



Application for New Off-Licence or Renewal of Off-Licence

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

To: The Secretary
Clutha District Licensing Committee
PO Box 25
BALCLUTHA 9240

Application for Off-Licence or renewal of Off-Licence (*please circle one*) is made in accordance with the particulars set out below.

Endorsements

(state by type every endorsement sought or sought to be renewed)

.....

Is a licence already held for this premises or conveyance: (*please circle one*) Yes / No

If yes, please provide details of licence:

.....

Details of applicant

Full name or names to be on licence

.....

.....

Daytime Phone No: **Email:**

Postal address for service of documents

.....

.....

Applicant Status (tick appropriate box)

Natural Person		Licensing or Community Trust	
Trustee		Territorial Local Authority	
Limited Partnership		Partnership	
Government Department or instrument of Crown		Manager under the Protection of Personal and Property Rights Act 1988	
Body Corporate to which Section 28(1)(b) of the Act applies		A board, organisation or other body to which Section 28(1)(c) of the Act applies	

Contact details for Applicant who is a Natural Person

Name: Alias:
Residential Address:
Gender: Occupation:
Date of Birth: Place of Birth:
Preferred daytime contact number: Email address:
Website:

Contact details for Applicant that is not a Natural Person

Name:
Phone Number: Mobile Number:
Fax Number: Email:

Details of Business *(describe principal business and any other businesses)*

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.....

Details of Criminal Convictions *(state all 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)*

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.....

Further details where applicant is a company

Full Legal Names of each director Name:

Name:
Name:

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

Name:
Address:
Date of Birth: Place of Birth:
Designation:

Name:
Address:
Date of Birth: Place of Birth:
Designation:

Name:

Address:

Date of Birth: Place of Birth:

Designation:

Further details where applicant is a private company (tick one box)

Authorised Capital		Paid Up Capital	
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Name:

Address:

Date of Birth: Place of Birth:

Designation:

Face value of shares held:

Name:

Address:

Date of Birth: Place of Birth:

Designation:

Face value of shares held:

Name:

Address:

Date of Birth: Place of Birth:

Designation:

Face value of shares held:

Further details where applicant is a partnership

Name:

Address:

Date of Birth: Place of Birth:

Name:

Address:

Date of Birth: Place of Birth:

Name:

Address:

Date of Birth: Place of Birth:

Signature of each partner:

Details of Premises (if not a conveyance):

Address of proposed licensed premises:

Proposed trading name for premises: *(if any)*.....

Does the applicant own the proposed licensed premises? *(please circle one)* Yes / No

If no please provide the following details:

Full name and address of owner:

Tenure of the premises that the applicant will have:

Is the licence sought conditional on the completion of building work? Yes / No

If yes please provide details:

Details of conveyance

Kind: Tenure:

If not owned by applicant, full legal name and address of owner:

.....

Any Registration Number:

Any Home Base Address:

Any name used or proposed for conveyance:

Is the licence sought conditional on the completion of building work? Yes / No

If yes please provide details:

.....

Details of Managers

Full legal name:

Number: Expiry date of manager's certificate:

Full legal name:

Number: Expiry date of manager's certificate:

Full legal name:

Number: Expiry date of manager's certificate:

Details of business

Nature of business to be conducted:

Is the sale of alcohol the principal purpose of business? Yes / No

If no state intended principal purpose of 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? Yes / No

If yes state the nature of those other goods or services:

Which days and which hours are proposed for the sale of alcohol?

.....

(In the case only of a BYO restaurant) Does the applicant wish to have the licence endorsed under Section 37 of the Act? Yes / No

Conditions

What experience and training does the applicant have?

.....

.....

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

Food:

Non-alcoholic beverages:

Low-alcohol beverages:

To what extent and where will drinking-water be freely available to patrons:

.....

If no access to mains water supply, potability of water intended to be available: (describe)

.....

What steps does the applicant propose to take to provide assistance with or information about alternative forms of transport from the licensed premises?

.....

What steps does the applicant propose to take to ensure that the requirements of the Act in relation to the sale of alcohol to prohibited persons are observed?

.....

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

Are any changes sought to the present conditions of the licence? Yes / No

If yes what changes are being sought?

Attachments (if 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 each area to be designated as a supervised area or restricted area; and indicating whether supervised or restricted area; and the principal entrance.

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 indicated whether supervised or restricted area.

For body corporate applicant, copy of Certificate of Incorporation (or equivalent document).

Additional questions

The granting or renewal of this application will not decrease the amenity or good order of the area by more than a minor extent because we:

.....
.....

The design and layout of our premises complies with the Act because:

.....

The granting or renewal of this application will contribute to the Object of the Act by:

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.....

Dated at on the of 20

Signature of Applicant:

NOTES

1. This form 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).