



Application for Off-Licence or Renewal of Off-Licence

Section 100 and 127(2), Sale and Supply of Alcohol Act 2012

To: Otorohanga District Council, PO Box 11, Otorohanga 3940
Phone: 0800 734 000 | Fax: 07 873 4300 | Web: www.otodc.govt.nz | Email: info@otodc.govt.nz

To the Secretary
District Licensing Committee Otorohanga District Council

Application for (tick which licence applies) Off-Licence or Renewal of Off-Licence is made in accordance with the particulars set out below:

Endorsements

State every endorsement sought or sought to be renewed:

Details of Applicant

Full Legal Name or Names to be on licence: _____

Is a licence already held for the premises or conveyance concerned? Yes No

If Yes, what type of licence? _____

Applicant Status: [under section 28 of the Sale and Supply of Alcohol Act 2012 what is the status of the applicant?]

Applicant that is a natural person or persons (complete for each applicant):

Full Legal Name: _____ Male Female

Also known as (alias): _____

Residential Address: _____

Town: _____

Post Code: _____

Occupations: _____

Internet Site (if applicable): _____

Date of Birth: _____

Preferred mode of contact: _____

Place of Birth: _____

Full Legal Name: _____

Male Female

Also known as (alias): _____



Residential Address: _____	
Town: _____	Post Code: _____
Occupation: _____	
Internet Site (if applicable): _____	Date of Birth: _____
Preferred mode of contact: _____	Place of Birth: _____
Applicant that is a body corporate, authority under which incorporated:	
Applicant that is not a natural person, details of contact person:	
Full Legal Name: _____	
Contact Phone No: _____	Mobile Number: _____
Email Address: _____	Internet site: _____
Preferred contact: _____	<i>[phone, email etc]</i>
Postal Address: _____	
Town: _____	Post Code: _____
Business Details: _____	<i>[describe principal business, any other businesses]</i>
Criminal Convictions	
<i>State all criminal convictions (other than convictions if related to alcohol but not offences to which the Criminal Records (Clean Slate) Act 2004 applies).</i>	
For a company (whether incorporated under the Companies Act 1993 or equivalent foreign legislation):	
Full legal names of directors: _____	
For a private company incorporated under the Companies Act 1993:	
Authorised capital: _____	
Paid up capital: _____	
Name: _____	
Address: _____	
Town: _____	Post Code: _____

Date of Birth:	_____	Place of Birth:	_____
Designation:	_____	Face value of shares held:	_____
For a partnership <i>(full details for each partner):</i>			
Full Legal Name:	_____		
Address:	_____		
Town:	_____	Post Code:	_____
Full Legal Name:	_____		
Address:	_____		
Town:	_____	Post Code:	_____

Details of Premises (if not a conveyance)	
Address of premises:	_____
Trading or other name:	_____
If not owned by applicant -	
Tenure: <i>[freehold, unit title, leasehold or under licence]</i>	_____
Full Legal Name of Owner:	_____
Address:	_____
Town:	_____ Post Code: _____
Type:	_____ <i>[grocery, hotel, retail shop, tavern etc]</i>
Is the licence conditional on completion of building work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, please provide details:	_____

Details of Conveyance	
Type of conveyance: <i>[ship, railway carriage, bus etc]</i>	_____
Tenure: <i>[owned by applicant, operated under charter, lease or licence]</i>	_____
If Not owned by applicant, please provide details:	
Full Legal Name of owner:	_____
Contact Phone No:	_____ Mobile Number: _____
Email Address:	_____
Postal Address:	_____

Town: _____	Post Code: _____
Registration Number (if any): _____	
Address of home base (if any): _____	
Any name used or proposed for conveyance: _____	
Is the licence conditional on completion of building work? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, please provide details: _____	

Variation
If applying for a renewal of an existing licence, do you wish to vary any conditions? <input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, what condition(s)? _____ _____ _____

Details of Managers (complete for each manager or proposed manager)
Full Legal Name: _____
Managers Certificate No: _____ Expiry Date: _____
Full Legal Name: _____ Certificate No: _____
Managers Certificate No: _____ Expiry Date: _____
Full Legal Name: _____ Certificate No: _____
Managers Certificate No: _____ Expiry Date: _____

Business Details
Is the sale of alcohol intended to be the principal purpose of business? <input type="checkbox"/> Yes <input type="checkbox"/> No
If No, what is the intended principal purpose of the club? _____
Are you engaged or are intending to engage in the sale or supply of any goods other than alcohol and food, or in the provision of any services other than those directly related to the sale or supply of alcohol and food? <input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, what is the nature of the other goods and services? _____
Days and hours proposed for sale of alcohol: _____



Conditions

Experience and training of applicant: _____

What steps are to be taken to prevent the sale and supply of alcohol to prohibited people?

