

# APPLICATION FOR TEMPORARY ALFRESCO DINING

Made under Section 125 of the *Roads Act 1993*



## OFFICE USE

**Application No.:** \_\_\_\_\_

**Date** \_\_\_\_\_

This application relates to the temporary use of the public footway for the purposes of alfresco dining adjacent to a DA-approved hospitality business. Refer to the [guidelines](#) for full submission requirements and matters to be addressed in this application. Should you require assistance, please contact Council's Customer Service Centre on 9083 8000.

## APPLICANT DETAILS *(It is important that we are able to contact you if more information is needed)*

Mr  Ms  Mrs  Dr.  Other \_\_\_\_\_

Family Name (or Company) \_\_\_\_\_

Given Names (or ACN/ABN): \_\_\_\_\_

Contact Person (If a Company): \_\_\_\_\_

Postal Address: \_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_

Phone No. (Daytime): \_\_\_\_\_ Mobile No.: \_\_\_\_\_

E-mail: \_\_\_\_\_

## PROPERTY DESCRIPTION *(This will help us to correctly identify the subject property)*

Unit/Street No.: \_\_\_\_\_ Street Name: \_\_\_\_\_

Suburb: \_\_\_\_\_ Lot and DP/SP No.: \_\_\_\_\_

## CURRENT CONSENT *(an application must be accompanied by a copy of a valid consent)*

DA/CDC reference number to which the premises has consent to operate: \_\_\_\_\_

## DESCRIPTION OF PROPOSED DEVELOPMENT

Business name: \_\_\_\_\_

Type of Business (please circle): Restaurant / Café / Takeaway / Small Bar / Pub

Tenant Contact Number \_\_\_\_\_ Tenant Email: \_\_\_\_\_

Hours of operation of existing restaurant: \_\_\_\_\_

Proposed hours of operation for the alfresco dining: \_\_\_\_\_

Does the premise have or intend to have a liquor licence? If yes, what type of licence: \_\_\_\_\_

Is this application for new temporary alfresco dining or extension of existing outdoor dining boundaries as part of the NSW Alfresco Restart Package?

(please circle): NEW TEMPORARY ALFRESCO DINING / EXTENSION OF EXISTING BOUNDARIES

Number of tables (*number the tables on plan consecutively starting from "1"*): Internal: \_\_\_\_\_ External: \_\_\_\_\_

Numbers of seats, or places for alfresco dining (*number the seats on plan consecutively starting from "1"*):

Internal: \_\_\_\_\_ External: \_\_\_\_\_

Square metres to be occupied for alfresco dining (*show dimensions on the plan*): \_\_\_\_\_

Does the premise have their own or shared toilet facilities?  Own  Shared

Please ensure all sanitary facilities are clearly shown on the plans submitted with application (including number, unisex, female, male)

## PLANS TO BE SUBMITTED

### 1. SITE LOCATION AND OUTDOOR DINING LAYOUT (*for public display and notification*)

#### BONDJUNCTION, BONDJ BEACH AND BRONTE BEACH: Preferred outdoor dining areas

Refer to [Part D2, Section 2.4 of WDCP 2012](#). If the business is located in the designated alfresco dining areas shown in any of the maps in the WDCP 2012, then show the location of the business and proposed alfresco dining area using the street plans.

#### **OTHER AREAS: Affecting all other areas that are not contained in a preferred area.**

Submit a detailed and dimensioned plan to scale (1:50 or 1:100). Show, at least:

- proposed alfresco dining layout (*number the tables and chairs*)
- proposed area to be used in alfresco dining (*include dimensions from edge of area to kerb line, shop front, doorway openings, other fixtures e.g. bus stop, pedestrian crossing, street furniture – bench, litter bin, etc.*)
- total area in square metres to be occupied.

### 2. SITE DETAILS (*for Council records and processing*)

Submit a detailed and dimensioned plan to scale (1:50 or 1:100). See plans in [Part D2, Annexure D2-1 of WDCP 2012](#), showing the same level of information. Show, at least:

- proposed alfresco dining layout (*number the tables and chairs on plan*)
- proposed area to be used in alfresco dining (*include dimensions from edge of area to kerb line, shop front, doorway openings, other fixtures e.g. bus stop, pedestrian crossing, street furniture*)
- total area to be occupied, in square metres
- existing number of tables and chairs in the restaurant
- washing up facilities, location and number of toilets, including any shared facilities in a strata-titled

### FURNITURE DETAILS (Tables and chairs)

Furniture must be consistent with [Part D2, Annexure D2-2 of WDCP 2012](#). Provide the following:

- Visual presentation (brochure or photos)
- Brand name and style \_\_\_\_\_
- Supplier and/or distributor \_\_\_\_\_

## DECLARATION

- I apply for consent to provide outdoor dining as described in the application.
- I declare that the information given is true and correct.
- I understand that if the information is incomplete that the application may be delayed, rejected or further information requested.
- **I acknowledge that my Outdoor Dining Rent Calculation, based on the area occupied is:**  
 \_\_\_\_\_ (area) x \_\_\_\_\_ (rate per m2 pa) = \_\_\_\_\_ (rent per annum)
- **I acknowledge that my Outdoor Dining (FPSBOND) required is** equivalent to three (3) months rent)
- By signing this application I agree to the above terms and conditions.

Signature of applicant/tenant:

Date:

#### PRIVACY POLICY:

The information requested in this form is required under the *Roads Act 1993* and will be used in connection with the requirements of the legislation. The information will be available to Councillors, Council Officers and members of the public as required by the Act. Please advise Council if any information you have provided changes, is incorrect or if you require your address or the plans to be withheld for personal or family safety. The documentation submitted with this application including the application form may be publicly available for inspection on the Council's website and in other ways that the Council considers appropriate.

#### CHECKLIST OF DOCUMENTATION TO BE SUBMITTED WITH APPLICATION *(the application will not be accepted unless all relevant information is submitted)*

- Site location plan;
- Site details plan for alfresco dining areas and layout;
- Proof of existing liquor licence (if applicable)

*Note: If you are applying for a liquor licence or seeking boundary changes for your liquor licence, please contact NSW Liquor & Gaming at [individual.licensing@liquorandgaming.nsw.gov.au](mailto:individual.licensing@liquorandgaming.nsw.gov.au) once you have approval from Council.*