participation Plan |  |  |
| 17 | Environmental Management Plan |  |  |
| 18 | LP Gas Compliance Certificate |  |  |
| 19 | Heritage Management Plan |  |  |
| 20 | Event Promotion / Marketing Plan, including road signage, putting up of posters and banners |  |  |
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|  |  |  |  |