

APPLICATION FOR ON-LICENCE OR RENEWAL OF ON-LICENCE



Form 3, Sections 100 and 127(2), Sale and Supply of Alcohol Act 2012

833345

Send or deliver your application to:

The Secretary
 District Licensing Committee
 Kāpiti Coast District Council
 Private Bag 60601, Paraparaumu 5254
 175 Rimu Road, Paraparaumu 5032
 Telephone (04) 296 4700 Toll Free: 0800 486 486

For Council use
File #

Once this application is complete you may make an appointment for a pre-lodgement meeting with a Licensing Inspector at the numbers given above.

Application forms cannot be accepted by the District Licensing Committee (DLC) over the counter until they have been signed off as complete by the Inspector and a fee category has been calculated. **Instructions on how to complete this application are attached at the back of the form.**

This application is made in accordance with the particular set out below:	
1. Application Type	
<input type="checkbox"/> New On-Licence	<input checked="" type="checkbox"/> Renewal of On-Licence Licence number: 45/ON/034/2018
<input type="checkbox"/> Renewal of On-Licence with variation of conditions Licence number:	
2. Endorsements	
Tick the appropriate box if you want an endorsed licence only	
<input type="checkbox"/> Allow BYO	<input type="checkbox"/> On-Licence plus Caterer's On-Licence
<input type="checkbox"/> BYO Licence only	<input type="checkbox"/> Caterer's On-Licence only (no restaurant)
3. Details of Applicant	
Full legal name or names to be on licence (if a company, must be company name): NEW SHORELINE CINEMA LIMITED	
Whether licence already held for premises or conveyance concerned: <input type="checkbox"/> Yes <input type="checkbox"/> No, and if 'Yes' state kind of licence	
4. Applicant Status: by reference to section 28 of Sale and Supply of Alcohol Act 2012	
<input type="checkbox"/> Natural person(s)	<input checked="" type="checkbox"/> Private Company
<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Public Company
<input type="checkbox"/> Partnership	<input type="checkbox"/> Other (please specify).....

5. For Applicant that is a Natural Person(s):

Full legal name:

PETER GLYN AVERY.

Any aliases (and/or maiden name):

Usual residential address: Number

48

Street:

WINATA AVE

Suburb:

City:

WAIKANAÉ

Postcode:

5036

Sex:

MALE

Occupation:

COMPANY DIRECTOR.

Date of birth:

23-11-53

Place of birth:

NEW PLYMOUTH.

Telephone:

Mobile:

027 444 6804

Email:

✉ peter@shorelinecinema.co.nz.

Preferred mode of contact:

6. For Applicant that is a Body Corporate, Authority under which Incorporated:

7. For Applicant that is Not a Natural Person(s), Details of Contact Person:

Name:

Peter Avery

Designation/Position:

owner

Telephone:

0274446804

Email:

peter@shorelinecinema.co.nz

Mobile:

Preferred mode of contact:

email

8. Postal Address for Service:

Number/Street/PO Box:

~~10 Mahara Place~~

Suburb:

Waikanae

City:

PO Box 123, Waikanae

Postcode:

5036

9. Business Details:

Describe principal business, any other businesses

CINEMA & CAFE

10. Criminal Convictions:

Does the applicant(s) 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). Yes No, and if "Yes", then please provide nature of the offence, details of conviction, and penalty imposed.

11. For a Company: whether Incorporated under the Companies Act 1993 or Equivalent Foreign Legislation

Full Legal Names of Directors:

Peter Glyn Avery

12. For a Private Company Incorporated under the Companies Act 1993:

Authorised capital:	Paid up capital:
Name:	Address: Street number
Street:	Suburb:
City:	Postcode:
Date of birth:	Place of birth:
Designation:	Face value of shares held:

13. For a Partnership:

Full legal name of partner:		
Usual residential address: Number	Street:	
Suburb:	City:	Postcode:
Full legal name of partner:		
Usual residential address: Number	Street:	
Suburb:	City:	Postcode:

