

## Nunavut Liquor Licensing Board

## Request for Board or Executive Secretary Approval

| Name of applicant / licence holder:  |                           |                                       |
|--|---------------------------|---------------------------------------|
| Contact information (email/fax numb  | per where result to be so | ent)                                  |
| Nunavut Liquor licence number (if a  | applicable):              |                                       |
| Type of decision requested (see attac  | ched table and include    | description and section number):      |
|  |                           |                                       |
| Circumstances of request (explain in for and why, including any relevant of        |                           | essible what exactly is being applied |
| Date of application:   |                           |                                       |
| Signature of applicant / licence holde   |                           |                                       |
| Mail or fax completed application to:  Executive Secretary  Liquor Licensing Board |                           |                                       |

P.O. Box 1000, Station 330 Iqaluit, Nunavut X0A 0H0 (P) 867-975-5875 (F) 867-975-5805