

**SELWYN DISTRICT COUNCIL
(SPRINGSTON SOUTH RESERVE)**

APPLICATION FOR CONSENT TO TRANSFER LICENCE

To:
Chief Executive
Selwyn District Council
PO Box 90
ROLLESTON 7643

I/We _____ of _____ hereby apply for
consent to transfer my Licence over

to _____
(name in full)
of _____ (address)

(occupation)

The fee of \$50, the confirmation from the transferee and a copy of the Licence are enclosed, alternatively the fee can be directly credited to Councils bank account.

EXECUTED by _____)
_____)

in the presence of _____) Signature _____

Witness signature

Full name

Address

Occupation

Note: The signature must be witnessed by an independent person