14. Details of Premises (if not a Conveyance)

Address: Number 10	Street: Mahara Place	
Suburb: Waikanae	City:	Postcode: 5036
Trading Name: Shoreline Cinema	Full legal name: New Shoreline Cinema Ltd	

If not Owned by Applicant:

Tenure: (state whether to be held as leasehold, or under tenancy agreement or licence)

Full legal name of owner: **BARRY LESLIE HERBERT**

Address: Number 18	Street: GARDEN ROAD	
Suburb: RAUMATI	City:	Postcode:

Is the licence conditional on completion of building work: Yes No, and if "Yes", state details:

15. Details of Conveyance

Kind: (eg, ship, railway carriage, bus, etc)

Tenure: (state whether owned by applicant, or to be operated under charter, lease, or licence)

If not Owned by Applicant:		
Full legal name of owner:		
Address: Number	Street:	
Suburb:	City:	Postcode:
Any registration number:		
Any home base address:		
Any name used or proposed for conveyance:		
Is the licence conditional on completion of construction work: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, and if "Yes", state details:		
16. Details of Duty Manager(s)/Proposed Manager(s) <i>If more than two certified managers please attach details separately</i>		
Full legal name: Peter Glyn Avery		
Number of manager's certificate: 45/CERT/117/2014	Expiry Date: SEPT, 2021	
Full legal name:		
Number of manager's certificate: 45/CERT/117/2014	Expiry Date:	
17. Business Details		
State the general nature of the business to be conducted by applicant in the premises if licence granted: (for example, hotel, tavern, restaurant, entertainment/nightclub) Boutique Cinema (Arthouse Cinema)		
Is the sale of alcohol intended to be the principal purpose of business: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, and advise the intended principal purpose of business (for example: sale of alcohol, sale of food; entertainment; accommodation). Entertainment - A place to watch films - cinema -		
Is the applicant engaged, or intending to be engaged, in the sale or supply of any goods other than alcohol, non-alcoholic refreshments and food, or in the provision of any services other than those directly related to the sale or supply of alcohol and non-alcoholic refreshments, and food: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No - and if "Yes", advise the nature of other goods or services. This is to assess whether other goods and services provided are compatible with the sale of alcohol. FOOD, SNAKES, SOFT DRINKS, CINEMA TICKETS.		

State the days and hours proposed for sale of alcohol (this is your current licensed hours not trading hours):

MONDAY TO SUNDAY - 10:00 AM TO 11:00 PM.

Do you have an encroachment licence to consume alcohol on footpath: Yes No If 'Yes', please attach and number #.....

18. Conditions

Doc attached?
Number.

- Write answer below or attach relevant documents that demonstrate compliance.
- When including attachments please number the hard copies, and in the first column circle 'Yes box and write the document number on '#.....'

Describe experience and training of applicant:

LCCQ

Yes / No
#.....

Describe the type and range of food intended to be available for purchase:

Sandwiches, Scones, + cakes - Snacks - chippies, nib.

Yes / No
#.....

Describe the type and range of non-alcoholic beverages intended to be available for purchase:

bottled water (as well as free filtered water),
Juices, kombucha, fizzy drinks, ~~Amstel light~~

Yes / No
#.....

Describe the type and range of low-alcohol beverages intended to be available for purchase:

Amstel Light - Legally light (2.5%)
- Tuatara 1% (3.3%) - low but not legally low.

Yes / No
#.....

Describe to what extent, and where, drinking water is intended to be freely available to patrons (if no access to mains water supply, also advise the potability of water intended to be available):

Free filtered water available at front of crema
window - in jugs that are always monitored by staff
& replaced when low.

Yes / No
#.....

