



**EILANDGEBIED ST. MAARTEN
NEDERLANDSE ANTILLEN**

CARNIVAL APPLICATION FORM

Application for:

a. Mobile permit

b. Stationary permit

Name and Christian names:

Place and date of birth:

Nationality:

Address:

Phone number:



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NEDERLANDSE ANTILLEN**

Will applicant conduct the business personally? YES
 NO

Will applicant employ a helper? YES
 NO

What goods and/or services will applicant be offering to the public?

During which days and hours will applicant conduct the business?

From _____ day to _____ day ; From _____ o'clock to _____ o'clock

If applicant is requesting a "Standplaatsvergunning" as mentioned under b., please describe the area as accurate as possible:

If applicant is **not the owner** of the relevant property, please indicate the name and address of the owner and submit a written permission by the owner that the property can be used for the requested purpose:

Name:

Address:

Tel.:

The above mentioned information has been truthfully submitted.

Philipsburg, _____

Signature of the applicant

Name of the applicant