

APPLICATION FOR ON-LICENCE



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

To: The Secretary
Hurunui District Licensing Committee
P O Box 13
Amberley

Please tick one On-Licence Renewal of on-licence

If the application is for renewal are any changes sought to the present conditions of the licence. Yes/No

If Yes, what changes are sought? _____

1. Endorsements

State any endorsement sought or sought to be renewed (e.g. BYO, caterers):

2. Details of applicant

Company name or full legal name(s) if individual to be on licence:

Name of contact person: _____

Date and place of birth: _____

Sex: _____ Occupation: _____

Residential address: _____

Postal address for service: _____

Phone number: _____ Mobile number: _____

Email address: _____

Internet site: _____

Convictions of Company Directors, Partners, or individuals.

Have you ever been convicted or any offence (including traffic but not parking)? You need not declare any convictions older than 7 years other than convictions relating to imprisonment or indefinite disqualified from driving.

<i>Nature of offence</i>	<i>Date of conviction</i>	<i>Penalty suffered</i>

Status of applicant (tick appropriate box):

- Natural Person (20 years of age)
- Partnership or Limited Partnership
- Licensing Trust or Community Trust
- Government Department or other Instrument of Crown
- Manager under the Protection of Personal and Property Rights Act 1998

- Company
- Trustee
- Body Corporate
- Local Authority

3. Further details where applicant is a company

Date of incorporation: _____

Place of incorporation: _____

Full details of each director as follows:

Full legal name: _____

Address: _____

Date of Birth: _____ Place of Birth: _____

Designation: _____

Full legal name: _____

Address: _____

Date of Birth: _____ Place of Birth: _____

Designation: _____

Full legal name: _____

Address: _____

Date of Birth: _____ Place of Birth: _____

Designation: _____

Private company only

Authorised Capital

Paid Up Capital

Full details of each person who holds any shares issued by the company:

Full legal name: _____

Address: _____

Date of Birth: _____ Place of Birth: _____

Designation: _____

Full legal name: _____

Address: _____

Date of Birth: _____ Place of Birth: _____

Designation: _____

Full legal name: _____

Address: _____

Date of Birth: _____ Place of Birth: _____

Designation: _____

4. Further details where applicant is a partnership

Full details of each partner as follows:

Full legal name: _____

Address: _____

Date of Birth: _____

Place of Birth: _____

Full legal name: _____

Address: _____

Date of Birth: _____

Place of Birth: _____

5. Premises details

(a) Address of licensed premises: _____

(b) Trading name for premises (if any): _____

(c) Is a licence already held for premises concerned: Yes / No

If yes what kind of licence _____

(d) Is a licence sought conditional upon construction or completion of the premises? Yes / No

(e) Does the applicant own the licensed premises?: Yes / No

If No (i) What is the full name and address of the owner?:

(ii) What form of tenure of the premises will the applicant have (including term of tenure)?:

(f) What part (if any) of the premises does the applicant intend should be designated as:

- Restricted designation: no person under 18 may be present on the premises
- Supervised designation: persons under 18 may be present, but only if accompanied by a parent or legal guardian

A restricted area: _____

A supervised area: _____

(g) Fire Safety

I certify that the owner of the building provides and maintains / does not require (please circle one) an Evacuation Scheme as required by Section 21B of the Fire Service Act 1975.

Signature: _____ Date: _____

A registered Evacuation Scheme is required when:

- The building can hold more than 100 people;
- There are more than 10 employees in the entire building; or
- Overnight accommodation is provided for more than 5 people

Please contact the NZ Fire Service (03 372 8635) for more information about evacuation schemes and fire safety requirements

6. Details of managers to be employed

Name	Address	Certificate number

7. Business details

(a) What is the general nature of the business to be conducted by the applicant if the licence is granted? (*eg hotel, tavern, restaurant, entertainment*)

(b) Is the sale of alcohol intended to be the principal purpose of the business? Yes / No
If NO what is intended to be the principal purpose of the business?

(c) Is the applicant engaged, or intending to be engaged, 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?

Yes / No

If YES – what is the nature of those other goods or services? _____

(d) Please state the experience and training of applicant:

(e) On which days and during which hours does the applicant intend to sell alcohol under the licence?

8. Conditions

(a) What provisions does the applicant intend to make for the sale and supply of alcohol?

- Food (attach menus, including all day or snack menu):

- Describe type and range of non-alcoholic beverages:

- Describe type and range of low-alcohol beverages:

(b) Describe the steps intended to be taken to provide help with and information about transport options from the premises:

- (c) Describe steps proposed to be taken to prevent the sale and supply of alcohol to prohibited persons:
-
-
-
- (d) Describe any other steps the applicant proposes to promote the responsible consumption of alcohol:
-
-
-
- (e) Describe systems (including training systems) and staff in place (or to be in place) for compliance with the Act:
-
-
-
- (f) Describe to what extent, and where, drinking water is intended to be freely available to patrons and if no access to mains water supply, describe potability of water intended to be available:
-
-
-
- (g) What are the current and possible future noise levels and how does the applicant intend to mitigate them?
-
-
-
- (h) What are the current and possible future levels of nuisance and how does the applicant intend to mitigate them?
-
-
-
- (i) What other licensed premises are there in the vicinity of your premises? Will the granting of this licence contribute to an increase in alcohol related problems in the area? (Explain)
-
-
-
- (j) What is the land near the proposed premises being used for? Will the granting of a licence for your premises impact on neighbouring land use? (Explain)
-
-
-

9. Please attach the following documents

- Host Responsibility Policy
- A site/floor plan of the premises defining all indoor and outdoor areas that will be licensed, including:
 - areas to be designated as a supervised or restricted area
 - principal entrance
- Menu
- Fee

Plus for New Applications only

- Copy of planning certificate
- Copy of building certificate
- Owner's permission in writing (if not the owner of the property)
- A map showing the location of the premises
- Copy of certificate of incorporation if a company

Dated at _____ this _____ day of _____ 20_____

Applicant's Signature