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Received by  
Kāpiti Coast District Council  
at Paraparaumu

March  
09 MAR 2025

By \_\_\_\_\_ Time \_\_\_\_\_

## APPLICATION FOR CLUB LICENCE OR RENEWAL OF CLUB LICENCE



### Form 5, Sections 100 and 127(2), 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 it is recommended that you 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 particulars set out below:

#### 1. Application Type

☐ New Club Licence ☒ Renewal of Club Licence ☐ Renewal of Club Licence with variation of conditions  
Licence number: 45/CUB/041/2022 Licence number:

#### 2. Details of Applicant

Full legal name or names to be on licence:

COASTAL VILLAS RESIDENTS ASSOCIATION INCORPORATED

Whether licence already held for premises concerned: ☒ Yes ☐ No, and if 'Yes', state kind of licence

CLUB

#### 3. Applicant Status by reference to section 28 of Sale and Supply of Alcohol Act 2012

☐ Natural person(s) ☐ Private Company  
☐ Body Corporate ☐ Public Company  
☐ Partnership ☒ Incorporated Society  
☐ Other (please specify).....

#### 4. For Applicant that is a Natural Person(s)

Full legal name:

Any aliases (and/or maiden name):

N/A

Usual residential address: Number

Street:

Suburb:

City:

Postcode:

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Sex:		Occupation:	
Date of birth:		Place of birth:	
Telephone:	Mobile:	Fax:	
Email:	Website:	Preferred mode of contact:	
<b>5. For Applicant that is a Body Corporate, Authority under which Incorporated</b>			
INCORPORATED SOCIETIES ACT 1908 ON 12.8.2015 (2630174)			
<b>6. For Applicant that is Not a Natural Person(s), Details of Contact Person</b>			
Name: HEATHER KINSEY			
Telephone: 04298 7556	Mobile: 0272 830603	Fax:	
Email: heather@consultingz.co.nz	Website: www.consultingz.co.nz	Preferred mode of contact: EMAIL	
<b>7. Postal Address for Service</b>			
Number/Street/PO Box: 12, TUI LAY		Suburb: RAUMATI BEACH	
City: PARAPARAUMU		Postcode: 5032	
<b>8. Business Details</b>			
Describe principal business, any other businesses RECREATIONAL CLUB			
<b>9. Criminal Convictions</b>			
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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, and if "Yes", then please provide nature of the offence, details of conviction, and penalty imposed.			
<b>10. Details of Premises</b>			
Address: Number		Street: SPENCER RUSSELL DRIVE	
Suburb: RAUMATI BEACH	City: PARAPARAUMU	Postcode: 5032	
Any name, trading name, or name of building: LEISURE CENTRE			
Trading Name:			
<b>If not Owned by Applicant:</b>			
Tenure: (state whether to be held as leasehold, or under tenancy agreement or licence)			
Full legal name of owner: METLIFE CARE LTD			

Registered with the 2022 Act on 23/12/2025

Address: Number		Street: SPENCER RUSSELL DRIVE	
Suburb: RAUMATI BEACH		City: PARAPARAUMU	Postcode: 5032
Is the licence conditional on completion of building work: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, and if "Yes", state details:			
<b>11. Details of Duty Manager(s)/Proposed Manager(s) If more than two certified managers please attach details separately</b>			
Full legal name: KEVIN THOMAS MILDENHALL			
Number of manager's certificate: 45/CERT/648/2018		Expiry Date: 8/3/2025	
Full legal name: HEATHER KINSEY			
Number of manager's certificate: 45/CERT/701/2018		Expiry Date: 23/10/2025	
<b>12. Club Details</b>			
State authority under which the club is incorporated: INCORPORATED SOCIETIES ACT 2022			
Membership: total membership ~ 250, number of members under 18 years of age NONE			
Contact details of club secretary - Name: HEATHER KINSEY			
Address: Number/PO Box 121		Street: TUI WAY	
Suburb: RAUMATI BEACH		City: PARAPARAUMU	Postcode: 5032
Telephone: 0424875556	Mobile: 0272830603	Fax:	
Email: heathereconsulting.nz .kinsey	Website: www.consulting.nz.co	Preferred mode of contact: EMAIL	
Is the sale of alcohol intended to be the principal purpose of the club? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, and if "No", advise the intended principal purpose of the club.			
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 type="checkbox"/> Yes <input checked="" 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.			

