

Checklist for Temporary Authority

(Sale and Supply of Alcohol Act 2012)

PLEASE PROVIDE THE FOLLOWING WITH YOUR APPLICATION

Use this cover page to assist you to lodge a complete application

The completed application and documentation listed below is required before the application is put into process

Fee (Inclusive of GST)

\$296.70

Fee may be paid by:

- Cash
- Internet Banking details
 - Account Name: Food & Health Standards
 - Account Number: 02-0828-0032109-02
 - Reference: Name of applicant

Information to be attached

- ☐ A copy of the lease agreement for the premises
- ☐ A signed sale & purchase agreement
- ☐ Details of applicant's previous experience



Application for Temporary Authority

Sections 136 – Sale and Supply of Alcohol Act 2012

To: The Secretary
Selwyn District Licensing Committee
C/- Food and Health Standards (2006) Ltd
PO Box 7469
Sydenham
CHRISTCHURCH 8240

Email: alcohol@selwyn.govt.nz

Application for temporary authority to carry on the sale and supply of alcohol is made in accordance with the details set out below:

1. Details of Applicant

a. Company name:

(Applicants own name if not a company)

Applicants address:

b. Occupation:

(If applicant an individual)

Date & place of birth:

If you were born outside of New Zealand please attach evidence of residency or your visas allowing you to reside and work in New Zealand

Gender:

c. Postal address for service of documents:

d. Daytime contact name & telephone number (s):

Applicants email address:

2. Details of Licence

a. Type of licence

- ☐ On licence
☐ Off licence

b. Licence number & expiry date:

3. Details of premises

a. Address: _____

b. Current trading name: _____

4. Details of conveyance

a. Type of conveyance: _____

b. Address or homebase: _____

c. Trading or other name: _____

5. Further details

a. What right, title, estate or interest does the applicant have:

- i. In the premises (or conveyance) to which the application relates? (e.g. lease agreement or sale & purchase agreement).

- ii. In any business conducted in the premises (or conveyance) to which the application relates? (e.g. purchased the business).

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

☐ Yes ☐ No

If **no**, what is the full legal name, address & occupation of the person through whom the applicant intends to carry on the sale and supply (or delivery) of alcohol?

Name: _____

Address: _____

Occupation: _____

- c. What are the reasons for the application? (e.g. purchased the business & wish to trade on current owners licence until new licence is obtained).

- d. Estimated take over date?

Signature and date

Dated at _____ this _____ day of _____ 20_____
(Town) (eg.21st) (Month) (Year)

Signature of applicant: _____