

Temporary Skin Penetration Event Register

About this form

This form should be used by event managers organising events for skin penetration - e.g. tattoo or hair and beauty expos.

How to complete this form

- 1: Ensure that all fields have been filled out correctly.
- 2: Please note that fields on this form marked with an * are mandatory and must be completed before submitting the application.
- 3: Once completed you can submit this form by email, mail and in person. Please refer to the Lodgement details section for further information.
- 4: Applications must be submitted at least 28 days prior to the event.

Part 1: Applicant Details

Title	Given Name/s *	Family Name *
<input type="text"/>	<input type="text"/>	<input type="text"/>
Company / Business Name*		
<input type="text"/>		
ABN / ACN*		
<input type="text"/>		
Postal Address*		
<input type="text"/>		
Note: Before this application can be lodged at least one of the modes of contact below must be supplied.		
Business Telephone Number *	Mobile Number *	
<input type="text"/>	<input type="text"/>	
Email Address	Site Contact* (if different to above)	
<input type="text"/>	<input type="text"/>	

Part 2: Event Details*

Event Name*	Date Council notified*
<input type="text"/>	<input type="text"/>
Where is your event located?*	Date/s of event (from-to)*
<input type="text"/>	<input type="text"/>

Stall Details *					
(please provide answers in the boxes below)					
Set Up Time	Event Time Start	Event Time Finish	Dismantle Time	Number of skin penetration stalls	Number of hair or beauty stalls
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

A list of all participating stall holders including stall name, Council reference number, stall site number and a location map is enclosed with this application

Completed forms are enclosed with the application for Skin Penetration stalls not previously registered with Council

Part 3: Applicant Declaration

I declare that the information provided on this form is accurate, complete and correct.
I understand that this is an application, and approval of this application is not guaranteed.

Applicant Name	Applicant Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

Part 4: Event Organiser Approval

I declare that I am the event organiser and support this application.

Applicant Name

Applicant Signature

Date

Part 5: Lodgement Details

You can lodge the completed application by:

EMAIL: applications@cityofsydney.nsw.gov.au

MAIL: City of Sydney, GPO Box 1591, Sydney NSW 2001

IN PERSON: Town Hall House - Level 2, 456 Kent Street, Sydney
See our website for details of all customer service centres and opening hours:
<http://www.cityofsydney.nsw.gov.au/customer-service>

WHAT NOW: Once your application is received a Council Officer will contact you if further information is required.

For further information regarding your application please contact us by:

TELEPHONE: (02) 9265 9333

WEBSITE: <http://www.cityofsydney.nsw.gov.au/>

Part 6: Privacy & Personal Information Protection Notice

Purpose of collection: This information is being collected for the purpose of delivering Temporary Skin Penetration Event registration in the Council area.

Intended recipients: City of Sydney employees. Any approved contractors and any other relevant state government agency required to provide this service.

Supply: The supply of this information is voluntary. If you are unwilling to provide this information, the City of Sydney may be unable to provide access to City of Sydney services.

Access/Correction: Please contact Customer Service on 02 9265 9333 or at council@cityofsydney.nsw.gov.au to access or correct

your personal information.

Storage: The City Planning, Development and Transport Unit at the City of Sydney, located at 456 Kent Street, Sydney NSW 2000, is collecting this information and the City of Sydney will store it securely.

Other uses: The City of Sydney will use your personal information for the purpose for which it was collected and may use it as is necessary for the exercise of other functions.

For further details on how the City of Sydney manages personal information, please refer to our Privacy Management Plan (<https://www.cityofsydney.nsw.gov.au/policies/privacy-management-plan>).

Office Use Only

Receiving Officer (print name)

Date

PID Number

File Number

Inspection Report