

Sale of Liquor Act 1989

Application for Special Licence
(For Premises)

Section 76
Form 10

To: The Secretary
Gisborne District Licensing Agency
P O Box 747
GISBORNE

1.
Details of Applicant(s)

- (a) Full Name(s):.....
- (b) Postal Address for service of documents:.....
.....
- (c) Daytime contact name and telephone number:.....
- (d) Full Name, Address and Telephone number of proposed Bar Manager:.....
.....

Does the Bar Manager hold a Manager's Certificate? Yes No (Tick)

(e) Status of applicant (tick appropriate box)

- | | | |
|--|---|---|
| <input type="checkbox"/> Natural person | <input type="checkbox"/> Public Company | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Club | <input type="checkbox"/> Trustee | <input type="checkbox"/> Licensing Trust |
| <input type="checkbox"/> Local Authority | <input type="checkbox"/> Government Department or other instrument of Crown | <input type="checkbox"/> Manager Under the protection of personal Rights Act 1988 |

2.
Premises Details

- (a) Address of proposed licensed premises:.....
- (b) Trading name for premises (if any):.....
- (c) On Licence or Club Licence number:
- (d) Does the applicant own the proposed licensed premises. Yes No (Tick) If No :-
 - (i) What is the full name and address of the owner?:.....
.....
 - (ii) What form of tenure (e.g:Hire or lease) of the premises will the applicant have (including term of tenure):
.....
 - (iii) Has owners consent been granted? Yes No (Tick)
- (e) What part of the premises does the applicant intend should be designated as:
 - (i) A restricted area:.....
 - (ii) A supervised area:.....

For Office Use Only

Receipt:

Received By:.....Date: / /200

Amount: \$ 63.00 (GST Included)

3.
Purposes

Is the event for more than one day? Yes No (Tick)

If yes, please complete section 5

If no, please complete section 3 or section 4

To be completed only where the application is made for a licence under Section 73 of the Act

(a) What is the particular occasion or event, or series of occasions or events?

.....
.....
.....

(b) On which day and during what hours will the event or occasion occur?*

.....
.....

(c) On which day and during what hours does the applicant intend to sell liquor?*

.....
.....
.....

***IF NOT ONE EVENT OR OCCASION PLEASE COMPLETE SECTION FIVE INSTEAD OF SECTION 3(b) & 3(c)**

(d) Expected maximum number of attendees:

4.
Purposes

To be completed only where the application is made for a licence under Section 74 of the Act

For holders of an On Licence or Club Licence

(a) Address and trading name (if any) of hotel, tavern, or club:.....

.....

(b) In respect of what kind or kinds of social gatherings is the licence sought?.....

.....
.....
.....

(c) On which day and during what hours will the social gathering be held?*

.....
.....
.....

(d) On which day and during what hours does the applicant intend to sell liquor under the licence?*.....

.....
.....

***IF NOT ONE EVENT OR OCCASION PLEASE COMPLETE SECTION FIVE INSTEAD OF SECTION 4(b) & 4(e)**

(e) Expected maximum number of attendees:

5.
Series of Occasions

DATES	HOURS OF THE		PURPOSE
	OCCASION	LIQUOR LICENCE	

STATEMENT: As to how the above events constitutes a series of related events

.....

.....

.....

.....

Maximum numbers:

6.
Host Responsibility

Do you already have a Host Responsibility Policy? YES NO

If yes, please attach a copy of this policy to this application including any changes to the policy for this event.
If no, please complete the details below.

(a) **What provision does the applicant intend to make for the sale and supply of :-**

(i) **Food?**

List finger food and snack food that is intended to be available for the entire duration of occasion:

.....

.....

.....

List other food that will not be available for the entire duration and state the times that this food will be available:

.....

.....

.....

We intend to promote this food at all times that liquor is sold by: ✓

Using sign boards and/or posters throughout the premises	
Clearly stating what time the food is available	
Providing menus	
Other (specify):	

(ii) Low and Non-alcoholic refreshments?

List the refreshments intended to be available for the entire duration of event:

.....

We intend to promote this range of low and non alcoholic alternatives by: ✓

Using sign boards and/or posters throughout the premises	
Advertising and promoting free non alcoholic drinks to sober drivers	
Ensuring that they are highly visible	
Other (specify)	

(b) What steps do you propose to take to ensure that the requirements of the Act in relation to the sale of liquor to prohibited persons are observed?

Minors will be identified and either excluded from the premises or from drinking alcohol by: ✓

Use of declaration forms	
Refuse entry if persons age is in doubt	
Request ID. ie drivers licence, passport, birth certificate (verify)	
Display signs	
Hiring and training appropriate door staff	
Other: (Specify)	

We will ensure that intoxicated persons are not served or allowed entry or permitted to remain on the premises by : ✓

Train staff to identify intoxication levels	
Serve standard spirit measures	
Monitor alcohol consumption	
Refuse entry to those already intoxicated	
Slow and/or stop service as required	
Request those who become intoxicated to leave ensuring appropriate transport home.	
Other (specify):	

General Safe Environment:

A pleasant and safe environment will be provided by: ✓

Providing outside patrols	
No bottles to be taken outside the venue	
Sufficient bar staff to cater for numbers attending to avoid stocking up	
Sufficient lighting	
Sufficient space for the number of patrons expected	
Alternative transport will be available and promoted	
Other (specify):	

Will this licence be used for: ✓

On site consumption only	
Off site consumption (Off Sales)	

Dated at.....this.....day of.....200....

Signature: _____

NOTES

- (1) In respect of the status of the applicant, see section 75 of the Sale of Liquor act 1989.
- (2) For the matters that are to accompany this application, see regulation 14(3) of the Sale of Liquor Regulations 1990.

HYGIENE AND SANITATION CHECKLIST

Sanitary Accommodation available:

	MALES	FEMALES
W.C.s		
Basins		
Urinals		

(Note: 600mm urinal is equivalent to one urinal stall)

Glassware Number: _____

Disposable		Own		Hire	
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Food:

Provided by organisers	YES	NO	For sale by organisers	YES	NO
Provided by caterers	YES	NO	Name of caterers:		

Hygiene Approved

Inspection during operation by EHO/LI

YES

NO

Date