

Application for Off-Licence or renewal of Off-Licence (Form 4)

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

Send or deliver your application to:		The Secretary, District Licensing Committee Manawatu District Council Private Bag 10 001, Feilding 4743 135 Manchester Street, Feilding 4702				
For enquiries phone	e 06 323 00	000 fa	ax 06 323 0822	email public@r	ndc.govt.nz	
Application type						
Are you applying for a new li or a licence renewal?	cence	New	Renewal			
Is a licence already held for this premises?		Yes	☐ No			
If yes - state which type of licence						
Americant dataile						
Applicant details						
Full name(s) to be on the licence						
Contact person						
Contact postal address						
Contact numbers						
	Phone		Mok	oile	Fax	
Email address						
Preferred means for formal correspondence		Mail	Email		Fax	
•						
Details of premises						
Proposed trading name						
Premises address						

Details of premises (cont) Type of premises Supermarket Class 1 Club Winery cellar doors Hotel Grocery store Tavern Class 2 Club Bottle store Class 3 Club Remote sale Other premises please specify What part of the premises (of any) does the applicant intend should be designated as: A restricted area? A supervised area? Undesignated area? (specify reason) Is the licence sought conditional on Yes No construction or completion of building work? Does the licensee own the proposed Yes licensed premises? If no - what is the full name and address of the owner? What form of tenure of the premises does the applicant have (including term of tenure)? Alcohol trading hours On which days and during which hours does the applicant propose to sell or supply alcohol under the licence? Day of week Hours from to from to from to from to from to

For renewal applications		
Do you propose to change your current licensed hours?	Please specify your current licensed hours below	lo
Day of week	Hours	
	from	to

Endorsements					
Tick the type of endorsemer or sought to be renewed	nt sought		Auctioneer		Remote seller of alcohol
Further applicant d	letails				
Status of applicant Individual person Private Company Dublic Company	Part	y Corporat nership er (please specif	CE (state authority)		
Further details where the ap Male Female Place and date of birth Maiden name (if applicable) Aliases	plicant is an ir	dividual pe	erson		
Usual residential address Occupation					
Further details where the ap	plicant is a bo	dy corpora	te		
Incorporation details Date of incorporation Place of incorporation	Authori	sed capital		☐ Pa	id-up capital
Further details where the ap	plicant is a pri	vate comp	any		
Incorporation details Date of incorporation Place of incorporation Capital					
Full details of each director,	secretary and (each perso	n who holds sh	nares issu	led by the company
Address Position held					
Place and date of birth					
Designation Face values of shares held					
Name					

Address

Position held

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Further applicant details (cont)

Place and date of birth	
Designation	
Face values of shares held	
Name	
Address	
Position held	
Place and date of birth	
Designation	
Face values of shares held	
Name	
Address	
Position held	
Place and date of birth	
Designation	
Face values of shares held	
Further details where the ap	oplicant is a public company
Incorporation details	Authorised capital Paid-up capital
Date of incorporation	
Place of incorporation	
Capital	
Full details of each director, particular class of shares iss	secretary and each person who holds 20 percent or more of the shares, or of any ued by the company
Name	
Address	
Position held	
Place and date of birth	
Name	
Address	
Position held	
Place and date of birth	
Name	
Address	
Position held	
Place and date of birth	
Name	
Address	
Position held	

Further applicant details (cont)

Place and date of birth								
Further details where the app	olicant is a part	nership						
Full details of each partner								
Name								
Address								
Signature								
Place and date of birth								
Name								
Address								
Signature								
Place and date of birth								
Name								
Address								
Signature								
Place and date of birth								
contained in Part 6, and offer secretaries, shareholders and								
Business details								
Describe the principal busine business?	ss to be condu	cted on the	e premises if	the off-licen	ce is g	ranted a	and any	other
Is the sale of alcohol intended	d to be the prir	ncipal purp	ose of the bu	siness?		Yes		No
Does the applicant seek the lof an auctioneer?	cence in conn	ection with	the busines	S		Yes		No
Is the applicant engaged in o any goods other than alcoho than those directly related to	l or food, or in	the provisi	on of any ser	vices other		Yes		No
If yes: What is the nature of th	nose other goo	ds or servi	ces?					

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Certified managers details

How many certified managers

When alcohol is being sold or supplied to the public a certified manager (appointed under Section 217 (of the Sale and Supply of Alcohol Act 2012) must be on duty at all times.

have been or will be employed?	
Manager details	
Name	
Address	
Certificate number	Expiry date
Manager details	
Name	
Address	
Certificate number	Expiry date
Manager details	
Name	
Address	
Certificate number	Expiry date
Manager details	
Name	
Address	
Certificate number	Expiry date
Conditions	
What systems (including Sale and Supply of Alcoh	staff training) does the applicant propose to put in place to ensure compliance with the ol Act?
State the experience and	training of applicant
What steps does the app	licant propose to take in regard to promoting responsible consumption of alcohol?
For renewal licences	
Are there any other chan of the licence?	ges sought to the present conditions Yes Please specify below No

Conditions (cont)	
What are the changes sought?	
What are the full reasons for the changes	sought?
Amenity and good order det	tails
	the information required and answer the questions listed below.
Provide a scale floor plan which also show list of facilities, CCTV placement and secu	vs the design and layout of the premises. Include seating and tables, a urity lighting.
The reporting agencies must consider the	effects the issue of the licence will have on amenity and good order.
Advise proximity of all childcare centres, s	schools and churches within 500m - a site plan would assist.
How many residential neighbours would y	ou have within 50 metres?
Internal layout Can the entire premises he	e seen by the cashier? Where there are blind spots, are there mirrors o
CCTV installed? Is the internal lighting insi	
Are there windows providing good visibilit	ry into and from the premises and the street?
December Polisian and decide the accordance dis	
Does the lighting outside the premises dis	scourage loitering? Does the lighting allow staff to check ID's etc?
What security systems do you have and st	ate location (outdoor lighting, indoor/outdoor CCTV, other?)
Will you amploy cocyrity staff and whan	vill thay be used?
Will you employ security staff and when w	nii triey be useu!

