Application for Renewal and/or Variation of



Off Licence (for Premises)

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

Is made in accordance with the particulars set out below.

Form 4

The Secretary

South Waikato District Licensing Committee

C/- South Waikato District Council Telephone (07) 885 0340
Private Bag 7 Fax (07) 885 0718

TOKOROA 3444

Email: Alcohol@southwaikato.govt.nz

Fee:

As prescribed

Check List for Renewal and/or Variation of Off Licence

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

The follo	owing must be included with application:	(tick)
1.	Application Fees - please contact the alcohol Licensing Inspector if unsure.	
2.	Application form, with all sections completed, signed, and dated.	
3.	Certificate of Incorporation/Memorandum of Association (if applicable),	
4.	Partnership Agreement (if applicable),	
5.	Photo or artist's impression of outside of premises.	
6.	Map showing location of premises.	
7.	Detail A4 scale map of the interior of the premises showing: • The areas used for sale of alcohol • Areas that are to be Restricted Area or Supervised Area (if applicable) • All principal entrances • CCTV placement and security lighting (if applicable)	
8.	Written statement from the owner of the building consenting to the applicant selling alcohol on the premises. Note the consent must be for the same party as detailed in the applicant section of this form.	
9.	A Social Responsibility Policy and details in an implementation plan how the policy is put into practice,	
10.	Public Notice - notice is to be completed and attached for checking prior to being published in the South Waikato News.	
11.	Copies of each Manager's Certificate for those appointed to the business.	
12.	Supporting information if a variation is being sought.	
13.	Copy of Current Licence	
1.	Details of Applicant(s)	
	gal Name or Names n Licence:	
Whethe	r licence already held for premises or conveyance concerned?	
	Yes	0
Address	s of Applicant:	

- 2 - Application for Renewal Off-Licence

Postal Address:				
Name of Contact				
Person:				
Contact Details:	Telephone:		Mobile	
	Email:			
Preferred Method of Cont	act:			
2. Status of App	plicant			
Natural Person(s) (an ord	inary person in their priv	/ate	Private Company	
capacity)				
Licensing Trust or Comm	unity Trust		Trustee	
Public Company			Partnership	
Club			Local Authority	
Body Corporate			Department of State	
3. Natural Perso	on Details			
Full Legal Name:				
Any Aliases:				
Residential Address:				
Sex:				
Occupation:				
Date of Birth:		Place of Birt	h:	
Internet Site:				
Postal Address:				
Contact Details:	Telephone:		Mobile:	
	Fax:		Email:	
Preferred Method of Cont	act:			
4. Partnership D	Details			
Full Legal Name:				
Address:				
Contact Details:	Telephone:		Mobile:	
	Email:		•	
Preferred Method of Cont				
Full Legal Name:				
Address:				
Contact Details:	Telephone:		Mobile:	
	Email:		·	
Preferred Method of Cont	act:			
5. For a compar	ny <i>(incorporated u</i> r Private company	<i>Inder the Comp</i> Full legal part	panies Act 1993 or equivalent foreign les of Director/s & Shareholders	
Date of Incorporation:		an logal nam	So of Birodiano d offdicholders	
Place of Incorporation:				
State the full details of ea	oh diractor:			

- 3 - Application for Renewal Off-Licence

Name	Address	Date of Birt	h	Place of Birth	Designation
If applicant is a priva	ate company, state if:				
	Authorise Cap	oital		Pa	nid-up Capital
State the full details	of each person who he	olds any shares	issued by	the company	į.
	Shareholder 1	Sharehold	er 2	Shareholder 3	Shareholder 4
Name:					
Address:					
Date of Birth:					
Place Birth:					
Designation:					
Value of Shares:					
Contact Details for o	organisation other than	natural person			
Postal Address: (for	service of documents)				
Daytime Contact:					
Telephone:			Mobile:		
Fax:			Email:		
Preferred Method of	Contact:				
6. Criminal	Convictions				
Does the applicant h	nave any criminal conv	ictions?			
	_	•		•	contained in Part 6, and
offences to which the	e Criminal Records (C	Clean Slate) Act	2004 appli		
16	Yes		<i>«</i>	No	#f d.
ir yes, piease state t	ne nature of the offend	ce, date of the d	orrence and	I conviction and penalty	surrerea:
7. Details of Premises					
Address of premises	3:				
Trading or other nan	ne:				
	own the licensed premi	ises:		Yes	No
	ame and address of ov				
Name:					
Address:					
Tenure: (State wheth	her held as leasehold,	or under tenan	cy agreem	ent or licence)	

