

**Submission to:**

 **Proposed Bylaws / Control of Dogs Policy**

Manager: Regulatory Solutions

Hastings District Council

Private Bag 9002

HASTINGS

**Submissions close Friday 19 March 2021**

|  |  |  |
| --- | --- | --- |
| (\*Mandatory field) |  |  |
|  |  |  |
| Title:  |  |  |
|  |  |  |
| First name: |  | \* |
|  |  |  |
| Last name: |  | \* |
|  |  |  |
| Street address: |  | \* |
|  |  |  |
| Daytime contact phone: |  | \* |
|  |  |  |
| Evening contact phone: |  |  |
|  |  |  |
| Email address: |  |  |

Please indicate whether or not you wish to speak to your submission at a Council Meeting set down for hearing submissions, held **April 2021**.

⭘ Yes

⭘ No

**My submission is:**

(Please state the nature of your submission, clearly indicating **whether you support or oppose** the specific provisions or wish to have amendments made, giving reasons).

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**I/We seek the following decision:** *(Please give precise details)*

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

***Your submission is a public document for the use in this consultation process.***