<p>Describe the steps proposed to be taken to prevent the sale and supply of alcohol to prohibited people:</p> <p><i>1-D checked by Duty Manager for any persons that looks 30 & Under. Duty managers</i></p>	<p>Yes / No #.....</p>
<p>Describe any other steps the applicant proposes to promote the responsible consumption of alcohol (for instance host responsibility practices):</p> <p><i>WE ENCOURAGE OUR CUSTOMERS TO TRY OUR EXCITING RANGE OF NON ALCOHOLIC SOFT DRINKS. WE CONTINUALLY REFRESH OUR WATER SUPPLY</i></p>	<p>Yes / No #.....</p>
<p>Describe any other systems (including training systems), and staff in place (or to be in place) for compliance with the Act:</p> <p><i>ALL STAFF MEMBERS INCLUDING THOSE NOT HOLDING A MANAGERS CERTIFICATE ARE SUPERVISED PLUS REGULAR TEAM UPGRADES AT MEETINGS.</i></p>	<p>Yes / No #.....</p>
<p>Describe any actions that have been taken to ensure the good order and amenity of the locality would not be likely to be:</p> <ul style="list-style-type: none"> • reduced, by more than a minimal extent, by granting the licence; or • increased, by more than a minimal extent, by the refusal to renew the licence. <p><i>This includes issues such as noise (including amplified music, people in outdoor areas or arriving or leaving premises), the effects on sensitive users within locality such as pre-schools, schools and medical centres:</i></p> <p><i>WE HAVE FOUND THAT OUR EXTERIOR SECURITY CAMERAS HAVE DECREASED TAGGING AND LOITERING.</i></p>	<p>Yes / No #.....</p>
<p>For Licence Renewal Only: Describe any conditions of the licence the applicant seeks to vary or cancel: <i>To be filled in for each condition the applicant seeks to vary or cancel – attach additional pages as necessary</i></p> <p>Terms of condition at present: <i>NO CHANGE TO CURRENT ACTIVITY</i></p> <p>Action sought: <input type="checkbox"/> Variation <input type="checkbox"/> Cancellation. If Variation, in what respect does the applicant seek to vary the condition?</p>	<p>Yes / No #..... #..... #..... #.....</p>

Full reasons for variation or cancellation:	
19. Attachments (if Not a Conveyance) <ul style="list-style-type: none"> When including attachments please number the hard copies, and in the first column circle 'Yes box and write the document number on '#.....') 	Doc attached? Number.
A statement, or signed declaration, regarding the premises need for an evacuation scheme, as set out in section 100(d) of the Act for new applications, or section 127(e) of the Act for renewals. <i>Refer to Declaration form on Page 10.</i>	Yes / No #.....
Copy of planning consent: Please attach certificate that proposed use meets the requirements of the Resource Management Act 1991. <i>Not required for renewal unless the business activity or type has changed since the last version.</i>	Yes / No #.....
Copies of all relevant building certificates consents: Please attach certificates that show the premises meet the requirements of Building Code 2004. <i>Not required for renewal unless structural changes have been undertaken since the last issue or renewal.</i>	Yes / No #.....
A scale floor plan showing each area to be designated as a supervised area or restricted area, and indicating whether supervised or restricted area; and the principal entrance. <i>Not required for renewal unless changes have been made since the last issue or renewal.</i>	Yes / No #.....
For body corporate applicant, please attach a copy of certificate of incorporation (or equivalent document). <i>Not required for renewal unless changes have occurred since the last issue or renewal.</i>	Yes / No #.....
Advise if a Crime Prevention Through Environmental Design (CPTED) assessment has been undertaken or any improvements to the design and layout in accordance with CPTED. <input type="checkbox"/> Yes <input type="checkbox"/> No, and if 'Yes' attach a copy, and if 'No' complete a CPTED checklist (see HPA and the Ministry of Justice websites for more information).	Yes / No #.....
Please attach a photograph or artist's impression of the exterior of the premises or proposed premises. <i>Not required for renewal unless major changes have been undertaken since the last issue or renewal.</i>	Yes / No #.....
Please attach a map showing the location of the premises. <i>Not required for renewal.</i>	Yes / No #.....
For the following documents, if they are already attached in response to a previous section you do not need to provide twice. Just circle the Yes and repeat the document number you have given it.	
Please attach a copy of your Host Responsibility Policy. <i>Not required for a renewal unless there have been significant changes since the last issue or renewal.</i>	Yes / No #.....
Please attach a copy of a sample menu. <i>Not required for a renewal unless there has been a significant change in the range and nature of the food offered since the last issue or renewal.</i>	Yes / No #.....
If the premises are owned by another party, please attach an owner's statement or copy of lease to show there is no objection from the owner to the issue of licence to this premise. <i>Not required for a renewal unless the lease or ownership arrangements have changed.</i>	Yes / No #.....