- 4 - Application for Renewal Off-Licence

Type of Premises: (Tick		Dawla Ctarr					
Hotel		Bottle Store	05	Grocer			
Tavern		Complementary Se		Oth	ner		
Jneconomic Sec.34		- 11	Remote Sel)		
Premises on which princ	cipai business	is the manufacture	oi alconoi (e.g.,	wiriery, brewei	<i>y)</i>		
O Fudous							
8. Endorseme							
State (by type) every en	ndorsement sou	ight or sought to be	renewed (e.g.,	Section 40 Rer	note Seller)		
9. Details of M	lanagers						
Name	Date of Bi	Date of Birth		Certificate Number		Certificate Expiry	
10. Business De	etails						
10. Business Do		ose of the business	5?	Yes		No	
	e principal purp		5?	Yes		No	
Is the sale of alcohol the	e principal purp		5?	Yes		No	
Is the sale of alcohol the	e principal purp		5?	Yes		No	
Is the sale of alcohol the	e principal purp	ne business?			oods other th		
Is the sale of alcohol the If no, what is the princip Whether applicant is en	e principal purp al purpose of th gaged, or inten	ne business?	I, in the sale or	supply of any g		an alcohol and	
Is the sale of alcohol the	e principal purp pal purpose of the gaged, or intent of any services	ne business?	I, in the sale or	supply of any g	pply of alcoho	an alcohol and	
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As a SUPERVISED AREA (where a person under 18, who is accompanied by a parent or legal guardian, may be present and supplied alcohol by the parent or guardian)
12. Variation
List any variation sought (e.g., change of hours or change to any current conditions)
13. Additional Information
Does the applicant own or operate any other licensed premises? If yes, please list
What experience and training does applicant have?
What steps does the applicant take to prevent the sale and supply of alcohol to prohibited people (i.e., minors,
intoxicated persons) [Describe]
What other steps does the applicant take to promote the responsible consumption of alcohol (e.g., prominently display an
promote low and non-alcoholic options) [Describe]
What kind or kinds of alcohol does the applicant sell or deliver under the licence?
State all sensitive sites (e.g., childcare centres, schools, churches etc) within one kilometre of the licensed premises?
Has the applicant or applicant's business appeared before the Alcohol Regulatory and Licensing Authority (ARLA) for any reason during the renewal period? If yes, please provide details
any reason at mig the remaining period. If you, produce provide details
Has your business been subject to a Police controlled purchase operation during the renewal period and if so, when, and
what were the results?

- 6 -Application for Renewal Off-Licence

Have you had any complain state details:	ints from the neighbours <i>(in</i>	cluding confirmed no	oise complaints)	that you are awar	re of? If yes,
То	assist in completing this ap	plication, please see	Checklist on fro	ont page	
For Office Use Only	,				
Date Received:	Invoice:		Amoun	t:	
Debtor:		Receipt No:			
Notes					
This form must be a	accompanied by the prescribed	fee			
	ays after filing this application v		ng Committee (or 1	IO working days if it is	s an annlicatio
for renewal), the ap	plicant must give public notice of Supply of Alcohol Regulation	of it in form 7. The notic	e must be given in	n compliance with re	
the applicant must of	of a conveyance, within 10 wo ensure that notice of this applic cation relates (unless the Secr so).	cation in form 7 is attac	hed in a conspicu	ous place on or adja	acent to the sit
Privacy Act 1993					
	ained in this application is primadinistration, monitoring and e		plicant identity an	d, when this applicat	tion has been
The information may be r the approval of this applic	released to any inquirer about to cation.	he application, the refu	sal of the applicat	ion, or in relation to t	the exercise of
The information will be here.	eld by South Waikato District C	ouncil, Torphin Cresce	nt, 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 acc	ess the information and to requ	est its correction.			
	mation: Applicants for this Off- close this information may resul	·	-	-	below. Failure
	e are required to report on this a receive a copy of that report.	application. That report	may include the r	release of any previo	ous convictions
Do you consent to the rele	ase of this information?	Yes	i	No)