What other steps does the applicant propose to promote the responsible consumption of alcohol?

What other systems (including training) and staff are in place (or to be in place) for compliance with the Act?

Attachments (premises that are not a conveyance)

- Copy of planning consent.
- Copies of all relevant building certificates consents.
- Where it must be determined whether the premises are grocery store, the statement of annual sales revenue required by regulation 12 or 13 (as the case requires) of the Sale and Supply of Alcohol Regulations 2013.
- Floor plan showing any proposed permitted area for the display and promotion of alcohol, and any proposed sub-areas.
- For body corporate applicant, copy of certificate of incorporation (or equivalent document).

Attachments (conveyance)

- Floor plan showing each area to be designated as a supervised area or restricted area, and indicating whether supervised or restricted area.
- For body corporate applicant, copy of certificate of incorporation (or equivalent document).

Further details where applicant is a company

Full details of each person who holds 20% or more of the shares, or of any particular class of shares, issued by the company:

Full Legal Name: _____

Residential Address: _____

Town: _____

Post Code: _____

Date of Birth: _____

Place of Birth: _____

Designation _____

Full Legal Name: _____

Residential Address: _____

Town: _____

Post Code: _____

Date of Birth: _____

Place of Birth: _____

Designation _____

Full Legal Name: _____

Residential Address:	_____		
Town:	_____	Post Code:	_____
Date of Birth:	_____	Place of Birth:	_____
Designation	_____		

Further details where applicant is a partnership

Full details of each partner as follows:

Full Legal Name:	_____		
Residential Address:	_____		
Town:	_____	Post Code:	_____
Signature:	_____	Date:	_____
Date of Birth:	_____	Place of Birth:	_____
Full Legal Name:	_____		
Residential Address:	_____		
Town:	_____	Post Code:	_____
Date of Birth:	_____	Place of Birth:	_____
Signature:	_____	Date:	_____
Full Legal Name:	_____		
Residential Address:	_____		
Town:	_____	Post Code:	_____
Date of Birth:	_____	Place of Birth:	_____
Signature:	_____	Date:	_____

Dated at:	_____	Date:	_____
Signature of applicant:	_____		



Notes:

- 1 This application must be accompanied by the prescribed fee.
- 2 Within 20 working days after filing this application with the District Licensing Committee (or 10 working days if it is an application for renewal), the applicant must give public notice of it in form 7. The notice must be given in compliance with regulation 36, 37 or 38 of the Sale and Supply of Alcohol Regulations 2013 (whichever applies to this application).
- 3 Except in the case of a conveyance, within 10 working days after filing this application with the District Licensing Committee, the applicant must ensure that notice of this application in form 7 is attached in a conspicuous place on or adjacent to the site to which this application relates (unless the Secretary of the District Licensing Committee agrees that it is impracticable or unreasonable to do so).

Documents required to accompany new applications:

- 1 Company Incorporation Certificates
- 2 Statement of Annual Sales Figures
- 3 A photograph of the exterior of the premises
- 4 A map or a copy of a map or a portion of a map showing the location of the premises
- 5 A scale plan showing:
 - Those parts of the premises that are to be used for the sale and supply of liquor
 - Those parts of the premises that the applicant intends should be designated as restricted areas or as supervised areas
 - Each entrance to the premises that the applicant intends should be designated as a principal entrance
- 6 A written statement from the owner to the effect that the owner has no objection to the grant of the licence
- 7 A certificate by Otorohanga District Council that the proposed use of the premises meets the requirements of the Resource Management Act 1991 and of the Building Code –see attached application form
- 8 Fire Evacuation Statement

Documents required to accompany renewal applications:

- 1 Statement of Annual Sales Figures
- 2 Fire Evacuation Statement

Section 101, Sale and Supply of Alcohol Act 2012

Public Notice

of application for on-licence, off-licence, or club licence (or application for variation of conditions of on-licence, off-licence, or club licence) (Please circle relevant application)

(Full name, address and occupation of applicant) has made application to the District Licensing Committee

At For the grant (or renewal or variation of conditions) of a (specify type of licence) in respect of the premises situated at.....

