

# Outdoor Dining Application or Renewal

My progress: 0%

---

## BEFORE YOU BEGIN

Before commencing this application, please ensure that you:

Have read through the Campbelltown City Council Outdoor Dining Guidelines Document

Have a valid Public Liability Insurance Policy for the business with a minimum \$20 million cover that extends cover to the proposed outdoor dining site and has Campbelltown City Council listed as an interested party

Have a current Food Business Licence Number which has been issued by Council

Have photos, images, manufacturers brochures or website URLs of the outdoor dining furniture you are proposing to use

Have photos of the space outside your shopfront where the outdoor dining will be placed

Have a drawn site plan of your proposed outdoor dining layout, with clearly marked dimensions, showing (refer to section 2 of the Outdoor Dining Guidelines for requirements):

- The width of the footpath and the proposed outdoor dining area
- The location of the outdoor seating area on the public footpath
- The layout of the outdoor dining area, including the width and the length
- The placement of the outdoor dining furniture
- The location and clearances from all existing street furniture, trees, poles, bins and the like
- The location of any nearby transport stops, pedestrian crossings, street intersections, if any
- The location of all doorways and service openings.

Tips for submitting your form online

- You can save the form at any time and email the incomplete form link to yourself or another person.
- Use the 'Back' and 'Continue' buttons to navigate through the form. DO NOT use the browser buttons.
- If any information is entered incorrectly the form will need to be completed again and re-submitted. Please review the entered information thoroughly before submitting.

Type of application **Required**

- New application (including change of business ownership)
- Renewal

Are you requesting changes to your outdoor dining application? **Required**

- No
- Yes

Back

Save for later

Continue

My progress: 9%

## APPLICANT DETAILS

### Privacy Statement

Any personal information that you provide as part of this form will be protected. Please read the [Campbelltown City Council Privacy Statement](#) to understand how we manage your personal information under NSW privacy laws.

Confirm before completing this form:

I have read and understood the privacy statement noted above. **Required**

Applicant must be the owner/operator of the business

Given name **Required**

Surname **Required**

Business hours contact number **Required**

Email address **Required**

## BUSINESS DETAILS

Company name **Required**

Trading as **Required**

Food Business Licence number **Required**

Australian Business Number (ABN) **Required**

Back

Save for later

Continue

## LOCATION DETAILS

Unit number

Street number **Required**

Street name **Required**

Suburb **Required**

State **Required**

Postcode **Required**

Lot number / Deposited Plan **Required**

## SUPPORTING DOCUMENTS

Please upload the following documents:

Copy of your Public Liability Insurance Policy with a minimum \$20 million cover that notes Campbelltown City Council as an interested party **Required**

Select file

Max file size: 5 MB

Max number of files: 1 file

Public Liability Insurance Policy expiry date **Required**




# APPLICANT DECLARATION

- I declare that all the information in the application is to the best of my knowledge, true and correct **Required**
- I understand if the information is incomplete, the application will be rejected or more information will be requested **Required**
- I accept processing delays will arise if there are inadequacies with the application **Required**
- I declare the electronic data provided is a true copy of all associated documents submitted with this application **Required**
- I understand that information submitted with this application may be accessible to Council staff or in response to Government Information (public access) Act requests **Required**

Name of person completing this form **Required**

Please complete the following:

<input type="checkbox"/> I'm not a robot	 reCAPTCHA Privacy - Terms
--	---

Back

Save for later

Submit