

Tohu Pouwhakahaere

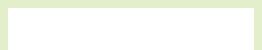
Manager's Certificate

Section 219, Sale and Supply of Alcohol Act 2012

This certificate authorises the holder to manage any licensed premises.

Ngā paearu Criteria

- You need to be 20 years old or over
- You need to have had at least six months experience at licensed premises in the hospitality, grocery or liquor industries
- Photo ID (Passport, Drivers Licence or Kiwi Access)
- Reference from your employer stating training, experience and character
- Work Visa (if applicable)
- Licence Controller Qualification from an approved training provider or unit 4646 and unit 16705
- You must have the right to work in New Zealand to be issued a certificate



Kaitono Mōhio Whaiaro Applicants Details

Full Legal Name

Any Aliases

Residential Address

..... Postcode.....

Occupation

Date of birth Place of birth

Sex

Contact Work Mobile Home

Email

Postal Address

For service of documents

Criminal convictions

Has the applicant been convicted of any offence? Yes No

If yes, state all 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).

Nature of offence	Date of conviction	Penalty

Applicant experience

Has the applicant had any experience (in particular, recent experience) in controlling any premise or conveyance in respect of which an alcohol licence was in force?

Yes No

If yes, what are the details and dates of that experience?

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Applicant training

Has the applicant had any relevant training, in particular recent training?

Yes No

If yes, what are the details and dates of that training?

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Licensed premise employment details

Does the applicant intend to be the manager of any particular licensed premise?

Yes No

If yes, provide the name and address of the licensed premise:

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Is the applicant currently appointed as a temporary manager under section 229 of the Sale and Supply of Alcohol Act 2012?

Yes No

If it is a club, what is the extent of the applicant's involvement in its management and activities?

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Relevant qualification

Does the applicant hold a licence controller qualification (LCQ) or equivalent (unit standards 4646 and, 16705)?

Yes No

If yes, on what date was the qualification obtained?.....

Documents (and fee) to be submitted with this application

- | | |
|--|---|
| <input type="checkbox"/> Copy of licence controller qualification (LCQ) | <input type="checkbox"/> Application fee of \$316.25 |
| <input type="checkbox"/> ID (driver's licence, passport or Kiwi Access card) | <input type="checkbox"/> A reference stating the applicant's experience in the alcohol industry |
| <input type="checkbox"/> Work Visa or Visa with work rights (if applicable) | |

Applicant's declaration

Privacy Statement

Information you provide in this application and any supporting documents will be used by South Taranaki District Council (the Council) to process your application under the Sale and Supply of Alcohol Act 2012. This information will be made available to the public upon request and will be shared with the District Licensing Committee, the Police, the Medical Officer of Health and Council licencing inspectors. This information may form part of a public hearing or other consideration of your application before the District Licencing Committee and may be used in the Committee's decision on your application. The decision will be made publicly available.

The Council is required to keep a record of all alcohol licence applications and the District Licensing Committee's decisions on them. The 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. Under the Privacy Act 1993, you have the right to see and correct personal information that the Council holds about you.

Declaration

I confirm that I have read and understood the above privacy statement. I confirm that the information provided on the application form is true and correct. I understand that the Council will send all correspondence, invoices and refunds (if any) to me and I agree that I will be responsible for and indemnify the Council in respect of the payment of all fees in connection with this application.

Signature of applicant Date

Place where dated and signed