

Application for a permit to operate an  
amusement device

**Clutha**  
District Council



**Amusement Devices Regulations 1978**

To: Chief Executive  
Clutha District Council  
PO Box 25  
BALCLUTHA

**Pursuant to the Machinery Act 1950,**

I/We:

of:

hereby make an application for

a permit to operate a:

at (venue):

on (date):

from (time):

to (time):

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

In support of this application, please attach the following:

- a) **the device's certificate of registration**
- b) **the prescribed fee - \$11.50 (minimum)**

**Signature:**

**Date:**

**Office Use Only**

Receipt number:

Date:

Clutha District Council, 1 Rosebank Terrace, PO Box 25, Balclutha 9240  
P: 03 419 0200; F: 03 418 3185; E: [help.desk@cluthadc.govt.nz](mailto:help.desk@cluthadc.govt.nz)  
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