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

MONDAY - SUNDAY 1000 TO 2300

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

13. 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:

Yes / ☒ No  
#.....

TWO CERTIFIED AND  
EXPERIENCED BAR MANAGERS

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

Yes / ☒ No  
#.....

FROZEN READY MEALS

POTATO CRISPS

...Conditions contd-	Doc attached? Number.
<p>Describe the type and range of non-alcoholic beverages intended to be available for purchase:</p> <p>FRUIT JUICE COCA COLA GINGER BEER LEMONADE LEMON LIME + BITTERS MINERAL WATERS (SODA, GINGER ALE, TONIC) 0% HEINEKEN</p>	<p>Yes / <input checked="" type="radio"/> No #.....</p>
<p>Describe the type and range of low-alcohol beverages intended to be available for purchase:</p> <p>DB EXPORT CITRUS OR SIMILAR</p>	<p>Yes / <input checked="" type="radio"/> No #.....</p>
<p>Describe to what extent, and where, drinking water is intended to be freely available to members (if no access to mains water supply, also advise the potability of water intended to be available):</p> <p>AVAILABLE FROM A 'JUST WATER' DISPENSER IN THE LOUNGE (20m FROM BAR) + A JUG OF ICED WATER IS AVAILABLE ON THE BAR.</p>	<p>Yes / <input checked="" type="radio"/> No #.....</p>

Describe the steps intended to be taken to provide help with and information about transport options from the premises:

Yes / ☒ No  
#.....

TAXI DETAILS ON DISPLAY

Describe the steps proposed to be taken to prevent the sale and supply of alcohol to prohibited people:

Yes / ☒ No  
#.....

FACILITY USE LIMITED TO RESIDENTS AND  
OCCASIONAL FAMILY MEMBERS

NO SALES TO INTOXICATED PERSONS  
OR MINORS

Describe any other steps the applicant proposes to promote the responsible consumption of alcohol (for instance host responsibility practices):

Yes / ☒ No  
#.....

HOST RESPONSIBILITY STATEMENT  
ON DISPLAY ON THE BAR.

...Conditions contd-	Doc attached? Number.
<p>Describe any other systems (including training systems), and staff in place (or to be in place) for compliance with the Act:</p> <p>BAR STAFF TRAINED BY MANAGERS Before THEIR FIRST DUTY</p>	<p>Yes / <u>No</u> #.....</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"> <li>reduced, by more than a minimal extent, by granting the licence; or</li> <li>increased, by more than a minimal extent, by the refusal to renew the licence.</li> </ul> <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>NO IMPACT ON SURROUNDING ENVIRONMENT</p>	<p>Yes / <u>No</u> #.....</p>
<p><b>For Licence Renewal Only:</b> 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:</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>N/A</p> <p>Full reasons for variation or cancellation:</p>	<p>Yes / No #..... #..... #..... #.....</p>

14. Attachments	Doc attached? Number.
<p>• When including attachments please number the hard copies, and in the first column circle 'Yes box and write the document number on '#.....')</p> <p>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. A copy of the Evacuation of Declaration Scheme is available on the website.</p>	<p>Yes / No #.....</p>
<p>Copy of planning consent – Please attach certificate to show that the 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></p>	<p>Yes / No #.....</p>
<p>Copies of all relevant building certificates consents: Please attach certificates to show that the premise meets the requirements of Building Code 2004. <i>Not required for renewal unless structural changes have been undertaken since the last issue or renewal.</i></p>	<p>Yes / No #.....</p>
<p>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></p>	<p>Yes / No #.....</p>
<p>Copy of any certificate of incorporation (or equivalent document). <i>Not required for renewal unless changes have occurred since the last issue or renewal.</i></p>	<p>Yes / No #.....</p>
<p>Names of other clubs with which club has reciprocal visiting rights for members:</p> <p style="text-align: center; font-size: 1.5em;">NONE</p>	<p>Yes / No #.....</p>
<p>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></p>	<p>Yes / No #.....</p>
<p>Please attach a map showing the location of the premises. <i>Not required for renewal.</i></p>	<p>Yes / No #.....</p>
<p>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.</p>	
<p>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></p>	<p>Yes / No #.....</p>
<p>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></p>	<p>Yes / No #.....</p>
<p>If 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></p>	<p>Yes / No #.....</p>

