

TEMPORARY USE OF COMMON PROPERTY BY INDIVIDUALS/GROUPS



Temporary Use of Common Property by Individuals/Groups

If you need help completing this form, please contact the Body Corporate Office on 07 5500 3333.

Section 1 — Application Date	 / /	
Section 2 — Site Address			
Sanctuary Cove property address.	Body Corporate Address	Lot	
Section 3 — Applicant Details			
Applicant name and contact details.	Name		
	Address		
	Phone		
	Email		
Section 4 — Applicant relationship with the Common Property (tick ONE only)			
<input type="checkbox"/> Sanctuary Cove Owner <input type="checkbox"/> Sanctuary Cove Resident <input type="checkbox"/> Sanctuary Cove Non-Owner <input type="checkbox"/> Sanctuary Cove Non-Resident			
Section 5 — Event Details (Please include FULL details)			
Address/Location..		Nearest Property	
(House Number)		Set up Commencement	
...../...../..... Time		Disassemble Completion/...../..... Time	
Event Commencement/...../..... Time		Event Completion/...../..... Time	
(if different to above)		(if different to above)	
Number of Attendees Adults		Number of Vehicles	
Children			
Section 6 — Event Check List * Please include FULL details. If insufficient space attach additional sheet with numbered questions and corresponding answers.			
1. <input type="checkbox"/> YES <input type="checkbox"/> NO Adequate TOILET facilities available?			
2. <input type="checkbox"/> YES <input type="checkbox"/> NO Additional TOILET facilities arranged?			
3. <input type="checkbox"/> YES <input type="checkbox"/> NO Adequate PARKING facilities available?			
4. <input type="checkbox"/> YES <input type="checkbox"/> NO Additional PARKING facilities arranged?			
5. <input type="checkbox"/> YES <input type="checkbox"/> NO Will temporary structures be erected (inc amusement)?			
6. <input type="checkbox"/> YES <input type="checkbox"/> NO Will there be amplified music/speeches (live or other)?			
7. <input type="checkbox"/> YES <input type="checkbox"/> NO Will products be sold (inc food & drink)?			
MUST be signed by the property owner/applicant	Signature:	Dated: / /
	Applicant		D D M M Y Y Y Y
IF Applicant is different from property owner, Applicant MUST ALSO sign.	Signature:	Dated: / /
	Property Owner		D D M M Y Y Y Y
Section 7 — Contact			
Please scan and email this Form to enquiries@scove.com.au .			