## Application for a Licence as a Keeper of a Mobile Shop/Hawker/Itinerant Trader



1.	I/We						
	Trading Name:						
	Private Address:						
	Business Address:						
	Telephone: Private: Business:						
	Date	) birtii.	11a				
2.	References from:		(1)				
			(2)				
3.	Type of activity involved in:						
	(a)	Is the sale of food in	nvolved		YES/NO		
	(b)	Is food being prepa		obile premises?	YES/NO		
Licensir	ng Tear	If YES – premises m m 03 314 8816 or ema			nder Food Act 2014. Please call		
4.	Class of goods and/or services:						
5.	How will goods be distributed/sold?						
6.	Hours and days of operation:						
7.	Туре	of motor vehicle and r	egistration nu	umber (if applicable	e):		
8.	Where	e will the activities be	carried out:				
	-						

	Department of the Hurunui District Council?	YES/NO				
f <u>YES</u>	what was the result?					
.0.	If you wish to operate on a state highway, consultation with Transit New Zealan Christchurch is necessary. Has this occurred?					
	emisteriaren is necessary. Has tilis occarred.	YES/NO				
	If <u>YES</u> attach copy of correspondence.					
1.	Have you had any previous convictions under this bylaw, any previous bylaw revoked this bylaw, the Summary Offences Act 1981, the Summary Proceedings Act 1957 or offence punishable by imprisonment?  YES/No					
	If <u>YES</u> , I give permission for the Hurunui District Council to request a copy of my criminal					
	convictions	YES/NO				
	What was the conviction for and when did it occur:					
SIGNE	ED: DATED:					

Please complete the form, attach the payment of \$130.00 made payable to Hurunui District Council, and send to: Hurunui District Council, PO Box 13, Amberley 7441.

Alternatively payment can be made to Hurunui District Council, Westpac, **03-0802-0946666-00**. If paying by internet banking please include in the reference field the words **LICENCE** and your **NAME** or **COMPANY NAME** so our accounts department can identify who the payment is for.