

CONTROL OF ALCOHOL IN PUBLIC PLACES (Low risk activity)

Application Form

Urban Environments Bylaw

SR Number: _____

Date Received: _____
(NCC to complete)

APPLICANT'S DETAILS:

Full Name of Applicant: _____

Address: _____

Email: _____

Phone: _____

Mobile: _____

PERMIT INFORMATION:

I (the above named Applicant) apply for an exemption under section 6.4 of the Urban Environments Bylaw:

Date: _____

Time: _____

Location: _____

What kind of activity or event: _____

The numbers of persons that may
attend the event: _____

How much alcohol will be available: _____

What host responsibility provisions
will apply, including provision of
food, low or non-alcohol drinks, and
alternative transport options: _____

Signed by applicant: _____

Date _____

Please send complete form to Nelson City Council PO Box 645, Nelson 7040, email to enquiries@ncc.govt.nz or visit the Customer Services Centre at 110 Trafalgar Street, Nelson