**15. 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: **HEATHER KINSEY**

Date: **28/2/25**

Signature: **Heath Kinsey**

Dated at location: **PALAPANAMU**

**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.

**Notes**

- 1 This form must be accompanied by the prescribed fee.
- 2 Within 20 working days after filing this application with the District Licensing Committee (or 10 working days if it is an application for renewal), the applicant must give public notice of it in form 7. The notice must be given in compliance with regulation 36, 37, or 38 of the Sale and Supply of Alcohol Regulations 2013 (whichever applies to this application).
- 3 Except in the case of a conveyance, within 10 working days after filing this application with the District Licensing Committee, the applicant must ensure that notice of this application in form 7 is attached in a conspicuous place on or adjacent to the site to which this application relates (unless the Secretary of the District Licensing Committee agrees that it is impracticable or unreasonable to do so).

**ONCE YOUR APPLICATION IS COMPLETE, MAKE AN APPOINTMENT FOR A PRE-LODGEEMENT MEETING WITH THE LICENSING INSPECTOR.**

**PLEASE TELEPHONE (04) 296 4700 OR TOLL FREE: 0800 486 486.**

**Before lodging Application**

Once this application is complete then 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.

**After your Application is Lodged**

# Fire Evacuation Statement

This statement must be accompanied with all new or renewal applications for on-licence (including BYO licences), off-licence, special and club licences in accordance with section 100 and 127 of the Sale and Supply of Alcohol Act 2012.

## 1. Applicant details

Premises name: COASTAL VILLAS LEISURE CENTRE

Applicants name:  
(Individual or Company) HEATHER KINSEY

Premises address: SPENCEL RUSSELL DRIVE  
RAUMATI BEACH  
PAKAPAKAUMU 5072

Contact phone: Home: 042987556 Mobile: 0272 230603

Contact email: heather@consultationz.kinsey

## 2. Fire evacuation scheme

Most commonly a building requires an evacuation scheme because it is used for the following purposes:

- The gathering together, for any purpose of 100 or more persons:
- Providing employment facilities for 10 or more persons:
- Providing accommodation for more than 5 persons (other than in 3 or fewer household units):
- Storing or processing hazardous substances in quantities exceeding the minimum amounts prescribed in Schedule 3 of the Fire and Emergency New Zealand (Fire Safety, Evacuation Procedures, and Evacuation Schemes) Regulations 2018.

See Fire and Emergency New Zealand Act 2017 section 75 and 76 for further information.

If you are unsure that the building has or requires an approved evacuation scheme, check with the building owner. For the requirements of an evacuation scheme or to apply for an evacuation scheme, refer to Fire and Emergency New Zealand web site. [www.fireandemergency.nz](http://www.fireandemergency.nz) or Contact Fire and Emergency New Zealand, [wellingtondistrict-rteams@fireandemergency.nz](mailto:wellingtondistrict-rteams@fireandemergency.nz).

## Statement

I hereby state that (tick one):

☒ 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

☐ because of the building's current use, its owner is not required to provide and maintain such a scheme;

OR

☐ because of the nature of the building, its owner is exempt from the requirement to provide and maintain such a scheme.

### NOTE:

*If an approved evacuation scheme is not required, the building must have evacuation procedures that meet Part 1 of the Fire and Emergency New Zealand (Fire Safety, Evacuation Procedures, and Evacuation Schemes) Regulations 2018 – this does not require approval by Fire and Emergency New Zealand.*

Name:

HEATHER KINSEY

Signature:

Heath Kinsey

Date:

28/02/25

## Submitting applications

Email completed forms to: [licence.application@kapiticoast.govt.nz](mailto:licence.application@kapiticoast.govt.nz)

### Post to:

Alcohol Licensing Team  
Kāpiti Coast District Council  
Private Bag 60601  
Paraparaumu 5254

### or deliver to:

Kāpiti Coast District Council  
175 Rimu Road  
Paraparaumu

## Donna Want

---

**From:** heather@consultationnz.kiwi.nz  
**Sent:** Sunday, 16 March 2025 12:47 pm  
**To:** Mailbox - Licence Application  
**Subject:** Re: CL802 - Club Licence renewal application - Coastal Villas Residents Association  
**Attachments:** IMG20250316123016.jpg; IMG20250316123043.jpg

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Hi

I attach our current price list, which is the only drinks "menu" we have, plus a photo of the drinks fridge showing range of non-alcoholic options

The low alcohol option us currently DB Export Citrus, but varies depending on price

On 13/03/2025 11:38 am, Mailbox - Licence Application wrote:

Good morning Heather, thank you for the additional information.

