TOWN OF VINCENT

LIQUOR LICENCE PERMIT AND GAMING APPLICATIONS (ETP, ETA, AVC, GAMING, TWO-UP etc)

Applications are to be submitted to Health Services with the appropriate fee (detailed below), and a written submission regarding the additional hours/area (preferably 14 days prior to the event), and is to include the following:

- A copy of the application submitted to Department of Racing, Gaming and Liquor;
- Details of the proposed event, including the hours and noise control measures, and plans of any additional area.
- Please note: In some cases, you will be requested to undertake a letter drop to surrounding residents advising them of the proposed event, and providing them with a mobile contact number in the event that they experience problems with noise, antisocial behaviour etc. as a result of the event. A copy of this correspondence will also need to be submitted to the Town's Health Services.
- The Town's Health Services will then provide written conditional approval to the event organiser, the Local Police Services and the Department of Racing, Gaming and Liquor.

Should you have any enquiries, please contact Health Services on 9273 6533 or via mail@vincent.wa.gov.au

PAYMENT OPTIONS

IN PERSON: 244 VINCENT STREET, LEEDERVILLE 6007 ***Monday to Friday between 8.00am – 5.00pm***

BY MAIL: TOWN OF VINCENT, PO BOX 82, LEEDERVILLE 6902
Do not send cash through the mail. Complete the Credit Card Payment details below, or forward a cheque or money order made out to the Town of Vincent.

CREDIT CARD PAYMENT DETAILS:

Please complete the following details, and submit the form it in its entirety to the Town of Vincent (American Express, Diners Cub not accepted).

Card No. __ __ __ __ / __ __ __ __ / __ __ __ __ / __ __ __ __

Expiry Date: ____ / ____

Card Holder's Name: _____ **Date:** _____

Card Holder's Signature: _____ **Amount: $80.00**

Your signature hereon is authority for us to issue a sales voucher for the full amount (shown in the space provided above) and an acknowledgement that the sales voucher, if endorsed "Mail Order", to be treated as having been duly signed by the cardholder. Please forward the entire form with the details clearly completed.

OFFICE USE ONLY Receipt Code: 277L File No: ENS 0053

Link: _____