

SMOKING MANAGEMENT PLAN

Premises / Business Name: Situating Address:	
Postal Address:	
Licensee: Registered Licensee Address:	
Nominee:	
Licence Number:	
Licence Type:	
Extent of Licence:	
For more information about this plan contact:	
Licensee's Signature:	Print Name: _____ Date: _____

REASONS FOR PLAN

Call 13 QGOV (13 7468) for:

- information about Queensland's existing tobacco laws
- help for retailers and licensed liquor venue managers to understand and comply with the laws.

DESIGNATED OUTDOOR SMOKING AREA/S (DOSA/S)

No. of DOSA/s		% of total outdoor liquor licensed area:	
Location/s:			
Buffers:			

SIGNAGE

TYPE OF SIGN	DISPLAY LOCATION
No-smoking*	
Diagram of DOSA location*	
Notice of availability of Smoking Management Plan*	
Other	

*Legally required

MANAGEMENT OF SMOKING

Minimising environmental tobacco smoke

STAFF TRAINING

List staff training and instruction provided

OTHER MATTERS (Optional)

LIST OF ATTACHMENTS (if any)

DIAGRAM/ILLUSTRATION OF OUTDOOR AREA/S

Please show and label the following:

- Outdoor eating area/s
- Designated outdoor smoking area/s
- Buffer/s
- Footprint of the liquor licensed area*

*Details of the liquor licensed area can be obtained from the
**Office of Liquor and Gaming Regulations 13 QGOV (13 7468),
8.30am-5pm, Monday to Friday.**