

Shetland Islands Council Civic Government (Scotland) Act 1982 Section 62

PLEASE COMPLETE IN BLOCK CAPITALS

NOTICE OF PROPOSAL TO HOLD A PUBLIC PROCESSION				
Event Name				
PERSONAL DETAILS				
Full Name				
Home Address				
Postcode				
Date of Birth				
Place of Birth				
Telephone Number				
Mobile Number				
E-mail				
CHIEF STEWARD DETAILS				
Full Name				
Address				
Postcode				
Date of Birth				
Place of Birth				
Telephone Number				
Mobile Number				
E-mail				
PROCESSION DETAILS				
Name of organisation or band				
Date of Procession				
Proposed time of procession				
Reason for procession				
Proposed route including assembly points				
Number of people expected to take part				

Details of the controlling th	e arrangement for ne event			
Number of S	tewards			
Number of V	ehicles to be used			
Name of any bands (i.e. Pipe Band, Brass Band) and the names of each band member who will be taking responsibility for the bands. The named band member must be present on the day and must identify themselves to the police. Continue on a separate sheet if necessary.				
	Name of Bands		Name of responsible band member	
Band A				
Band B				
Band C				
Will the event require a road closure?				
If Yes, Is a copy attached? Yes/No If No why not? If the event takes place on a public road and the road needs to be closed or other restrictions imposed on the flow of traffic for public safety then SIC Roads Service (Neil Robertson 01595 744875) must be approached. If a TTRO is needed and a copy not supplied by the end of the consultation period then permission for the event will not be granted.				
Please provide any extra information about the procession which you think may be relevant.				
I declare that the particulars given by me on this form are correct to the best of my knowledge and belief. I have read the attached Code of Conduct and agree to keep to its standard conditions.				
Date				
Signature				
· <u> </u>				

Data Protection:

Shetland Islands Council will use the information about you on this form to process your licensing application. In processing your application, the information you have provided may be shared between Council departments and with other agencies where necessary. By signing this form you consent to the Council sharing your information in this way. The Council has a duty to process your information fairly and in accordance with the provisions of the Data Protection Act 1998. We will ensure that the information we hold is accurate, up to date, is kept as long as necessary and is otherwise shared only where we are legally obliged to do so. You can request access to the personal information held about you by the Council by writing to the Head of Governance and Law, Legal Department, 8 North Ness Business Park, Lerwick, Shetland.

This form is to be lodged with Environmental Health, Gutters Hut, 7 North Ness, Lerwick, Shetland, ZE1 0LZ.