P 06 327 0099 | 0800 422 522 (24 hrs) E info@rangitikei.govt.nz 46 High Street, Private Bag 1102, Marton 4741

To: The Secretary District Licensing Committee At Marton		DATE RECEI /	
Application for an on licence or ren set out below:	ewal of	on licence is made in accordance with	h the deta
On Licence On Licence	Renewa	l Current Expiry Date	
ENDORSEMENTS			
State by type every endorsement so	ought or	sought to be renewed	
· · · · · · · · · · · · · · · · · · ·			
DETAILS OF APPLICANT(S)			
		се	
		ce	
Full legal name or names to be on t	he licen		
Full legal name or names to be on t	he licen	conveyance concerned?	
Full legal name or names to be on t	he licen		
Full legal name or names to be on t	he licen ises or c	conveyance concerned?	
Full legal name or names to be on t	he licen ises or c	conveyance concerned?	
Full legal name or names to be on t Is the licence already held for prem	ises or c	conveyance concerned?	
Full legal name or names to be on t Is the licence already held for prem If yes, state the kind of licence Status of applicant (<i>tick appropriate</i>	ises or c	conveyance concerned?	
Full legal name or names to be on t Is the licence already held for prem If yes, state the kind of licence Status of applicant (<i>tick appropriate</i> Natural Person	he licen ises or c	conveyance concerned?	
Full legal name or names to be on t Is the licence already held for prem If yes, state the kind of licence Status of applicant (<i>tick appropriate</i> Natural Person Trustee	he licen ises or c e box):	conveyance concerned? Yes No Licensing or Community Trust	
Full legal name or names to be on t Is the licence already held for prem If yes, state the kind of licence Status of applicant (<i>tick appropriate</i> Natural Person Trustee Limited Partnership	be licen ises or c	Conveyance concerned? Yes No Licensing or Community Trust Territorial Local Authority	
Full legal name or names to be on t Is the licence already held for prem If yes, state the kind of licence Status of applicant (<i>tick appropriate</i> Natural Person Trustee Limited Partnership Government Department or	ises or c	conveyance concerned? Yes No Licensing or Community Trust Territorial Local Authority Partnership	
Full legal name or names to be on t Is the licence already held for prem If yes, state the kind of licence Status of applicant (<i>tick appropriate</i> Natural Person Trustee Limited Partnership Government Department or instrument of crown	ises or c	Conveyance concerned? Yes No Licensing or Community Trust Territorial Local Authority Partnership Manager under the Protection of Personal and Property Rights Act 1988	
Full legal name or names to be on t	ises or c	Conveyance concerned? Yes No Licensing or Community Trust Territorial Local Authority Partnership Manager under the Protection of Personal and Property Rights Act 1988 A board, organisation or other body	
Is the licence already held for prem	ises or c	Conveyance concerned? Yes No Licensing or Community Trust Territorial Local Authority Partnership Manager under the Protection of Personal and Property Rights Act 1988	



Application for On Licence or renewal of On Licence

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POSTAL ADDRESS

FULL postal address for service of documents

For applicant(s) that is a natural person or persons, please provide the following details

for each person:

CONTACT DETAILS (NATURAL PERS	SON)	
Full level norme		
Full legal name		
Any aliases		
Residential address		
Gender	🗖 Male	Female
Occupation		
Date of birth	Place of birth	า
Internet site(s)		
Email address		
Daytime contact phone number(s)		
Preferred mode of contact		
If there is more than 1 natural person ple	ease include their deta	ils or a separate sheet.

For an applicant that is a body corporate:

INCORPORATED AUTHORITY

Authority under which incorporated
Date of incorporation
Place of incorporation



For applicant that is not a natural person, or persons, details of the contact person:

CONTACT DETAILS (NOT A NATURAL PERSON)

Name
Contact phone number(s)
ax number
nternet site(s)
Email address
Preferred mode of contact

COMPANY DETAILS

For a company:	
Full legal names of each directo	or
Name	
Details or each person who ho	lds 20% or more shares, or any particular class or shares
issued by the company:	
Name	
	Place of birth
Designation	
Name	
Date of birth	Place of birth
Designation	



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Application for On Licence or renewal of On Licence

Name	
Address	
Date of birth	Place of birth
Designation	
For a private company	
Authorised Capital	Paid Up Capital
Name	
Date of birth	Place of birth
Face value of shares held	
Name	
Date of birth	Place of birth
Name	
Date of birth	
Face value of shares held	



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For a partnership:
PARTNER 1
Full legal name
Any aliases
Residential address
Email address
Contact phone number(s)
Fax number
Signature
PARTNER 2
Full legal name
Any aliases
Residential address
Email address
Contact phone number(s)
Fax number
Signature
PARTNER 3
Full legal name
Any aliases
Residential address
Email address
Contact phone number(s)
Fax number
Signature
If there are more than 3 partners please include their details or a separate sheet.



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BUSINESS DETAILS

Describe principal business, any other businesses

CRIMINAL CONVICTIONS

Has the applicant been convicted of any offence?			
	Yes	🔲 No	

If yes, what are the details of each offence?

