

Submission form to Gambling Class 4 Policy and TAB Venue Policy (Draft)

OFFICE USE ONLY	
RM8 No:	
Submission No:	

Please print clearly using a black or dark blue pen

Your details				
Mr / Mrs / Miss / Ms / Dr (circle) Nan	ne:			
Name of Organisation (if applicable)				
Postal address:				
		P	ost Code	
Phone:	A/H:	M	obile:	
Email: □ Please tick this box if you want to				
Communication				
Preferred method of communication:	☐ Email	☐ Post	☐ Telephor	ne
Presentation				
Do you wish to present your commen	ts to Council in per	son at a hearing	: □ Yes	□ No
My submission(s)				
Please complete your submission on of a public agenda.	the form overleaf. F	Please note that y	our submissio	on will be part
You can post your submission to:	Gambling Class 4 Horowhenua Distr Private Bag 4002 Levin 5540		Venue Policy	Reviews

OR drop it into Council at 126 Oxford Street, Levin; or Te Takeretanga o Kura-hau-pō; your local library or Service Centre. Alternatively fax to (06) 366 0983 or email to: enquiries@horowhenua.govt.nz.

Submission forms can be completed on line or downloaded from www.horowhenua.govt.nz.

We need to receive your submission by 5.00 pm on Sunday 19 December 2021.

Submission form to Draft Gambling Class 4 Policy and / Or TAB Venue Policy

My submission(s):