

Application for Renewal Variation of On-Licence



Sections 127, Sale and Supply of Alcohol Act 2012

(Form 3) is made in accordance with the particulars set out below

The Secretary

South Waikato District Licensing Committee

C/- South Waikato District Council-

Private Bag 7

TOKOROA 3444

Telephone (07) 885 0340

Fax (07) 885 0718

Email: Alcohol@southwaikato.govt.nz

Fee:

As prescribed

Check List for Renewal Variation of On-Licence

Please ensure that all relevant documents are attached, failure to attach to the application may result in delayed processing times

The following must be included with application:

(Tick)

- | | |
|--|--------------------------|
| 1. Application Fees <i>(the fees will be determined after assessment of application)</i> | <input type="checkbox"/> |
| 2. Application form, with all sections completed, signed, and dated. | <input type="checkbox"/> |
| 3. Photo or artist's impression of outside of premises. | <input type="checkbox"/> |
| 4. Map showing location of premises. | <input type="checkbox"/> |
| 5. Detail A4 scale map of the interior of the premises showing: <ul style="list-style-type: none"> • Areas of the premises intended to be used for the sale, supply and consumption of alcohol. • Areas of the premises intended to be Restricted Area or Supervised Area (if applicable) • Each entrance to the premises that the applicant intends should be designated as a principal entrance. • CCTV placement and security lighting (if applicable) | <input type="checkbox"/> |
| 6. A Host Responsibility Policy and details in an implementation plan how the policy is put into practice, | <input type="checkbox"/> |
| 7. Public Notice - notice is to be completed for advertising on the South Waikato District Council website. | <input type="checkbox"/> |
| 8. Copies of Manager's Certificates and Photo identification of all named certificated Managers, for New Zealand and Australian Citizens or permanent residents please include a copy of either NZ or Australian Passport, Birth Certificate, or proof of residency, for all others please include a copy of passport and a valid work visa for those managers appointed to the business. If you are having difficulty obtaining any of these please contact the licensing staff to discuss options. | <input type="checkbox"/> |
| 9. A menu of the standard and style of food being provided. | <input type="checkbox"/> |
| 10. Copy of the current licence. | <input type="checkbox"/> |
| 11. Fresh copy of the Certificate of Incorporation | <input type="checkbox"/> |

Application for Renewal of On Licence

1. Details of Applicant(s)

Full legal name or names to be on licence:			
Whether licence already held for premises or conveyance:	<input type="checkbox"/>	Yes	<input type="checkbox"/>
If yes, state kind of licence (<i>Tick</i>)			
<input type="checkbox"/>	Premises	<input type="checkbox"/>	Conveyance
Address of applicant:			
Postal address:			
Name of contact person:			
Contact details:	Telephone:	<input type="text"/>	Fax:
	Email:	<input type="text"/>	Mobile:
Preferred Method of Contact:			
Internet Site:			

2. Status of Applicant

Natural Person(s) (an ordinary person in their private capacity)	<input type="checkbox"/>	Private Company	<input type="checkbox"/>
Licensing Trust or Community Trust	<input type="checkbox"/>	Trustee	<input type="checkbox"/>
Public Company	<input type="checkbox"/>	Partnership	<input type="checkbox"/>
Club	<input type="checkbox"/>	Local Authority	<input type="checkbox"/>
Body Corporate	<input type="checkbox"/>	Department of State	<input type="checkbox"/>

3. Natural Person Details

Full Legal Name:			
Any aliases:			
Usual Residential Address:			
Contact Details:	Telephone:	<input type="text"/>	Mobile:
	Email:	<input type="text"/>	
Preferred Method of Contact:			
Date of Birth:	<input type="text"/>	Place of Birth:	<input type="text"/>
Gender:			
Occupation:			

4. Partnership Details

Full Legal Name:			
Address:			
Contact Details:	Telephone:	<input type="text"/>	Mobile:
	Email:	<input type="text"/>	
Preferred Method of Contact:			
Full Legal Name:			
Address:			
Contact Details:	Telephone:	<input type="text"/>	Mobile:
	Email:	<input type="text"/>	

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5. For a company (incorporated under the Companies Act 1993 or equivalent foreign legislation) or Private company Full legal names of Director/s & ShareholdersDate of Incorporation: Place of Incorporation: **State the full details of each director:**

Director Name	Address	Place of Birth	Date of Birth	Contact Number/Email
Shareholder Name	Address	Place of Birth	Date of Birth	Face Value of Shares Held

Do any of the Directors or Shareholders have any Criminal Convictions?
(Other than convictions for offences against provisions of the Land Transport Act 1998 not contained in Part 6, and offences to which the Criminal records (Clean Slate) Act 2004 applies)

Yes No

If yes, please state the nature of the offence, date of the offence and conviction and penalty suffered:

Have any of the Directors or Shareholders been before the Authority (ARLA) or do any have any pending matters yet to be heard before the Authority? **If yes, please list**

Yes No **6. Details of Premises (If not a Conveyance)**Address of Premises: Any name, trading name or name of building: Is a Licence sought conditional upon construction or completion of the premises? **If yes, please specify.**Yes No

Does the applicant own the licensed premises.