20. Attachments (Conveyance)		Doc attached? Number
<ul style="list-style-type: none"> When including attachments please number the hard copies, and in the first column circle 'Yes box and write the document number on '#.....') For renewal applications you only need to attach copies if there have been changes from the last version you provided to the DLC 		
Floor plan showing each area to be designated as a supervised area or restricted area, and indicating whether supervised or restricted area. <i>Not required for renewal unless changes have occurred since the last issue or renewal.</i>		Yes / No #.....
For body corporate applicant, copy of certificate of incorporation (or equivalent document). <i>Not required for renewal unless changes have occurred since the last issue or renewal.</i>		Yes / No #.....
Please attach a photograph or artist's impression of the exterior of the conveyance. <i>Not required for renewal unless major changes have been undertaken since the last issue or renewal.</i>		Yes / No #.....
For the following documents, if they are already attached in response to a previous section you do not need to provide twice. Just circle the Yes and repeat the document number you have given it.		
Please attach a copy of your Host Responsibility Policy. <i>Not required for a renewal unless there have been significant changes since the last issue or renewal.</i>		Yes / No #.....
Please attach a copy of a sample menu. <i>Not required for a renewal unless there has been a significant change in the range and nature of the food offered since the last issue or renewal.</i>		Yes / No #.....
If the conveyance is owned by another party, please attach an owner's statement or copy of lease to show there is no objection from the owner to the issue of licence to this conveyance. <i>Not required for a renewal unless the previous lease has expired.</i>		Yes / No #.....
21. Further Details where Applicant is a Company		
<i>Include full details of each person who holds 20% or more of the shares, or of any particular class of shares, issued by the company.</i>		
Name: PETER AVERY	Address: 48 WINARA AVENUE	
Suburb: WAIKANAHE	City:	
Postcode: 5036	Date of birth: 23-11-53	
Place of birth: NEW PLYMOUTH	Designation:	
Name:	Address:	
Suburb:	City:	
Postcode:	Date of birth:	
Place of birth:	Designation:	
Name:	Address:	
Suburb:	City:	
Postcode:	Date of birth:	
Place of birth:	Designation:	
Are additional sheets attached? Yes / No - Doc number #.....		

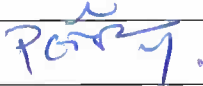
22. Further Details where Applicant is a Partnership

Name:	Address:	
Suburb:	City:	
Postcode:	Date of birth:	
Place of birth:	Date:	Signature:
Name:	Address:	
Suburb:	City:	
Postcode:	Date of birth:	
Place of birth:	Date:	Signature:
Name:	Address:	
Suburb:	City:	
Postcode:	Date of birth:	
Place of birth:	Date:	Signature:

Are additional sheets attached? Yes / No - Doc number #.....

23. Signature of Applicant (this must be signed by applicant 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:	PETER AVERY.	
Date:	11-05-21	Signature: 
Dated at location:	WAIKANAE.	

Privacy Statement

Information contained in your application and any supporting information will be held by Kapiti Coast 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 Kapiti Coast 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 Kapiti Coast District Licensing Committee and may be used in the Committee's decision for your application. Decisions will be made publically available.

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 1993. You have the right to see and correct personal information that Council holds about you.

WE BELIEVE WE ARE CURRENTLY IN CREDIT FOR THIS AMOUNT.