Please provide details of all convictions (other than convictions for offences to which the Criminal Records (Clean Slate) Act 2004 and offences against provisions of the Land Transport Act 1998 not contained in Part 6 applies).

For minor convictions, the Rangitikei District Council Liquor Licensing Policy states that the general guidelines will be that the applicant has observed a stand down period of 2 years or more.

DETAILS OF PREMISES (IF NOT A CONVEYANCE)

Address	

Any name, trading name, building name (if applicable)

If premises are not owned by the applicant:

Tenure

Leasehold	Tenancy agreement	Licence
Full legal name of owner_	 	
Address of owner		



RANGITĪKEI DISTRICT COUNCIL Application for On Licence or

renewal of On Licence

Is a licence sought con	ditional up	on construe	ction or	complet	ion of the	e pren	nises?
				Yes			No
f yes, please state deta	ails						
DETAILS OF CON	VEYANC	Е.					
Kind of conveyance (eg	g: ship, rail	way carria <u>c</u>	ge, bus	etc)			
If not owned by the ap	nlicanti						
Tenure	-						
Charter		Lease				Lice	nce
Full legal name of own	er						
Address of owner							
<u>-</u>							
Registration number (ij	f applicable	e)					
Address of home base							
Proposed trading name	e for conve	yance (<i>if a</i>	ny)				
Is the licence sought co	nditional	inon const	ruction	or comr	letion of	fthec	onvevance?
is the neence sought co							
If yes, please state deta	aile						-
n yes, please state det	uns						
DETAILS OF MAN							
For each manager or p	roposed m	nanager:					
MANAGER 1							
Full legal name							
Managers Certificate N							
-							



Application for On Licence or renewal of On Licence

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MANAGER 2

Full legal name	 	
Managers Certificate Number	 	
Certificate expiry date	 	

MANAGER 3

Full legal name _____

Managers Certificate Number _____

Certificate expiry date

If there are more than 3 managers please include their details or a separate sheet.

BUSINESS DETAILS

General nature of the business to be conducted by the applicant in the premises if the

licence is granted (eg: hotel, tavern, restaurant, entertainment/nightclub)

Is the sale of liquor intended to be the princi	pal purpose of the Q Yes	business?	
If no, what is intended to be the principal purpose of the business?			
Are you going to be engaged or intending to	be engaged, in the	e 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 f	ood?		
	C Yes	D No	
If yes, please detail the nature of the other g	oods or services _		



On which days	and during wh	ich hours does the appli	cant intend to sell	liquor under the
licence?				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				
In the case only section 37 of th	-	aurant, do you wish to h		dorsed under
CONDITION				
Please detail a _l	oplicant experie	ence and training		
Please detail th	ne food (type a	nd range) intended to b	e available for purc	chase
		c beverages (type and r		be available for
		peverages (type and rar		e available for



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To what extent, and where is drinking water intended to be freely available to patrons

If there is no access to mains water supply please describe the portability of water intended to be available

Please detail (type and range) the steps that will be taken to help with and information about transport options from the premises

Please details the steps that will be proposed to prevent the sale and supply of alcohol to prohibited people_____

Any other steps that you propose to promote the responsible consumption of alcohol

Other systems (including training systems), and staff in place (or to be in place) for compliance with the Act _____

Any changes sought to the present conditions of the licence?

	Yes	🖬 No	
If yes, what changes are being sought?			



ATTACHMENTS (IF NOT A CO	NVEYANCE)	
Copy of planning consent	C Yes	🖵 No
Copies of all relevant building certificate	es/consents	
	🖵 Yes	🖵 No
Floor plan showing:		
Each area to be designated as a s	supervised area or res	tricted area, and indicating
whether supervised or restricted	l area; and	
	C Yes	🖵 No
The principal entrance		
	🗖 Yes	🗖 No
For body corporate applicant, copy of in	corporation (or equiv	alent document)
ATTACHMENTS (IF CONVEYAR	NCE)	
Floor plan showing:		
Each area to be designated as a s	supervised area or res	tricted area, and indicating
whether supervised or restricted	l area; and	
	Tes	No
For body corporate applicant, copy of in	corporation (or equiv	alent document)
	Yes	No No

All applicants need to fill in the questions below under Section 4(3) of the Act as part of your application for a new/renewal or variation of existing licence. (Attach separate sheet(s) with the answers if applicable)

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



Application for On Licence or renewal of On Licence

The granting, or renew	al, of this ap	oplication w	ill contribute to the O	bject of the Act by
Dated at	this		day of	20
Signature of Applicant				
		Receipt		Date

Notes:

For New Licence Applications

- 1. You must apply for the Planning and Building Compliance Certificate and supply the granted Certificate before submitting your new on licence application.
- 2. You must supply background of your history in the hospitality industry.