We will still need a copy of the Drinks menu as well please (including full details of the Low Alcohol options available) before your application can be processed.

Kind regards

**Donna Want**  
Regulatory Services Support Officer  
Te Kai Maangai Whakaanga Kiritaki

Tel 04 296 4700

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**From:** [heather@consultationnz.kiwi.nz](mailto:heather@consultationnz.kiwi.nz) <[heather@consultationnz.kiwi.nz](mailto:heather@consultationnz.kiwi.nz)>  
**Sent:** Wednesday, 12 March 2025 10:54 am  
**To:** Mailbox - Licence Application <[licence.application@kapiticoast.govt.nz](mailto:licence.application@kapiticoast.govt.nz)>  
**Subject:** Re: CL802 - Club Licence renewal application - Coastal Villas Residents Association

I attach the floor plan and confirm there have been no changes, plus our notice re available food.

Also answers to the highlighted questions

On 5/03/2025 11:46 am, Mailbox - Licence Application wrote:

Good morning,

We have received your application to renew the Club Licence, along with payment of the fee.

Before this can be processed, we will need some additional supporting information – as follows:

1. Copies of the Club's Food and Drinks menus
2. An up-to-date floor plan of the licenced area (this is required to enable us to confirm if any changes have been made since the floor plan was submitted originally)
3. Please fully complete the attached application form, specifically –
  1. Page 4 where highlighted (please note Q13 "Conditions" refers to the Club itself as the applicant, (i.e. not the individual Duty Managers) - requires details of the club's experience etc
  2. Page 6 where highlighted - please provide additional detail about the steps taken to promote the responsible consumption of alcohol (e.g. low alcohol options etc)

Your application will remain on hold pending receipt of all required information.

Kind regards

**Donna Want**  
Regulatory Services Support Officer  
Te Kai Maangai Whakaanga Kiritaki

Tel 04 296 4700



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# **Coastal Villas Residents club bar**

## **Price List March 2024**

<b>Bottled wine</b>	<b>\$4.00 per glass</b>
<b>Cask wine</b>	<b>\$3.00 per glass</b>
<b>Sparkling wine</b>	<b>\$6.00 per bottle</b>
<b>All beer</b>	<b>\$3.00 per bottle</b>
<b>All spirits</b>	<b>\$3.00 per nip</b> <b>\$2.00 per mix</b>
<b>Soft drink cans</b>	<b>\$3.00</b>
<b>Soft drink bottle</b>	<b>\$3.00</b>
<b>Orange juice</b>	<b>\$1.00</b>



