# Application for

# Temporary Authority Order

Sections 136, Sale and Supply of Alcohol Act 2012

You must lodge your application with supporting information (see checklist) at least 15 working days before a Temporary Authority is required to commence (application fees are non-refundable).

The issue of a Temporary Authority takes approximately 15 working days to process if no opposition or issues arise. A Temporary Authority is only issued for a maximum of 3 months. Please ensure you lodge your application for your new licence as soon as possible.

Te Kaunihera o Te Tairāwhiti

GISBORNE

If you require assistance with your application please contact the Alcohol Licensing Team on 0800 653 800 or email alcohol.licensing@gdc.govt.nz

# Checklist

The following must be attached/completed before the application will be accepted for processing. Please tick when completed:

Completed application form.

Prescribed fee paid. See our website for fees.

A written statement from the owner to the effect that the owner has no objection to the grant of the licence (where the applicant is not the owner of the premises/ conveyance).

Certificate of incorporation (if applicant is a company or incorporated society).

Additional information relevant to this application.

### 1. Applicant details

The applicant is the entity that takes the profit from alcohol. Generally this is a company, incorporated society or partnership. Legal name(s) of operator (company or person in control):

Registered company		Partnership	Sole trader	Individual		
Postal address for service of documents:						
No.	Street/Road				Suburb	
Town/City					Postcode	
2. Applicant contact details						
Name in full:						
Surname: Usual residential address:			First Name(s)			
Usual resident	lai address.					
No.	Street/Road				Suburb	
Tours /City					Postcode	
Town/City			C	)that phono:	Postcode	
WODIE.	Mobile: Other phone:					
Email:						
3. Licence details						
Type of licence	e (tick one):	On-licence	Off-licence I	BYO licence		
Licence numbe	er:		Date applica	nt officially takes over pre	emises:	
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## 4. Criminal convictions

Does the applicant (or any company directors) have any 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)

If YES, please state the nature of the offence and date of conviction.

Yes No

#### 5. Details of premises

#### Details of premises if not a conveyance

Site address: Trading name (if applicable):

#### Details of conveyance (if applicable)

Type of conveyance: (eg. ship, bus, railway, carriage, etc) Address of home base: Trading name (if applicable):

#### 6. Further details

What right, title, estate, or interest does the applicant have (If the applicant is not the owner, attach building owner approval):

In the premises (or conveyance) to which the application relates? In the premises (or conveyance) to which the application relates?

In any business conducted in the premises (or conveyance) to which the application relates?

What are the reasons for the application?

Does the applicant intend to carry on the sale and supply (or delivery) of alcohol personally? Yes No If no, what is the name and contact details of the person who will be running the business for you? Name in full: Surname: First Name(s) Address:

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Holder of a Manager's Certificate?

Other phone:

Yes No

# 7. Certified Manager details

There must be at least one certified manager associated with the business. For each manager please provide full legal name, Manager's Certificate number and expiry date.

Name in full:

Manager's Certificate number:	Expiry date:
Name in full:	
Manager's Certificate number:	Expiry date:
Name in full:	
Manager's Certificate number:	Expiry date:

## 8. Declaration & signature of applicant - this must be signed by the applicant and not their agent

I authorise New Zealand Police to disclose any personal information it considers relevant to my application to the Medical Officer of Health and/or the Licensing Inspector for the purpose of assessing my suitability.

Name:

Signature of the applicant:

day of

Dated at

this

(place)

**Privacy policy** 

Information contained in your application and any supporting information will be held by Gisborne District Council to enable your application to be processed under the Sale and Supply of Alcohol Act 2012. This information will be made available to the public on request. The information will be provided to the Gisborne District Licensing Committee, the NZ police, the Medical Officer of Health and Council's Licensing Inspectors. This information may form part of a public hearing of your application before the Gisborne District Licensing Committee and may be used in the Committee's decision for your application. Decisions will be made publicly available.

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Council is required to keep a statutory register of all applications and the District Licensing Committee's decisions on them. Council is required to report statistics about applications to the Alcohol Regulatory and Licensing Authority. Any member of the public may request access to this information under the Local Government Official Information and Meetings Act 1987. This information may also be used under the Privacy Act 2020. You have the right to see and correct personal information that Councils holds about you.

Note: The District Licensing Committee may require notice of the application to be given to any person or persons it may state.

Office use only		
Amount \$296.70 (GST inc)	Payment received by GDC:	Code LIQL 3100030316
Scanned objective no:	Officer:	
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