賓 館 牌 照 續 期 申 請 意 見 表 格

COMMENT FORM FOR HOTEL / GUESTHOUSE LICENCE RENEWAL APPLICATION

須 知 事 項 Notes to complete this form

(i) 此表格可透過以下方式遞交旅館牌照簽發諮詢小組

This form can be submitted through either of the following means to the Advisory Panel on Licensing of Hotels and Guesthouses –

- 郵寄 By post：香港太古城太古灣道 14 號 10 樓（10/F, 14 Taikoo Wan Road, Taikoo Shing, Hong Kong）
- 傳真 By fax：3109 7408
- 電郵 By e-mail：hadlaapu@had.gov.hk

(ii) 受影響人士或會被邀請出席聆訊，即場發表意見。屆時申請人亦會在場。

Affected person(s) may be invited to attend a hearing to present their views. The applicant will also be present at the hearing.

(iii) 你在此表格及提交的補充資料中的個人資料會用於就上述申請進行的地區諮詢，但你的個人資料不會向申請人披露。秘書處會複印此表格（除個人資料外）及你提交的補充資料，並轉交予申請人就你所提供的意見作出回應。秘書處在複印此表格及補充資料時會盡可能把當中的個人資料遮蓋。**如你不希望秘書處將你於表格中所提供的意見或補充資料（如有）轉交予申請人，請在此表格內註明。如你希望遮蓋個別補充資料文件上的資料，亦請於該文件上註明。**否則，秘書處會按上述安排轉交意見給申請人作回應。

Personal data provided in this form and the supplementary information submitted may be used for the purpose of conducting local consultation relating to the above application but your personal data will not be disclosed to the applicant. The Secretariat will make a copy of this form and your supplementary information (excluding your personal data) which will be passed to the applicant to make response to your views. The Secretariat will mask the personal information in this form and the supplementary information as far as possible before passing them to the applicant for response. **If you do not wish the Secretariat to pass your views provided in this form or supplementary information (if any) to the applicant, please indicate in this form. If you wish to mask any information on particular piece of supplementary information, please indicate so in the document.** Otherwise, the Secretariat will pass your views to the applicant for response according to the above arrangement.

(iv) 你或會被要求提供所填報的身份的相關證明，例如住址證明、租約，以便處理你的意見。

You may be asked to provide the relevant proof of your reported status, e.g. address proof, tenancy agreement, to facilitate the handling of your views.

第一部分 Part A

賓館名稱 Name of Premises: 金星賓館 (H/3413)

賓館地址 Address of Premises: 九龍深水埗鴨寮街 252 號 1 字樓 A 室
Flat A, 1/F, 252 Apliu Street, Sham Shui Po, Kowloon

第二部分 Part B (請在適當方格內填上「✓」號 Please tick in the appropriate box)

1. 就上述申請，本人表示
   Regarding the above application, I express
   ☐ 不反對 No Objection
   ☐ 反對 Objection

2. 意見 / 理由（如有）Comments / Reasons (if any)

3. 你願意將你於表格中所提供的意見或補充資料（如有）轉交予申請人嗎？
   Are you willing to pass the views provided in this form or supplementary information (if any) to the applicant ?
   ☐ 願意 Yes
   ☐ 不願意 No

4. 你願意出席有關上述申請的聆訊（如適用）嗎？
   Are you willing to attend the hearing about the above application if applicable ?
   ☐ 願意 Yes
   ☐ 不願意 No

第三部分 Part C

姓名 Name : _____

地址 Address : _____

身份 Status : ☐業主 Owner ☐住客 Occupier ☐其他（請註明）Others (please state) _____

聯絡方法 Contact : 電話 Phone: _____ 電郵 E-mail: _____

日期 Date : _____