

Western Bay of Plenty District Council 1484 Cameron Road, Greerton, Tauranga 3112 P 0800 926 732 E info@westernbay.govt.nz

westernbay.govt.nz

Application for a permit to operate an Amusement Device

Form 4, Amusement Devices Regulations 1978

Applicant(s) names(s) and co	ontact details					
Applicant(s) name(s):						
Applicant(s) mailing address	:					
					Post Code:	
Phone Number:	Mobil	Mobile: After		After Hours	lours:	
Fax Number:	Emai	Email Address: Website:				
Application details – including	g type, location (of amusement	device and date(s) of a	operation		
Type of amusement device:	<i>y</i> .	Registration No:				
		Registration No:				
		Registration No:				
		Registration No:				
		Registration No:				
		Registration No:				
Location of amusement device						
(please include street address						
Date and hours of opera amusement device	tion of					
Applicant(s) declaration						
I/we hereby make an applica specified above, and certify the danger to persons operating (a) the device's certificate (b) the prescribed fee: \$12.0	that, having reg or using it or in i of registration: r	ard to the situde ts vicinity. In subgrighted	ation in which the devic apport of this application aber	ce is erected n, there is at	I, it can be operated without tached:	
Signed:			Name/s:			
Date:		·				
Council Use Only		T				
Application No:						
Property ID:						
Fee	T					
	Amo	ount	Date paid		Receipt No	
Application Fee						
1	50 02 03 3232					