Yes No

*If no, full legal name and address of owners:

What form of tenure of the premises does the applicant have? (e.g., Lease 5 x 5 etc)

***If the applicant is not the owner of the building, please ensure that written permission from the owner of the building is included in the application stating that the applicant can undertake the sale and supply of alcohol from within the building.**

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7. Details of Conveyance			
Is the premises a conveyance?	<input type="checkbox"/>	Yes	<input type="checkbox"/>
If yes please indicate type: <i>(e.g., ship, railway carriage, bus etc)</i> .			
Tenure (state whether owned by applicant, or to be operated under charter, lease, or licence)	<input type="text"/>		
*If not owned by applicant please specify the owners full name	<input type="text"/>		
Address of owner:	<input type="text"/>		
Registration Number:	<input type="text"/>		
Home base address:	<input type="text"/>		
Name for conveyance:	<input type="text"/>		
Is licence conditional on completion of construction work?	<input type="checkbox"/>	Yes	<input type="checkbox"/>
*If the applicant is not the owner of the conveyance, please ensure that written permission from the owner of the conveyance is included in the application stating that the applicant can undertake the sale and supply of alcohol from within the conveyance.			
8. Details of Managers			
Full Legal Name:	Date of Birth:	Certificate Number:	Certificate Expiry:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Have any of the named managers above been before the Authority (ARLA), have any matters pending before the Authority or have any criminal convictions? If yes, please detail here.			
<input type="text"/>			
<input type="text"/>			
Do all the named managers above have a legal right to work in New Zealand? For holders of foreign passports, please attach copies of current visas.			
<input type="text"/>			
<input type="text"/>			

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9. Endorsements				
Endorsement being sought or sought to be renewed:	BYO <i>Section 37</i>		Caterer <i>Section 38</i>	
10. Business Details				
What is the general nature of the business? (For example, hotel, tavern, restaurant, entertainment/night club)				
Is the sale of alcohol the principal purpose of the business?				
		<input type="checkbox"/>	Yes	<input type="checkbox"/>
			No	
If NO, what is the principal purpose of the business?				
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				
		<input type="checkbox"/>	Yes	<input type="checkbox"/>
			No	
If "yes", what is the nature of those other goods or services?				
11. Current Trading Days & Hours				
<i>(eg Monday to Sunday 9am - 1am the following day)</i>				
12. Designation				
<i>What part (if any) of the premises is designated?</i>				
As a RESTRICTED AREA (where a person who is under 18 years is not permitted on the premises)				
As a SUPERVISED AREA (where a person under 18, who is accompanied by a parent or legal guardian, may be present, but can only be supplied alcohol by the parent or legal guardian)				
13. Variation				
What conditions of the licence does the applicant wish to vary? (Days and hours: extended footprint etc)				

14. Conditions

Experience and training of the applicant *(state what qualification was completed and where it was completed)*

Does the applicant own, or operate, any other licensed premises? If yes, please elaborate.

What provision does the applicant intend to make for the sale and supply of:

Food *(describe type and range) please note that potato chips and nuts are not classed as substantial food items. Must be at least 3 types of substantial food options.*

Non-alcoholic beverages *(describe type and range)*

Low alcohol beverages *(describe type and range). Alcohol content must be between 1.15% - 2.5% abv*

To what extent, and where is drinking water freely available *(describe)*

If no access to mains water supply, what potable of water available? *(Free of Charge)*

What steps does the applicant intend to take to provide, help with, and information on alternative transport options from the premises?

What steps does the applicant have in place to prevent the sale and supply of alcohol to prohibited people? *(describe)*

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Any other steps the applicant has in place to promote the responsible consumption of alcohol (*describe*)

Other systems (including training systems), and staff in place (or to be in place) to ensure compliance with the Act (*describe*)

Notes

- This form must be accompanied by the prescribed fee.
- 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. 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).
- 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 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).
- Individual 'Privacy Act 1993 Consents' required for each Director forms available on request.

To assist in completing this application, please see Check List on front page

For Office Use Only

Date Received:		Invoice:		Amount:	
Date Paid:		Receipt No:		Debtor:	

Privacy Act 1993

- Personal information obtained in this application is primarily for establishing applicant identity and, when this application has been granted or declined, for administration, monitoring and enforcement.
- The information may be released to any inquirer about the application, the refusal of the application, or in relation to the exercise of the approval of this application.
- The information will be held by South Waikato District Council, Torphin Crescent, Tokoroa.
- The information may be provided to the Medical Officer of Health, Police and ARLA, and will be used for verifying and amending the Council's ownership and occupier records (the Rating Roll) and will be released in accordance with the Rating Powers Act 1988 and to Valuation New Zealand.
- You have the right to access the information and to request its correction.
- **Disclosure of Police Information:** Applicants for this On-Licence (for Premises) are required to sign the authorisation below. Failure to allow the Police to disclose this information may result in your application not being determined.
- **Authorisation:** The Police are required to report on this application. That report may include the release of any previous convictions you may have. You will receive a copy of that report.

