

Your details

Name: _____

Organisation (if applicable) _____

Position in organisation (if you are submitting on behalf of an organisation what position do you hold in the organisation?) _____

Email address: _____

Postal address and /or contact number: _____

Please note: The provision of your personal information is optional, however, should you provide this information please note your name and organisation may be included in papers for the public and media. Information you have provided will only be used for the purpose of early engagement for the review of the Local Alcohol Policy. The Council will collect, use and store your information in accordance with the Privacy Policy which can be found on the Council website www.dunedin.govt.nz/privacy-policy . If you would like a copy of the personal information we hold about you, or to have the information corrected, please contact us at dcc@dcc.govt.nz or 03 477 4000.

Remember your submission needs to reach the Council by 5pm Friday 5 June 2026.

Thank you for your feedback.