Amenity and good order details (cont) How many security staff hold a Certificate of Approval and formal registration or qualification? If so what? What outside advertising involving alcohol will you be doing? Design drawings of your advertising would be of assistance. Newspaper/magazine Shop windows On your premises - roof/other Street/footpath signs Systems and staff training Are you involved in any mystery shopper/pseudo CPO programmes? What till prompt systems do you have regarding age checks? What staff training is provided with regard to Sale of Alcohol compliance and Host Responsibility practices explain content, duration and how often this training is provided. Please provide copies of any written material you supply to staff regarding staff training (attach to this form). Business and premises Is this your first licensed premises? If so, please submit a copy of your financial plan? What percentage of the front windows will be clear and transparent? What is the target market for the business? What is your policy regarding pricing and promotions?

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

Steps taken to ensure the sale, supply and consumption of alcohol will be undertaken safely and responsibly:

Amenity	and good order details (cont)							
Steps taken t	Steps taken to minimise the harm caused by the excessive or inappropriate consumption of alcohol:							
For renewal I	liconace							
	d any complaints from the neighbours (including confirmed noise complaints) that you a	aro awaro						
of?	a any complaints from the heighbours (including committee hoise complaints) that you a	are aware						
Has your bus	iness been subject to a Police Controlled Purchase Operation (CPO)? If so, what were th	ne results?						
Have you or	your business ever appeared before the Alcohol Regulatory and Licensing Authority? If s	o, for what						
reason?								
Attachm	ents							
	e that you have ticked all the boxes below before submitting the application to the Mana	awatu						
	sing Committee.							
Applicant check		Officer check						
	The prescribed fee is attached (this will be determined by a licensing inspector once your application has been assessed):	Yes / No						
	Premises type weighting							
	Latest Trading Time weighting weighting							
	No of Enforcements weighting							
	Total weighting Fee category Fee \$ Fee \$							
	Completed application form plus all documentation	Yes / No						
	Details of managers to be employed (including copies of managers certificates)	Yes / No						

requested)

Yes / No

Yes / No

Yes / No

Yes / No

from the premises (not required for renewals)

An example page from your duty manager register (renewal only)

Building Certificate of Compliance (not required for renewals)

Planning Certificate (not required for renewals unless a variation to conditions

Building owner's permission in writing consenting to the applicant selling alcohol

Attachments (cont)

Applicant check		Officer check
	For a body corporate - a copy of the Certificate of Incorporation (not required for renewals unless changes have occurred since the last issue or renewal)	Yes / No
	For a partnership – a copy of the partnership agreement (not required for renewal unless changes have occurred since the last issue or renewal)	Yes / No
	A photo or artist's impression of the outside of the premises (not required for renewal unless changes have occurred since the last issue or renewal)	Yes / No
	 Detailed floor plan showing: those parts of the premises that are to be used for the sale and supply of alcohol each area to be designated as a supervised area or restricted area the principal entrance or principal entrances any proposed permitted ares for the display and promotion of alcohol, and any proposed sub-areas (ref section 113 of the Act) 	Yes / No
	A verified statement of annual sales revenue or projected annual sales revenues required by regulation 12 or 13 of the Sale and Supply of Alcohol Regulations 2013. The statement is to detail projected gross sales revenue (excl GST) of food products, household items, alcohol, tobacco, convenience foods and other revenue (excl. NZ Lotteries)	Yes / No
	A copy of your host responsibility policy and details in an implementation plan how the policy will be put into practice	Yes / No
	A location map of the premises	Yes / No
	A location map highlighting proximity to sensitive premises such as schools, hospitals, churches	Yes / No
	A report detailing how the proposed business will mitigate any risk which could negatively impact the local community	Yes / No
	A business case. (This should detail the operation of the business including target market, licensee experience and licensee involvement, staff training and any other matter which may assist in determining the application.)	Yes / No
	CPTED site assessment (if completed by applicant as part of the amenity and good order details)	Yes / No
	Public Notice (newspaper) – the notice must be completed and attached for checking before being placed in the newspaper	Yes / No
	Public Notice (site notice) – the notice must be attached where it can be conveniently read by a person outside the premises	Yes / No
	Fire evacuation statement	Yes / No
	A letter of authorisation if you are using a consultant	Yes / No

Applicants declaration

I declare that to the best of my knowledge and belief the information provided in this application form and in any supporting documentation is true and correct.							
	Name (_I	orint clearly)		Title			
	Sig	gnature		Date			
		Place where dated and	signed eg Feilding				
	ease note - your application, e Council's decision-making		ion, will be available to the p	ublic and media as part of			
Fo	or your informatior	1					
1.	This form must be accomp	anied by the prescribed fee.					
2.	Within 20 working days after days if it is an application for	er filing this application with or renewal), the applicant mu h regulation 36, 37, or 38 of	the District Licensing Commust give public notice of it in the Sale and Supply of Alcoh	form 7. The notice must			
3.	Licensing Committee, the a conspicuous place on or ac	applicant must ensure that n djacent to the site to which t	days after filing this application otice of this application in fo his application relates (unles able or unreasonable to do s	rm 7 is attached in a s the Secretary of the			
	ce your application is comp pector. Please telephone 0		for a pre-lodgement meetin	g with the Licencing			
Foi	r office use only						
Vet	ted by	Council O	fficer				
Fee	e paid						
Red	ceipt number						