

**CAPACITY DISPENSATION APPLICATION FORM**

**Please read the Event Organiser process prior to completion of this form**

**Your application will not progress until the supporting documentation has been received**

Application Ref: Ward No(s):

Date Received: **FOR OFFICIAL USE ONLY**

**PART 1: YOUR CONTACT DETAILS**

**Please provide full details of individual(s) or organisation(s) responsible for management of the event/activity**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Organisation:** |  |
| **Phone number:** |  | **Postal Address****(incl. postcode):** |  |
|  |
| **Mobile number:** |  |  |
|  |
| **Email address:** |  |  |
|  |
|  |  | **Charity number (if Applicable):** |  |

**PART 2: DETAILS OF THE EVENT OR ACTIVITY**

|  |  |  |
| --- | --- | --- |
| A: The name of your event/activity |  | B. The name of the person or organisation applying for permission to hold the event/activity |
|  |  |  |
| C. The proposed date(s) of your event/activity |  | **D. The location(s) you wish to use for your event/activity** |
|  |  |  |
| E. What time will your event/activity start? |  | **F. What time will your event/activity finish?** |
|  |  |  |
| G. What date & time will you need access from? |  | **H. What date & time will you vacate the site?** |
|  |  |  |

**PART 2: CONTINUED**

|  |  |
| --- | --- |
| **I. Please indicate the nature of your event/activity:** |  |
| **J. Please provide a description of your event/activity, explaining all elements (including ticket/entry charges, any entertainment, shows or displays e.g. fireworks etc):** |
|  |
| **K. Please note the maximum number of people to be at your event at any one time:** |
|  |
| **L. What is the reason you are applying for a dispensation?** |
| **M. What additional safety/public health mitigations are you putting in place to ensure the safety of those attending?** |
| **N. Where applicable what contingencies do you have for inclement weather?** |
| **O. What contingencies do you have if there is a change in levels?** |
| **P. Please indicate if your event will include any of the following activities:** |
| **Retail/ticket sales** |  |  **Animals** |  |  **Fireworks/pyrotechnics** |  |  |
| **Collections for charity/raffle** |  |  **Food/Beverage** |  |  **Filming** |  |  |
| **Drones** |  |  **Cinema** |  |  **Performance/entertainment** |  |  |
| **March or Procession** |  |  **Market stalls** |  |  **Music (live or recorded)** |  |  |
| **Temporary structures** |  |  **Road closures** |  |  **Parking restrictions** |  |  |
| **Road occupation** |  |  **Fairground rides** |  |  **Inflatables (including bouncy castles)**  |  |  |
| **You may be required to obtain a licence or permit if your event includes any of the above.** **It is your responsibility to contact the appropriate team as noted in the Event Organiser process.** |

**PART 3: CHECKLIST AND DECLARATION**

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| Please note that: |
| A. You have read and understand the Event Organiser process for capacity dispensation |  |
|  |  |
| B. You confirm that you have submitted all relevant documentation as listed within the process  |  |
|  |  |
| C. You agree to inform us of any changes to the information in this application form/supporting documentation |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: |  | Signature: |  | Date: |  |

Please return this form as soon as possible to events@edinburgh.gov.uk

*Please note that the personal details you provide in this form are for the purposes of processing your application and will only be used for administrative reasons relating to your application, and the subsequent event.  Depending on the type and size of the event, it may be necessary to share this information with partner agencies, such as Police Scotland.  Where this occurs, the processing is done in order to fulfil our obligations to ensure the safety of the public and compliance with relevant legislation. More details about the Council’s data protection arrangements and your rights as data subject can be found on our website:* <http://www.edinburgh.gov.uk/privacy>

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|  |  |
| --- | --- |
| **Process Step** | **Comment/Notes** |
| 1. Documentation and Application Received: | Circulated by: |
| 2. EPOG: | Chairperson:EPOG date:  |
| 3. Regulatory team review: | Recommendation: Permission/Refusal\* delete as appropriateJustification:Conditions (if any):* Subject to all required permissions and/or permits being granted
 |
| 4. Senior manager decision: | Decision: Justification (if different from above):Decision taken by:Date: |
| Applicant informed: | Officer name:Date: |