Method of payment (must be made at time of application)

- I have paid at a Kāpiti Coast District Council Service Centre when I delivered this application.
- I have paid by electronic transfer (Council Bank Account Number: 03-0732-0306101-00) and quoted my name and "alcohol" in the reference fields; and
 - I have included proof of electronic payment with this application.
- I have enclosed a cheque with this form.

How I would like to receive my alcohol licence (please select one only)

- I will collect my alcohol licence – please contact me when it is ready by Phone or Email
- OR
- Please post my alcohol licence to me.

Next Step: Once your application is complete, if you would like to make an appointment for an optional pre-lodgement meeting with the Licensing Inspector then please Telephone (04) 296 4700 or Toll Free: 0800 486 486.

- 1 This form must be accompanied by the prescribed fee.
- 2 This form must be accompanied by the required attachments (refer Points 19 or 20).
- 3 Within 20 working days after filing your application with the District Licensing Committee (or 10 working days if it is an application for renewal), the application must be publically notified. The public notice template will be provided on receipt of your application by the Alcohol Licensing Team.

For Office Use: Application Fee Risk Categories

- Very Low
- Low
- Medium
- High
- Very High

Application Fee Payable: \$ _____ Signature of Licensing Inspector _____

Name of Licensing Inspector _____ Date: _____

DECLARATION OF EVACUATION SCHEME



To be used with applications for New, or Renewal of, On, Off and Club Alcohol Licences

(Sale and Supply of Alcohol Act 2012 sections 100 & 127)

Licence number:	45/ON/034/2018
For premises known as:	SHORELINE CINEMA.
Located at:	10 MAHARA PLACE, WAIKANAE.

I, (applicant) PETER AVERY. (please print)

Herewith state that: (Please delete whichever does not apply)

(i) The owner of the building in which the premises are situated provides and maintains an evacuation scheme as required by section 76 of the Fire and Emergency New Zealand Act 2017.

OR

(ii) Because of the buildings current use, the owner is not required to provide and maintain such a scheme.

OR

(iii) Because of the nature of the building, its owner is exempt from the requirement to provide such a scheme.

Signed: P Avery (applicant)

Date: 11-05-21

Please include this declaration with your application for forwarding to NZ Fire Service.

MUST BE CONFIRMED BY AUTHORISED FIRE SAFETY OFFICER

Signed:

Name: (please print)

Date:

Guidance for Completing On-Licence Application Form

Background

The object of the Sale and Supply of Alcohol Act 2012 is that the sale, supply, and consumption of alcohol should be undertaken safely and responsibly; and the harm caused by the excessive or inappropriate consumption of alcohol should be minimised.

It is a legal requirement of the Sale and Supply of Alcohol Act 2012 that you must have a licence before you can sell or supply alcohol.

Before lodging application

Once this application is complete then you must ring and make an appointment for a pre-lodgement meeting with the Licensing Inspector. Please Telephone (04) 296 4700 or Toll Free: 0800 486 486. The application form cannot be accepted by the DLC over the counter until it has been signed off as complete by the Inspector and a fee category has been calculated.

If your application is regarding a 'premise - not a conveyance', you should also apply for certificate of compliance with the Resource Management Act and the Building Act from the Kapiti Coast District Council. A 'conveyance' means an aircraft, coach, ferry, hovercraft, ship, train, or other vehicle, used to transport people.

