



SHIBUYUNJI TOWN COUNCIL

AUTHORITY TO HOLD A PUBLIC GATHERING

(Section A: Particulars of Applicant)

NAME / ORGANISATION
CONTACT PERSON MOBILE No.
PURPOSE OF GATHERING
DURATION PLACE OF GATHERING
NUMBER OF PARTICIPANTS *(Attach List of names, sex, age, their contacts number, residential address etc.)*

PREVENTIVE MEASURES TO BE PUT IN PLACE BY APPLICANT

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(Section B: Declaration of compliance)

I *(full name)* of
(Physical address) Do hereby declare that I shall abide by the conditions for prevention and control of COVID19 as provided for under the Public Health Act Cap 295 read together with Statutory Instruments No. 21 and 22 of 2020.

SIGNATURE OF APPLICANT DATE

(Section C: Certification by Health Inspector/Public Health Officer)

I *(full Name)* *(position)*
Declare that I have thoroughly inspected the premises and do certify that the applicant has/has not complied with the Public Health Regulations and guidelines.

SIGNATURE DATE

(Section D: Authorization and conditions)

The gathering **IS AUTHORISED** subject to the following conditions:

1. That adequate hand washing facilities/sanitizers should be provided for use by the congregants.
2. That every congregant should correctly wear face mask.
3. That only Congregants should be allowed to attend the service.
4. That the duration of the service should be limited to hour(s).
5. Social distance of 1 m should be observed.
6. That a list of congregants should be submitted to Council on the first Monday after the service.

The gathering **IS NOT AUTHORISED** because of the following reasons:

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COUNCIL SECRETARY/ PUBLIC HEALTH INSPECTOR

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SIGNATURE

For clarifications, contact: 0975907383

