SALTASH TOWN COUNCIL

Booking form for consent to use the loudspeakers in Saltash Fore Street for the following:

Title:Click or tap here to enter text. First Name:Click or tap here to enter text. Last Name:Click or tap here to enter text. Address:Click or tap here to enter text. Postcode:Click or tap here to enter text.

Mobile Telephone Number: Click or tap here to enter text.

Email:Click or tap here to enter text.

Applicant Details

Is the person responsible for the event on the day, and testing of equipment before the event different from the above?

the event different from the above:				
Yes: □	No: □			
Please provide details of the person/s responsible for the event				
Title:Click or tap here to enter tex	rt.			
First Name:Click or tap here to en	nter text.			
Last Name:Click or tap here to er	nter text.			
Address:Click or tap here to ente	r text.			
Postcode: Click or tap here to ent	er text.			

Mobile Telephone Number: Click or tap here to enter text.

Email:Click or tap here to enter text.

Event Information Name of the Event: Address of the Event: Estimated number of participants: Date of Event: Click or tap to enter a date. Start Time: Click or tap here to enter text. End Time: Click or tap here to enter text. Hours of Loudspeaker Operation: Please check the type of sound to be emitted: Speech: ☐ Recorded Music: ☐ Live Music: ☐ Other: ☐ It is the responsibility of the person / organisation applying to obtain a PRS\PPL license for the use of the loudspeakers. PRS License has been obtained Yes: ☐ Not applicable: ☐ If not applicable state why is it not applicable...... Is the event a Fundraiser? Yes: □ No: □ Beneficiary: Details of the nature of activities at this event (e.g. demonstration, march, speeches, instructions to participants): Click or tap here to enter text. State the reason why there is a need to use a loudspeaker for the period / hours /

State the reason why there is a need to use a loudspeaker for the period / hours / days applied for (e.g. incidental music, announcements, demonstration)

Click or tap here to enter text.

Will you require use of the wireless microphones:

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<u>Applicant's Statement of Agreement:</u>

I hereby affirm that the above information is true and correct in describing the intent of this application. I _______ the undersigned, agree to use the loudspeakers in a careful and prudent manner so as not to cause complaints from neighbours. I understand the decibel range has been capped at 85dB therefore should I require to, I will lower or terminate the amplification levels when requested. I understand it is an offense to use loudspeakers for any purpose in the street at night between 9pm and 8am and that the Council does not authorise use of the loudspeakers during that period of time. I understand it is my responsibility to obtain a PRS licence if required.

Signature: Date:	
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FOR OFFICE USE ONLY

Approved: □	Not approved: □
Ву:	Date: Click or tap to enter a date.
(Administration Department Staff)
Reason for Denial:	