Completing your application

Who should complete which fields

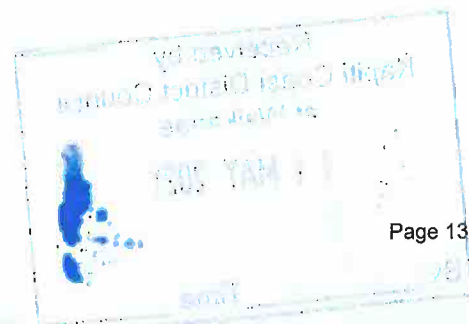
Completing your application		Who should complete which fields
1	Type of Application	All applicants to complete.
2	Endorsements	Only complete if seeking an endorsement for BYO or Caterer. This is for restaurants who only allow BYO and caterers who only cater.
3	Details of Applicant	All applicants to complete. If a company receives profits then apply in company name.
4	Applicant Status	All applicants to complete
5	For Applicant that is Natural Person(s)	Only complete if applicant is a natural person. A natural person is an individual. Complete all sections.
6	For Applicant that is Body Corporate	Only complete if applicant is a body corporate.
7	For Applicant that is <u>not</u> a Natural Person(s)	Only complete if applicant is a body corporate, partnership, private company or public company. Complete all sections.
8	Postal Address for Service	All applicants to complete.
9	Business Details	What is your principal business? For example restaurant/ entertainment centre/sale of alcohol (ie tavern).
10	Criminal Convictions	All applicants to complete.
11	For a Company full legal names of directors	Only complete if applicant is a public or private company.
12	For a Private Company	Only complete if applicant is a private company incorporated under the Companies Act 1983.
13	For a Partnership	Only complete if applicant is a partnership.
14	Details of Premises (if not a conveyance)	<p>All applicants must complete either 14 or 15.</p> <p>A 'conveyance' is a <i>premise</i> which is used to transport people such as an aircraft, coach, ferry, hovercraft, ship, train, or other vehicle.</p> <p>A 'premise - not a conveyance', is any other type of premise for which you are seeking a Licence.</p>
15	Details of Conveyance	
16	Details of Duty Manager(s)/Proposed Managers	All applicants to complete. If more than 2 please attach details separately.

17	Business Details	All applicants to complete.
18	Conditions	All applicants to complete.
19	Attachments (if not a conveyance)	All applicants must complete either 19 or 20 (see 14/15).
20	Attachments (conveyance)	
21	Further Details where Applicant is a Company	Only complete if private or public company.
22	Further Details where Applicant is a Partnership	Only complete if a partnership.
23	Signature of Applicant	All applicants to complete.

After your Application is Lodged


Public Notices

You are responsible for giving notice in the Kapiti Observer or Kapiti News within 20 working days of the Council formally accepting your application (or 10 working days if it is an application for renewal) and the Council will send you a template to complete this, along with further information. Unless notified otherwise by a Licensing Inspector, the notice must be published twice and there must not be less than five days and not more than 10 days between the two dates of publication. The notices must be worded according to Form 7 (and in compliance with regulations 36, 37 and 38 of the Sale and Supply of Alcohol Regulations 2013). A Form 7 notice must also be displayed in a conspicuous place on the premises or conveyance to which this application relates for 10 days from the first newspaper notification.



Received by
Kapiti Coast District Council
at Waikanae

1 MAY 2021

By  Time

Maria Cameron

From: Peter Avery <peter@shorelinecinema.co.nz>
Sent: Monday, 17 May 2021 3:45 PM
To: Maria Cameron
Subject: Re: Shoreline Cinema Waikanae - On Licence Application ON873

Thanks Maria,

I'll leave it in your hands for the moment,

regards, Peter.

Shoreline Cinema,
10 Mahara Place,
Waikanae.
04 902 8070
www.shorelinecinema.co.nz

On Mon, May 17, 2021 at 1:00 PM Maria Cameron <Maria.Cameron@kapiticoast.govt.nz> wrote:

Good afternoon Peter,

Thank you for your application for the On licence for Shoreline Cinema Waikanae to be renewed. We note though that it is not due to expire until 26 September 2021 so Antoinette has advised that we will hold off processing this application until August.

As for the fee of \$368, yes you do have a credit of \$40.25 on your account for the Business Interruption Credit last year. Therefore, you only owe \$327.75 for the Application fee. Once the licence is ready to be issued the Annual fee of \$161 will also need to be paid before the licence can be released.

Please get back to me with any questions you may have.

Kind regards

Maria Cameron

Environmental Standards Administration Officer

Tel 04 296 5509