Day of

20

Dated at

Applicant's Signature:

This

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

	LIC	ENSED PREMISES	
	Name:		
	Address:		
	Contact Person:		
	Phone:		
	Email:		
	Do you have an evacuation scheme approved by Fir as required by section 76 of the Fire and Emergency		Yes/No
	Date approved:		
	Do you have an evacuation procedure as required b	v Fire Safety and Evacuation of Rui	ldings
	Regulations 1992?	y File Salety and Evacuation of Bui	_
	Date implemented:		Yes/No
	What is the maximum number of people that the bu	uilding 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 - PIE	ase tick if you have the following:	
	Automatic fire sprinkler	Automatic fire detection	
	Manual fire alarm Hose reels	Emergency lighting	
		nits	
	Other		
	Please tick where applicable:		
	I hereby declare that the above premises has an Eva		public safety which meets the
	requirements of Section 76 of the Fire and Emerger The building, by reason of its current use, does not	require such a scheme, or that the	building is exempt from having to meet
ш	the requirements for such a scheme.		-
	Name:	Designation:	
	Signature:	Date:	

Public Notice

Of application for Renewal and/or Variation of Off-Licence Section 101, Sale and Supply of Alcohol Act 2012
Form 7



Applicant - this form should be completed and forwarded directly to the South Waikato News - please print only what is inside the box

1	Public Notice Renewal and/or Variation Off-Licence Section 101, Sale and Supply of Alcohol Act 2012
2	
	(Full name, address and occupation of applicant)
3	has made application to the District Licensing Committee at Tokoroa for the renewal and/or variation of an Off-licence in respect of the premises
4	situated at
	(Full address of the Premises)
5	and known as
	(Name of the Premises)
6	The general nature of the business conducted (or to be conducted) under the licence is
	(For example: hotel, tavern, grocery store, supermarket, remote seller, other)
7	The days on which and the hours during which alcohol is (or is intended to be) sold under the licence are
	(Specify the days and hours alcohol will be sold)
8	Variation sought as follows:
8	variation sought as follows.
	(Please specify)
9	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.
	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.
	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.
10	This is the first/second/only publication of this notice. The first publication was made on
	(Date)
	(Delete where not applicable)

ONSITE NOTICE

Of application for Renewal and/or Variation of Off-Licence Section 101, Sale and Supply of Alcohol Act 2012



1	ONSITE NOTICE
'	Renewal and/or Variation Off-Licence
	OII-LICENCE
	Section 101(a) Sale and Supply of Alcohol Act 2012
2	
	(Full name, address and occupation of applicant)
3	has made application to the District Licensing Committee at Tokoroa for the renewal and/or variation of an Off-Licence in respect of the premises
4	situated at
	(Full address of the Premises)
5	and known as
	(Name of the Premises)
	The general nature of the business conducted (or to be conducted) under the licence is
6	(For example: hotel, tavern, grocery store, supermarkets, remote seller, other)
7	The days on which and the hours during which alcohol is (or is intended to be) sold under the licence are
	(Specify the days and hours alcohol will be sold)
8	Variation sought as follows:
	(Please specify)
9	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.
	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.
	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.

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 either: -

Alcohol@southwaikato.govt.nz or Julie.smale@southwaikato.govt.nz