



Central Hawke's Bay  
District Council

# APPLICATION FOR LICENCE TO OCCUPY

2016 - 2017

**Land Transport Dept  
CHB District Council  
Ruataniwha Street  
PO Box 127  
Waipawa 4240**

**Telephone: (06) 857 8060  
Fax: (06) 857 7179**

Office Use Only

Applicant: \_\_\_\_\_ Agent: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Email: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Tel (Bus): \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Proposed licence to occupy location: \_\_\_\_\_

Size of area (if known) : \_\_\_\_\_

**Enclose Location Plan (indicate the road and highlight the proposed area of licence to occupy)**

Usage Type:

Comments:

### Terms and conditions:

I understand by making this application that I accept / comply with following conditions:

- As of July 2016 **NO** application fee or licence fee is required
- Your submitted application must be approved by the Council before you occupy the identified area
- The 'licence to occupy' agreement must be signed by you and Council

I hereby agree to observe and comply with all statues, regulation, Bylaws, licence to occupy agreement and instructions given by Council Officers covering the conditions.

Signature of applicant or agent: \_\_\_\_\_

Date:    /    /

**NB: Please attach the following with this application:**

**Location Plan**