



Event Management

LIMITED LIQUOR LICENSE NOTIFICATION FORM

Murray Mallee Police Telephone 08 8535 6020, Email to sapolmurraymalleecrimeprevention@police.sa.gov.au

Applicant Name			
Date of Birth			
Of			
(Business/Organisation Name)			
Postal Address			
Contact Number			
Fax Number			
Email Address			
Wish to apply for a Limited License for the Sale <input type="checkbox"/> Consumption <input type="checkbox"/> of liquor and seek approval to have this license granted by the Liquor License Commissioner.			
Function to be held by			
Nature of function			
Date of Function			
Function Address Location			Approximate Numbers Attending
Will the Function utilise Security Services		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, how many			Security Company Name
Proposed target	Families <input type="checkbox"/>	Youth <input type="checkbox"/>	Aged <input type="checkbox"/> Individuals <input type="checkbox"/> General Community <input type="checkbox"/>
Start time	Finish time	Responsible Person	
Method of supply Booth <input type="checkbox"/> Caravan <input type="checkbox"/> Tent <input type="checkbox"/> Other <input type="checkbox"/> (Specify)			

APPROVAL

Approval by Council	Approval by Police
Council	Crime Prevention Section
Authorising Officer	Authorising Officer
Signature	Signature
Dated	Dated

Any Conditions			

THIS FORM IS TO BE COMPLETED AND AUTHORISED BY THE RELEVANT COUNCIL AND MURRAY MALLEE POLICE CRIME PREVENTION SECTION FOR SUBMISSION WITH THE APPLICATION FOR A LIMITED LICENCE FORM.