

**APPLICATION FOR AN ALCOHOL FREE ZONE**

(Local Government Act 1993, section 644)

To City of Sydney Council,

I, .....(Full name)

of .....(Address)

Phone:.....Mobile:.....

Email address: .....

Being (please tick appropriate category and provide detail):

A.  Person living in the area proposed for an alcohol free zone  
*Provide evidence of residence as an attachment to this application – see over*

B.  Representative of a community group  
*Specify group and contact details – see over*

.....  
.....

C.  Police Superintendent  
*Specify Local Area Command*

.....  
.....

D.  Representative of a business operating in the proposed area  
*Provide evidence of location of business and relationship to business – see over*

.....  
.....

Apply to the City of Sydney to establish an Alcohol Free Zone (AFZ) as follows:

**Specify your reasons for requesting the establishment of an alcohol free zone**

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.....  
.....  
.....  
.....

**Location**

What street, roads or public car parks do you propose for an alcohol free zone?  
*Provide a map indicating the exact location as an attachment to this application.*

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.....  
.....  
.....

Signed:

Date:

Send the complete application form with attached map and required documentation to:

Manager, Safe City

City of Sydney

GPO Box 1591

SYDNEY NSW 2001

or

[afz@cityofsydney.nsw.gov.au](mailto:afz@cityofsydney.nsw.gov.au)

**On receipt of your application a council officer will be in contact with you.**

**A. Person living in the area proposed for an alcohol free zone**

Accepted forms of identification (documents presented must be current and show residential address):

You will need two documents from List A  
 or  
one document from List A and two from List B

**LIST A**

- Rental receipt from estate agent
- Pension card
- Current lease
- Rental bond board receipt
- Drivers licence
- Rates notice
- Utility bill
- Electoral roll card
- Utility bill
- Vehicle registration

**LIST B**

- Mobile phone invoice
- Official university correspondence
- Health care card
- Credit card statement
- Bank statement
- ATO correspondence
- Official government correspondence

**B. Community group representative**

Name of group .....

Contact details .....

Chairperson .....

**D. Representing a business**

Name of business .....

Address .....

Relationship to business .....