BEACH AUTHORITY

FIRST SCHEDULE

(Regulation 4)

APPLICATION FOR AUTHORISATION TO USE PUBLIC BEACH

(a) Name of Applicant:
(b) Address of Applicant:
(c) Telephone No.: Fax No. (if any):
(d) Registered/Not Registered:
Registration No.: Date. of Registration:
(e) Nature of Undertaking: Government/Commercial/Social/Other
(f) Public Beach for which authorization for use is sought:
(g) Date, time and duration of activities:
(h) Location on beach where activities will be held:
(i) Description of activities:
(j) Approximate beach area it is proposed to use
(k) Measures proposed to ensure that no damage will be caused to the amenities, beach trees and the environment generally:
Date: Signature:
Please send your application by post to <u>Beach Authority</u> , 7th Floor, Ebène Heights Building, Plot 34,
Ebène Cybercity, Ebène or by fax on 468 6213 or by email to beachauthority@intnet.mu
Applicant Email Address: