Application for Local Authority Gambling Consent for Class 4 Venue Licence

(Sections 98-100 Gambling Act 2003)

Post: Public Health Group Wellington City Council PO Box 2199 Wellington 6140

Email: publichealthenquiries@wcc.govt.nz Absolutely Positively Wellington City Council Me Heke Ki Põneke

Application for a Local Authority Consent is made in accordance with the details set out below. Please PRINT clearly.

Details of applicants/s
Full name of society/trust/club
Postal address
Contact person
Fax number
Phone number
Email address
Details of gaming venue
Name of venue

Street address of venue (state the address on the existing gambling venue licence, the same address as on the liquor licence)	
Contact person	
Phone number	
Number of approved machines currently in the venue and the proposed number of machines Current Proposed	
What are the current details of the liquor licence(s) applying to this premises including restricted areas	

Application fee
Please note that a fee is payable with the application (pursuant to sections 150(1)(b) and 150(3) of the Local Government Act 2002

This application does not exempt the applicant or premises owner from applying for any other consents or permissions required pursuant to other acts and regulations including Resource Consents and Building Consents.

Dated at Wellington this

Printed name

Applicants signature(s)

Office use only	
Date received	Fee
SR number	Receipt number
Approved Declined	
Officer	Date