



# ETHEKWINI MUNICIPALITY EVENT SUPPORT APPLICATION

The Platform  
Lion Match Complex  
Entrance No 1  
892 Umgeni Road  
Durban  
Phone: 031 311 4720  
Fax: 031 368 3150

**Please note: Legislation requires that applications for major events must be submitted 6 months prior to the event date**  
**All event applications will be subjected to the New Covid 19 Regulations**

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

NAME OF EVENT : \_\_\_\_\_

DATE OF EVENT : \_\_\_\_\_

COMPANY/ORGANISATION : \_\_\_\_\_

LEGAL STATUS (Pty, cc etc.) : \_\_\_\_\_

REGISTRATION NUMBER : \_\_\_\_\_

CONTACT PERSON/S : \_\_\_\_\_

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

FAX NUMBER : \_\_\_\_\_

MOBILE NUMBER : \_\_\_\_\_

E-MAIL ADDRESS : \_\_\_\_\_

REGISTRATION ON CENTRAL SUPPLIER DATABASE (CSD)?	YES	NO
IF YES – PLEASE PROVIDE MAAA REGISTRATION NUMBER		
REGISTRATION ON ETHEKWINI MUNICIPALITY VENDOR PORTAL?	YES	NO
IF YES – PLEASE PROVIDE PR NUMBER		
<b>GOOD STANDING DOCUMENTATION FOR COMPANY UNDER WHICH THE APPLICATION IS BEING SUBMITTED</b>	YES	NO
Company Registration Documents issued by the Companies and Intellectual Property Commission (CIPC)		
BBBEE Certificate (Certified copy)		
A copy Bank Statement or Letter from a South African Banking Institution confirming that the company/organisation is a client of such institution or a Cancelled Cheque.		
A copy of a valid Tax Clearance Certificate		
<b>Vat Registration (where applicable)</b>		
Certified Copies of Identity Documents of all shareholders Members/Partners/Board Members/ shares and /or interests in company/organisation		

**SECTION 1**



**1) EVENT CONCEPT**


**1.1 CONCEPT OVERVIEW**


**1.2 EVENT PROGRAMME** *(Please provide details of the overall event programme ie if this is a ticketed event, what time gates open, details of what is on the programme and at what time, closing time of the event etc)*


**1.3 EVENT FORMAT** *(Please indicate structure and the way the event will be managed ie various role players and their responsibilities, reporting lines, etc)*


1.4 PROPOSED VENUE


1.5 TARGET AUDIENCE (INCLUDING LSM)


SECTION 2

2.1 EVENT OBJECTIVES

(a) Primary objectives and reasons for staging the event


(b) Outline risks associated with the Event (***Please detail certain risks associated with the Event ie if it is a ticketed outdoor event, what plans are in place if the weather is inclement : if alcohol is sold, what plans will be in place to control under age consumption etc***)



**SECTION 3**

**3.1) ORGANISATIONAL CAPACITY**

(a) Previous Event Management experience


(b) Operating structure for the event (*Please provide organogram*)


(c) Persons responsible




(d) Ownership of the event


(e) Indicate services to be outsourced to local service providers


**SECTION 4**

**4.1) BUDGET**

- a) Provide detailed event budget (attach spreadsheet with anticipated expenditure and income)
- b) Sponsorship

<b>NAME OF COMPANY/ORGANIZATION (PRIVATE SECTOR SPONSOR) Financial/Value in Kind Sponsorship to be included</b>	<b>AMOUNT</b>

- c) Other Municipal or spheres of Government funding

<b>NAME OF COMPANY/ORGANIZATION Financial/Value in Kind Sponsorship to be included</b>	<b>AMOUNT</b>



d) Support required from EtheKwini Municipality

FUNDING/VENUE/SERVICES	AMOUNT

\*Should support requested be over 1 Million, please provide a Valid Vat Certificate

e) Ticket sales

YES	NO	If yes, how many tickets will be sold, and what is the cost per ticket	No. of tickets sold	Price of Tickets

f) Indicate whether the staging of the event is sufficiently funded without necessary support from eTheKwini Municipality.

YES	NO

## SECTION 5

### 5.1) OPERATIONS

a) Provide confirmation of SAPS Risk Assessment application (please attach application to SAPS or permit received)

b) Indicate venue/ site capacity and provide layout (attach relevant document if necessary)


c) Indicate temporary infrastructure requirements and provide build-up and break down timelines


d) Identify City service assistance and/or requirements i.e. electrical /water /waste /outdoor advertising/ temporary licensing etc


**SECTION 6**

**6.1) INSURANCE REQUIREMENT**

a) Provide details of the insurance cover required in staging the event e.g. Public liability


b) Indicate provision of compliance certificates



- c) Confirm eThekweni Municipality to be co-insured in terms of the event public liability insurance policy


## SECTION 7

### 7.1 EVENT MARKETING AND COMMUNICATIONS CAMPAIGN

- a) Provide outline marketing and communications plan – Local/National and International markets


- b) Indicate overall marketing spend




c) Indicate likely participants/spectators and expected numbers of visitors to the event and period of stay


d) Indicate event appeal and provide City leveraging opportunities in association with the event


e) Indicate the ability of the event to enhance tourism benefits i.e. extended stay of visitors


f) Provide proposed branding plan (***Branding Schematic inclusive of ALL proposed sponsor branding and the level of sponsor support associated with the event***)


g) Provide full details of the City Rights and Benefits package in association with the event



## SECTION 8

### 8.1 SANCTIONING

- a) Provide details from the relevant Federations/Associations/Promoters etc that the event in discussion has been sanctioned


## SECTION 9

### 9.1 ENVIRONMENTAL IMPACT ASSESSMENT

- a) Provide confirmation of EIA application where applicable


## SECTION 10

### 10.1 CSI PROGRAMME/LEGACY INITIATIVES

- a) Provide details of proposed programmes and initiatives in association with the event



**SECTION 11**

**11.1 RESEARCH AND EVALAUTION**

- a) Provide details of impact assessment of the event (anticipated visitors to the event both local and out-of-town and their projected spend and more accurate evaluation if the event has been staged previously)


- b) Provide details of proposed event evaluation and media analysis


Declaration of Information

I declare that the information provided herein is true and correct and that if tendered in evidence, the wilful provision of false information could result in prosecution.

Full Name: \_\_\_\_\_ Organisation \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_