



**CENTURYCITY**

*Smart City. Smart Choice.*

**APPLICATION FOR SPECIAL EVENT**

NAME OF COMPANY: \_\_\_\_\_

COMPANY TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

VAT NUMBER: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_

**CONTACT DETAILS:**

RESPONSIBLE PERSON'S NAME: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

LOCATION(S): \_\_\_\_\_

TYPE OF FUNCTION: \_\_\_\_\_

ON-SITE DATE(S): \_\_\_\_\_ EVENT TIME(S): \_\_\_\_\_

DURATION OF EVENT: \_\_\_\_\_ DESCRIPTION OF THE EVENT: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

NUMBER OF PEOPLE ON SITE \_\_\_\_\_ ON – SITE PARKING REQUIRED

ROAD / PATHWAY CLOSURE REQUIRED  TEMPORARY STRUCTURE(S) TO BE ERECTED

IMAGES / MAP OF LOCATION INDICATING SET UP ATTACHED (SITE LAYOUT)

IF ROAD CLOSURE SELECTED, ROAD CLOSURE & SIGNAGE PLAN ATTACHED

COVID-19 HEALTH AND SAFETY PLAN ATTACHED  SECURITY PLAN ATTACHED

WASTE MANAGEMENT PLAN ATTACHED  BRANDING PLAN ATTACHED

LIQUOR OR FOOD SALES  IF APPLICABLE, PLEASE PROVIDE APPROPRIATE LICENCES.

Century City Property Owners' Association  
(Non Profit Company)



Century City House, 1 Park Lane, Grand Central, Century City, Cape Town, 7441  
PO Box 0004, Century City, 7446

TEL: +27 (0) 21 552 6889 FAX: +27 (0) 21 555 2986 E-MAIL: info@centurycity.co.za WEB: www.centurycity.co.za

DIRECTORS: G.W Deans (Chairperson), S.P Brand, J.A.L Chapman, C.W Green, F.J Grunewald,  
V.S Gutsche, N. Khan, C.S McMaster, L Metcalf, A.G Usher, G.A Wood, C.Anderson (Alternative Director)  
Co. Vat No. : 4790173555 Co. Reg No. : 1997/001905/08



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SPECIAL REQUIREMENTS / NOTES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INDEMNITY:**

I hereby irrevocably indemnify and keep indemnified the CCPOA which accept no responsibility for any loss (consequential or otherwise), damage, injury and or death, cost, interest and expense for which the CCPOA may hereafter be called on, pay, incur or sustain in connection with any action, proceedings, or claim being instituted against it by any party whomsoever, including the participants, directly or indirectly arising from or related to this application and/or relationship arising there from.

Please note events for over 200 people, a City of Cape Town permit is required. You can view the City's Staging Event Guidelines [here](#).

APPLICANT SIGNATURE: \_\_\_\_\_

WITNESS: \_\_\_\_\_

DATE: \_\_\_\_\_

Please complete and email to [info@centurycity.co.za](mailto:info@centurycity.co.za)

**FOR OFFICE USE:**

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

RENTAL FEE: \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_

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