For New and Renewal Licence Applications

- 3. It is your responsibility to provide the required information at the time of submitting your application; an incomplete application will not be accepted.
- 4. You must supply a copy of your Menu.
 - Please supply a list of non-alcoholic and low alcoholic beverages on a separate sheet of paper
- 5. Please supply a copy of your Management Plan or Staff Training Record (if you do not have one you need to start putting one in place as the Inspector will need to see evidence of this at your next renewal).
- 6. Please supply a copy of your Host Responsibility Policy, up to date floor plans showing intended designations, photo ID and certificate of incorporation.
- 7. 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 much give public notice of it in form 7. The notice much be given in compliance with regulation 36. 37. Or 38 of the Sale and Supply of Alcohol Regulations 2013 (whichever applies to this application)
- 8. Except in case of a conveyance, within 10 working days after filing this application with the District Licensing Committee, the applicant much ensure that notice of this application in form 7 is attached in a conspicuous place on or adjacent to the site to which the application relates (unless the Secretary of the District Licensing Committee agrees that it is impracticable or unreasonable to do so).
- 9. This application form must be accompanied by the prescribed fee.



PUBLIC NOTICE OF APPLICATION FOR ON LICENCE, OFF LICENCE OR CLUB LICENCE (OR APPLICATION FOR VARIATION OF CONDITIONS OF ON LICENCE, OFF LICENCE OR CLUB LICENCE)

Form 7, Sections 101, Sale and Supply of Alcohol Act 2012

DETAILS OF APPLICANT

Full legal name Address _____ Occupation has made an application to the District Licensing Committee at Rangitikei for the issue / renewal / variations of conditions (circle one) of a (specify the type of licence) In respects of the premises situated at: (address) Or the: ____ known as _____ (specify type of conveyance) The general nature of the business conducted under the licence is: (for example: hotel, tavern restaurant, entertainment/nightclub) The days on which and the hours during which alcohol is (or is intended to be sold) under the licence are: U_____ Tuesday U _____ Wednesday U _____ Monday Friday D_____ Saturday D_____ Thursday

The application may be inspected during ordinary office hours at the office

The application may be inspected during ordinary office hours at the office of the Rangitikei District Licensing Committee at 46 High Street, Marton.

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 publication of this notice, file a notice in writing of the objection with the Secretary of the District Licensing Committee at Private Bag 1102, Marton 4741

No object 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.



Sunday

Application for On Licence or renewal of On Licence

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.

(In case of publication in newspaper(s) This is the **[state whether first, second or only]** publication of this notice.

(In case of second publication in newspaper(s) This notice was first published on [state date].



APPLICATION FOR LIQUOR LICENCE – EVACUATION SCHEME

Premises:
Address:
On Licence Number:
Off Licence Number:
Club Licence Number:
I HEREBY STATE THAT
Either
□ The building in which the premises are situated has an evacuation scheme for public safety which meets the requirements of Section 21A of the Fire Service Act 1975.
Or
The building, by reason of its current use, does not require such a scheme, or the building is exempt from having to meet the requirements for such a scheme.
Signed by the applicant:
Date:



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Application for On Licence or renewal of On Licence



WHO NEEDS AN EVACUATION SCHEME?

An Evacuation Scheme is required for buildings detailed in section 21A (1) and (2) of the Fire Service Act 1975.

The following is a list of buildings and occupancies that require a Fire Service approved Evacuation Scheme.

Buildings where:

- 100 or more people can gather in a common venue or place of assembly, whether for a commercial, social, cultural, religious or any other purpose, or
- Facilities for employment are provided for more than 10 people, or
- Accommodation is provided for more than 5 people, (unless in 3 or less household units), or
- Whole or part of the building is used for storage or processing of hazardous substances, or
- Early childcare facilities are provided, (other than in a household unit), or
- Specialised nursing, medical or geriatric care is provided, (other than in a household unit), or
- Specialist care is provided for people with disabilities (other than in a household unit), or
- People in lawful detention are accommodated.

Evacuation Schemes must be approved by the Fire Service.

(A waiver may be granted from the requirements to have an approved Evacuation Scheme for your building. Contact your local Fire Safety Officer for advice.)



APPLICATION FOR RENEWAL FOR LIQUOR LICENCE – EVACUATION SCHEME

Premises
Address
On Licence Number
Off Licence Number
Club Licence Number
I HEREBY STATE THAT
Either
The building in which the premises are situated has an evacuation scheme for public safety which meets the requirements of Section 21A of the Fire Service Act 1975.
Or
The building, by reason of its current use, does not require such a scheme, or the building is exempt from having to meet the requirements for such a scheme.
Signed by the applicant
Date



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Application for On Licence or renewal of On Licence



WHO NEEDS AN EVACUATION SCHEME?

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- Accommodation is provided for more than 5 people, (unless in 3 or less household units), or
- Whole or part of the building is used for storage or processing of hazardous substances, or
- Early childcare facilities are provided, (other than in a household unit), or
- Specialised nursing, medical or geriatric care is provided, (other than in a household unit), or
- Specialist care is provided for people with disabilities (other than in a household unit), or
- People in lawful detention are accommodated.

Evacuation Schemes must be approved by the Fire Service.

(A waiver may be granted from the requirements to have an approved Evacuation Scheme for your building. Contact your local Fire Safety Officer for advice.)