(or specify type of conveyance) travelling between

And Known as

The general nature of the business conducted (or to be conducted) under the licence is:

..... (e.g. hotel, tavern, restaurant, entertainment, night club)

The days on which and the hours during which the liquor is (or intended to be) sold under the licence are:

.....

The application may be inspected during ordinary office hours at the office of the Otorohanga District Council, District Licensing Committee, Maniapoto Street, Otorohanga.

Any person who is entitled to object and who wishes to object to the issue of the licence may, not later than 15 working days after the date of the publication of this notice, file a notice in writing of the objection with the Secretary of the District Licensing Committee at Otorohanga District Council, PO Box 11, Otorohanga 3940

No objection to the issue of a licence may be made in relation to a matter other than a matter specified in section 105(1) of the Sale and Supply of Alcohol Act 2012.

No objection to the renewal of a licence may be made in relation to a matter other than a matter specified in section 131 of the Sale and Supply of Alcohol Act 2012.

(In case of publication in newspaper(s)) This is the [state whether first, second, or only] publication of this notice.

(In case of second publication in newspaper(s)) This notice was first published on [state date].

06666764





APPLICATION FOR LOCAL AUTHORITY CERTIFICATE WITH REGARD TO BUILDING ACT 2004 AND THE RESOURCE MANAGEMENT ACT 1991

For the purposes of
Section 100 (f) Sale and Supply of Alcohol Act 2012

Date Received

Application Number

BUILDING

STREET ADDRESS _____ _____	LEGAL DESCRIPTION VALUATION NUMBER _____
TRADE NAME _____ _____	LOT _____ DP _____ SECTION _____ BLOCK _____ SURVEY DISTRICT _____

COUNCIL CHARGES The Council's total charges payable on the uplifting of a Local Authority Certificate (Sale and Supply of Alcohol) are:

Assessment on papers \$100.00

Assessment with site inspection \$195.00 RECEIPT NUMBER _____ DATE _____

Full Name

Postal Address

TOWN/CITY _____ **POST CODE** _____ **TELEPHONE** _____

SIGNED BY OR FOR ON BEHALF OF THE OWNER

Signature _____ *Print Name* _____

DATE _____

**NEW ZEALAND FIRE SERVICE
EVACUATION SCHEME PROCEDURE DATA**

Section 286 of the Sale and Supply of Alcohol Act 2012

Section 21a of the Fire Service Act 1975

Fire Safety and Evacuation of Buildings 1992

LICENSED PREMISES	
Name:	_____
Address:	_____ _____

Contact Person :	_____
Phone:	_____
Email:	_____

Do you have an evacuation scheme approved by the Fire Service as required by section 21A of the Fire Service Act 1975?	Yes / No
Date approved:	_____

Do you have an evacuation procedure as required by Fire Safety and Evacuation of Buildings Regulations 1992?	Yes / No
Date implemented:	_____

What is the maximum number of people that the building can occupy?	
Employees: _____	Public: _____
Are there any other tenants in the building?	Yes / No
Are your exit routes and doors indicated by signs?	Yes / No

DETAILS OF THE BUILDING'S FIRE PROTECTION — Please tick if you have the following:			
Automatic fire sprinkler	<input type="checkbox"/>	Automatic fire detection	<input type="checkbox"/>
Manual fire alarm	<input type="checkbox"/>	Emergency lighting	<input type="checkbox"/>
Hose reels	<input type="checkbox"/>	No of units _____	
Portable fire extinguishers	<input type="checkbox"/>		
Other	<input type="checkbox"/>		

Please tick where applicable:	
<input type="checkbox"/>	I hereby declare that the above premises has an Evacuation Scheme/Procedure for the public safety which meets the requirements of Section 21A of the Fire Service Act 1975; or
<input type="checkbox"/>	The building, by reason of its current use, does not require such a scheme, or that the building is exempt from having to meet the requirements for such a scheme.
Name: _____	Designation: _____
Signature: _____	Date: _____