



SAFETY & SECURITY CLUSTER Fire and Emergency Unit

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Event Food-Stallholder Application Form

Event: _____

Venue: _____

Date of Event: _____

Details of Applicant: _____

Name: _____

Address: _____

Telephone: _____ Fax: _____

Stall Name: _____ No: _____

Details of Equipment: _____

Cooking Equipment: _____

Fire Extinguishers: _____

Print Name

Signature

Date

*****This form to be faxed to Jeremy Russon on 031 - 309 1050 / 3087100*****