Nelson City Council, PO Box 645, Nelson 7040, New Zealand. Tel: 03 546 0200 Fax: 03 546 0239 www.nelson.govt.nz enquiry@ncc.govt.nz



Request for permission for use of public amenities City Amenity Bylaw

Receipt number	SR number:	Date received:	(NCC to complete)	
APPLICANT DETAI	LS			
Applicant name:				
Address for correspor	ndence:			
Email:	Phone	2:	Mobile:	
DETAILS OF AMEN	IITY USAGE REQUE	ST		
Date of the proposed	usage:			
Location of the propo	sed usage:			
Will the proposed usa details:	ge cause any damage i	n a public place, including	g to a natural feature, animal plant	? If yes, please give
			uilding, structure or facility in a pul v? If yes, please give details.	olic place, except in
	e involve driving or par yes please give details		place (except in an area set aside f	or the driving or
Will the proposed usa yes please give detail		aving any material or thin	ng or item, or erecting any structur	e, in a public place? If
What is the reason/po	urpose for the proposed	use of this amenity?		
Signature of Applican	t	Da	te:	

Please return this form to: Customer Service Centre, Nelson City Council, 110 Trafalgar Street Freepost 76919, Po Box 645 Nelson 7040 Phone 03 546 0200 Email enquiry@ncc.govt.nz