



Application for a permit to operate an amusement device

Amusement Devices Regulations 1978

I/We (name of applicant/s):	
of (address):	
Contact telephone	

Hereby make an application for a permit to operate a

(Type of device):			
At (location):			
From (date):		To (date):	
Request time and date for inspection at:			

and clarify that, having regard to the situation in which the device is erected, it can be operated without danger to persons operating or using it or in its vicinity.

Certificate of registration, device number:	#	
Amusement device fee:	\$	
Additional device(s):	\$	
Additional seven (7) day periods:	\$	
Total due:	\$	

In support of this application, there is attached
 (a) copy of the device's certificate of registration
 (b) the prescribed fee

Signature:		Date:	
Name:			

Please refer to current fees and charges on Kaipara District Council's [website](#) under "Services/Fees and Charges/Amusement Device Regulations"
 Pay by Internet Banking: Account 02-0308-0090743-07, **use your name/health number as a reference.**

OFFICE USE ONLY:

	Application is complete with attachments	
Fees Paid		Receipt N°: