



Dear Stallholder,

The City of Parramatta is proud to deliver a huge range of free events for all ages. Our program of events brings world class entertainment to Western Sydney with free outdoor concerts, theatre, dance, fireworks, displays, cultural festivities and street performances.

We are seeking stall holders to take part in these dynamic events. Professional stalls structures are provided, and varying fees apply dependent on the event, nature of the goods being sold, or the type of stalls and extra options chosen.

Council encourages applications from stallholders who have an environmentally aware approach. Use of biodegradable and non-polystyrene materials is required.

Please complete the Stallholder Expression of Interest Form, tick the events you are interested in being considered for and send in your form with all the required documentation to eventsstallholder@cityofparramatta.nsw.gov.au

Applications not sent in with all the required information and documentation will not be considered.

Please note that the submission of an application is used as an expression of interest ONLY and does NOT guarantee a stall opportunity at an event. Your details will be added to the Council's supplier database, and only successful applicants will be contacted.

Please note that this form does not include the Farmers Markets. For stallholder related enquiries for the markets, please email markets@cityofparramatta.nsw.gov.au.

Should you have any enquiries regarding any of the events, please email eventsstallholder@cityofparramatta.nsw.gov.au

Yours sincerely

A stylized, handwritten signature in dark ink, appearing to read "Sandra Di Palma".

Sandra Di Palma

Team Leader Major Events & Festivals Production | Events & Festivals
City of Parramatta

9 Wentworth Street, Parramatta NSW 2150 Australia
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City of Parramatta Major Events 2025/26

Stallholder Expression of Interest Form

Please tick the event/s you wish to apply for:

☐ Burramatta NAIDOC

☐ Australia Day

☐ Parramatta Lanes

☐ Lunar New Year

☐ New Years Eve

☐ Ad hoc Events

1. STALLHOLDER DETAILS

Business/Organisation:	
Name on sign:	
Contact Name:	
Address:	
Mobile:	
Email:	
ABN:	
Outlet footprint size:	
BOH Size (If Required):	

2. STALL REQUIREMENTS

TYPE OF STALL (fees apply)	QTY
Stall - Merchandise (Fete Stall) Includes: 2.4m x 2.4m fete stall + benches, 2x chairs, internal stall light, dry waste service	
Stall - Merchandise (Marquee) Includes: 3m x 3m pagoda, 1x table, 2x chairs, internal stall light, dry waste service	
Stall – Food Include: 3m x 3m pagoda including pro floor & service bench, 1x table, 2x chairs, internal stall light, dry waste service, shared hand washing sink, 2 x 10/15-amp power	
Van, Cart, Trailer, or Truck Includes: One 6m x 3m space, dry waste service, 2 x 10/15-amp power	
ADDITIONAL INFRASTRUCTURE / SERVICES (fees apply)	QTY
Extra Power Outlet – 10-amp	
Extra Power Outlet – 15-amp	
Extra Power Outlet – per 3 phase, 32 amp, 5 pin	
Trestle Table 1.8m	
Plastic Chairs: per chair	
Shared cool room access	
Sullage Disposal	
Oil Disposal	
Water & Gas: Do you require access to water <input type="checkbox"/> Yes <input type="checkbox"/> No Do you require a direct connection to a tap <input type="checkbox"/> Yes <input type="checkbox"/> No Will you be using gas? <input type="checkbox"/> Yes <input type="checkbox"/> No	

3. POWER DETAILS

If you have requested power for your site, please list all equipment that will use power in your stall – if you are unsure, power details can be found on the appliance itself.

Item #	Type of Equipment	Rating (amps)	Rating (watts)
Example	Blender		750 watts
	Bain-marie	15 amps	3.6 KW
1			
2			
3			
4			
5			
6			
7			
8			

9			
10			

I am able to provide my own tested and tagged extension leads and power boards ☐ Yes

4. STALL HOLDER DOCUMENTATION

You are required to have a current Food Safety Supervisor certificate and Public Liability Insurance for \$10 million covering the activities at this stall site – please attach certificates.

Food Safety Supervisor certificate

FSS name and number: _____ Expiry: ____/____/____

Public Liability Insurance

Insurance company: _____

Policy number: _____ Expiry: ____/____/____

Workers Compensation Insurance (If Applicable)

Insurance company: _____

Policy number: _____ Expiry: ____/____/____

Temporary Food Outlet Number

TF number: _____

I have attached a copy of my Food Safety Supervisor certificate, Public Liability Insurance, and Workers Compensation ☐ Yes

5. MENU

List a maximum six types of food that you would like to sell and include prices for each item:

1.	
2.	
3.	
4.	
5.	
6.	