Do you consent to the release of this information?	<input type="checkbox"/>	Yes				
Dated at		this		day of		20
Applicant's Signature						

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**FIRE AND EMERGENCY NEW ZEALAND
EVACUATION SCHEME PROCEDURE DATA**

Section 286 of the Sale and Supply of Alcohol Act 2012
Section 76 of the Fire and Emergency New Zealand Act 2017
Fire Safety and Evacuation of Buildings 1992

LICENSED PREMISES

Name: _____

Address: _____

Contact Person: _____

Phone: _____

Email: _____

Do you have an evacuation scheme approved by Fire and Emergency New Zealand as required by section 76 of the Fire and Emergency New Zealand Act 2017 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 tenants in the building? Yes/No

Are your exit routs and doors indicated by signs? Yes/No

DETAILS OF THE BUILDING'S FIRE PROTECTION – Please tick if you have the following:

Automatic fire sprinkler

Manual fire alarm

Hose reels

Portable fire extinguishers

Other

No of units _____

Automatic fire detection

Emergency lighting

Please tick where applicable:

I hereby declare that the above premises has an Evacuation Scheme/Procedure for the public safety which meets the requirements of Section 76 of the Fire and Emergency New Zealand Act 2017; or

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: _____

Public Notice
Of application for Renewal Variation On Licence
Section 101, Sale and Supply of Alcohol Act 2012
Form 7



The Secretary
 South Waikato District Licensing Committee
 C/- South Waikato District Council
 Private Bag 7
 TOKOROA 3444

Telephone (07) 885 0340
 Fax (07) 885 0718
 Email: Alcohol@southwaikato.govt.nz

Fee:
As prescribed

Applicant - This Notice will be advertised publicly on the South Waikato District Council website

1	Public Notice Renewal Variation On Licence Section 101, Sale and Supply of Alcohol Act 2012
2	<hr/> <hr/> <p><i>(Full name, address, and occupation of applicant)</i></p>
3	has made application to the District Licensing Committee at Tokoroa for the renewal variation of an On licence in respect of the premises
4	situated at <hr/> <p><i>(Full address of the Premises)</i></p>
5	and known as <hr/> <p><i>(Name of the Premises)</i></p>
6	The general nature of the business conducted (or to be conducted) under the licence is: <hr/> <p><i>(For example: hotel, tavern, restaurant, entertainment/night club)</i></p>
7	The days on which and the hours during which alcohol is (or is intended to be) sold under the licence are: <hr/> <hr/> <p><i>(Specify the days and hours alcohol will be sold)</i></p>
8	Variation sought as follows: <hr/>
9	<p>The application may be inspected during ordinary office hours at the offices of the South Waikato District Licensing Committee, Tokoroa, Council Building, Torphin Crescent, Tokoroa.</p> <p>Any person who is entitled to object and who wishes to object to the issue of the licence may, not later than 25 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 Private Bag 7, Tokoroa 3444.</p> <p>No objection to the issue 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.</p>
10	This is the first/second/only publication of this notice. The first publication was made on <hr/> <p><i>(Date)</i></p> <p><i>(Delete where not applicable)</i></p>

ONSITE NOTICE

Of application for Renewal Variation of On Licence
Section 101, Sale and Supply of Alcohol Act 2012



1	<p>ONSITE NOTICE Renewal Variation On Licence</p> <p>Section 101(a) Sale and Supply of Alcohol Act 2012</p>
2	<p>_____</p> <p>_____</p> <p><i>(Full name, address and occupation of applicant)</i></p>
3	has made application to the District Licensing Committee at Tokoroa for the renewal variation of an On licence in respect of the premises
4	<p>situated at _____</p> <p><i>(Full address of the Premises)</i></p>
5	<p>and known as _____</p> <p><i>(Name of the Premises)</i></p>
6	<p>The general nature of the business conducted (or to be conducted) under the licence is:</p> <p>_____</p> <p><i>(For example: hotel, tavern, restaurant, entertainment/night club)</i></p>
7	<p>The days on which and the hours during which alcohol is (or is intended to be) sold under the licence are:</p> <p>_____</p> <p>_____</p> <p><i>(Specify the days and hours alcohol will be sold)</i></p>
8	<p>Variation sought as follows:</p> <p>_____</p>
8	<p>The application may be inspected during ordinary office hours at the offices of the South Waikato District Licensing Committee, Tokoroa, Council Building, Torphin Crescent, Tokoroa.</p> <p>Any person who is entitled to object and who wishes to object to the issue of the licence may, not later than 25 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 Private Bag 7, Tokoroa 3444.</p> <p>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.</p>

IMPORTANT - PLEASE READ

Please fill the above form out and attach it to your premises so it can be read by persons walking past from the outside.

Once you have done this, please take a photograph of the notice and send it to:

Alcohol@southwaikato.govt.nz