

*Sale of Liquor Act 1989*

Application for Temporary Authority

Section 24 & 47

Form 17

To: The Secretary

Gisborne District Licensing Agency

Application for temporary authority to carry on the sale and supply (or delivery) of liquor is made in accordance with the details set out below.

**1. Details of Applicant(s)**

- (a) Full Name(s):.....
- (b) Address:.....
- (c) Occupation:.....
- (d) Postal address for service of documents:.....
- (e) Daytime contact name and telephone number:.....

Telephone:.....

**2. Details of Licence**

(a) Type of licence (*Tick appropriate box*)

- On-Licence
- Off-Licence

(b) Number (existing):.....

**3. Details of Premise**

*(To be included only where the licence applies to any premise)*

- (a) Address:.....
- (b) Trading or other name (if any):.....

**4. Details of Conveyance**

*(To be included only where the licence applies to any conveyance)*

- (a) Type of conveyance:.....
- (b) Address of home base (if any):.....
- (c) Principal route traveled (if any):.....
- .....
- .....
- (d) Trading or other name (if any):.....

**3.**  
**Details of Premise**

(a) What right, title, estate or interest does the applicant have in the premises (or conveyance) to which the application relates:.....

(b) Does the applicant intend to carry on the sale and supply (or delivery) of liquor personally?

Yes                       No

If No, What is the name, address and occupation of the person through whom the applicant intends to carry on the sale and supply (or delivery) of liquor?

Name: .....

Address: .....

Occupation: .....

(c) What are the reasons for the application?

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

What is the take-over date of the premise or conveyance?.....

Dated at.....this.....day of.....20.....

Applicant(s) Signature:.....

**5.**  
**Notes**

1. The District Licensing Agency may require notice of this application to be given to any person or persons it may specify
2. For the matters that are to accompany this application, see see regulations 19 (2) of the Sale of Liquor Regulations 1990.

***For Office Use Only***

Receipt:

Received By:.....Date: / /20

Amount: \$ 132.00 (GST Included)