

APPLICATION FOR VARIATION OR CANCELLATION OF CONDITIONS OF LICENCE



Form 14, Section 180, Sale and Supply of Alcohol Act 2012

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 must 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.

This application for the variation or cancellation of the conditions of a licence is made in accordance with the details set out below.

Details of Licensee

Full legal name:

Postal Address: Street Number/PO Box

Street:

Suburb:

City:

Postcode:

Telephone:

Mobile:

Fax:

Email:

Website:

Preferred mode of contact:

Details of Licence *(please tick one)*

On-licence

Off-licence

Club Licence

Licence Number:

Details of Premises *(to be included only where the licence applies to any premises that are NOT a conveyance)*

Address: Number

Street

Suburb

City

Postcode

Trading or other name (if any):

Details of Conveyance *(to be included only where the licence applies to any conveyance)*

Type: *(eg, ship, railway carriage, bus, etc)*

Address of home base: Number

Street

Suburb

City

Postcode

Trading or other name (if any):

Conditions (to be filled in for each condition to which this application relates)		Doc attached? Number.
State terms of condition at present:		Yes / No #.....
Action sought (tick appropriate box): <input type="checkbox"/> Variation <input type="checkbox"/> Cancellation		
If variation, in what respect does the applicant seek to vary the condition (i.e. state the conditions you propose)?		Yes / No #.....
Full reasons for variation or cancellation:		Yes / No #.....
Signature of Applicant (this must be signed by the 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:		
Date:	Signature:	
Dated at location:		
Privacy Statement		
<p>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.</p> <p>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 Council holds about you.</p>		

Notes

- 1 This application must be accompanied by the prescribed fee.
- 2 Within 20 working days after filing this application with the District Licensing Committee, the applicant must give public notice of the application in Form 7 (available at www.kapiticoast.govt.nz). The notice must be given in compliance with regulation 37 or 38 of the Sale and Supply Alcohol Regulations 2013 as if this application for variation were an application for the renewal of a licence.
- 3 Within 10 working days after filing this application with the District Licensing Committee, the applicant must ensure that notice of the application in Form 7 is attached in a conspicuous place on or adjacent to the site to which the application relates (unless the Secretary of the Kāpiti Coast District Licensing Committee agrees that it is impracticable or unreasonable to do so).

For Office Use: Customer Service Desk Checklist:

Applicant has met with a Licensing Inspector, and Applicant Risk Fee has been calculated (where appropriate).

Fee has been paid

Attachments checked?

CSO has checked that all identified (Yes/No Ref #) attachments are attached OR

CSO has NOT checked that all identified documents are attached

Signature of CSO _____ Date: _____