

**APPLICATION FOR USE OF TRAFFIC  
 EDUCATION CENTRE FACILITIES  
 2022-2023**

**(Skid Pan, Highway Circuit, Motorcycle  
 Training Area, Conference Room, Training  
 Room, Bicycle Area)**

1. Information		
<b>Privacy and Personal Information Protection Notice (S.10 PPIP Act 1998)</b>		
<i>Your information will be stored and used by Armidale Regional Council only for the purposes of liaising with you regarding your intended use of Council's facilities. The provision of information is voluntary; however failure to provide requested details may result in your application to use Council facilities declined.</i>		
Notes:		
a) The completed form is lodged with Council at least 30 days prior to the event.		
b) Use of facility is subject to availability and compliance with standard Conditions of Use.		
c) Any and all charges for use of Council Facilities are to be paid 14 Days prior to the event.		
d) Applicant complete items 2-8 inclusive.		
2. Applicant's Information		
Name	Company/Organisation (if applicable)	
Address		
Town/City	State	Postcode
Email Address	Telephone	Mobile
3. Facility Requested (Please circle)		
Highway Circuit	Skidpan – (Water YES/NO)	Motorcycle Area
Conference Room	Training Room	Bicycle Area
4. Details of event		
Name/Type of event:		
Details of event:		
5. Dates and Times		
Date requested:		

Commencement time:		Finish time:	
Set up time:			
Number of people attending:		Special Requirements:	
<b>6. Hire of Traffic Education Centre Rates (GST inclusive)</b>			
<b>Skid pan</b>		<b>Highway Circuit</b>	
Per hour	\$36.00	Per hour	\$36.00
<b>Conference Room</b>		<b>Training Room</b>	
Per hour	\$26.00	Per hour	\$26.00
		<b>Motorcycle Area</b>	
		Per hour	\$15.50
		<b>Bicycle Area</b>	

**7. Insurance Details**

A current Public Liability Insurance policy is compulsory.

Name of Insurance Company:

Sum Insured (minimum \$10,000,000):

Policy Number:

Expiry Date:

Has the Policy been endorsed to cover goods sold and supplied?

YES / NO

**8. Declaration**

I hereby certify that the above information provided is correct and agree to Council's rules and conditions for use of Council's facilities.

Name:

Signature:

Date:

**PAYMENT OPTIONS**

Payment amount must be verified by caretakers and may be made to Council's cashier by cash, cheque or eftpos at 135 Rusden Street, Armidale or by sending a cheque to: Armidale Regional Council, PO Box 75A, Armidale NSW 2350 – Please quote receipt code A048 to cashier.

Please ensure you forward a copy of your receipt to the caretakers so your booking can be approved.

**Council USE ONLY**

Hire Charge	\$	Amount Paid	\$	Receipt Code – A048
Account to be forwarded	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Insurance Certificate attached	YES <input type="checkbox"/>
				NO <input type="checkbox"/>
Facility inspected following event	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Inspected by:	
Booking Entry Date				Record scanned into TRIM
/ / 20	TRIM FOLDER –			
Name of processing officer	Applicant advised of outcome			Records stamp
	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Date Approved	KEYS ISSUED (if applicable)			

		YES <input type="checkbox"/>	NO <input type="checkbox"/>	
<b>Project number – PJ. 241000.1.1450.165.1370 (Income)</b>				