BUNDABERG  
LEMON, LIME & BITTERS

et  
LEMON, LIME & BITTERS  
BREWED IN AUSTRALIA  
375ML

BUNDABERG  
Diet  
LEMON, LIME & BITTERS  
BREWED IN AUSTRALIA  
375ML

BUNDABERG  
GINGER BEER  
AUSTRALIAN FAMILY OWNED  
375ML

Sprite  
NATURAL FLAVOUR  
330 mL

Coca-Cola  
CLASSIC  
Deliciously Refreshing  
330 mL

Coca-Cola  
CLASSIC  
Deliciously Refreshing  
330 mL

peppes

Speight's  
OLD DARK ALE

Speight's  
OLD DARK ALE

Speight's  
OLD DARK ALE

Speight's  
OLD DARK ALE

Speight's  
OLD DARK ALE

Speight's  
OLD DARK ALE

Steinlager  
Pilsener Beer

PORT

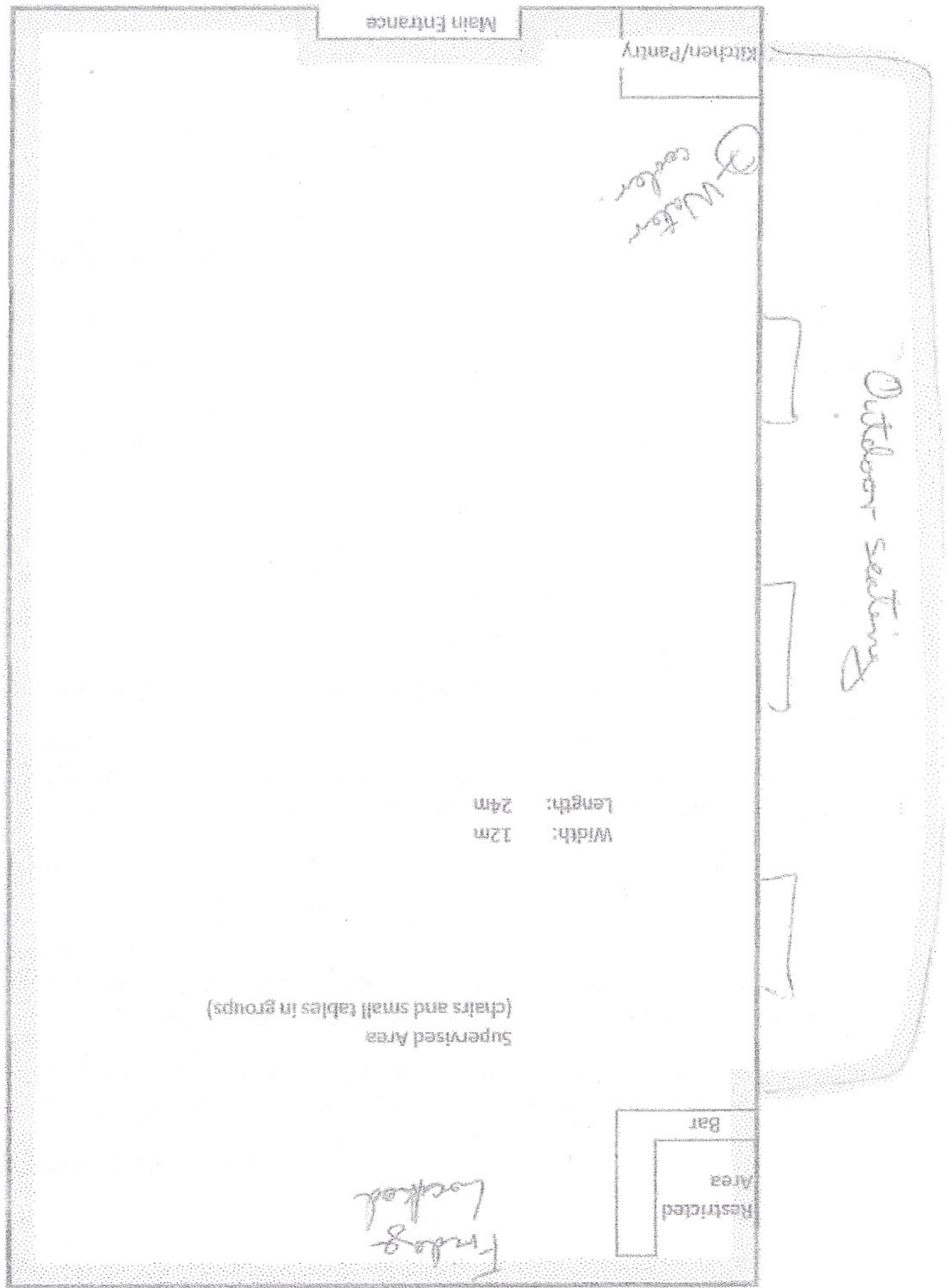
Heineken  
0.0

Heineken  
0.0

pams  
SODA WATER

pams  
DRY GINGER ALE

Attachment 1: Plan of licensed area



Not to scale

Licensed Area  
Coastal Villas  
Leisure Centre  
(under negotiation)

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

MONDAY - SUNDAY 1000 TO 2300

Do you have an encroachment license to consume alcohol on footpath? ☒ Yes ☐ No If "Yes", please attach and number it

### 13. 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

TWO CERTIFIED AND

EXERCISED BAK MANAGERS

BAL HAS BEEN OPERATING FOR ABOUT 20 YEARS. MEMBERSHIP IS ONLY FOR RESIDENTS SO NO FURTHER REGISTRATION THEM

Yes / No

Yes / No

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

FROZEN READY MEALS

POTATO CHIPS

SEE ATTACHED NOTICE

<p>Doc attached? Number</p>	<p>Describe the steps intended to be taken to provide help with and information about transport options from the premises:</p> <p>TAXI DETAILS ON DISPLAY</p>	<p>Yes / No <input checked="" type="radio"/> No</p> <p>#</p>	<p>Describe the steps proposed to be taken to prevent the sale and supply of alcohol to prohibited people:</p> <p>FACILITY USE LIMITED TO RESIDENTS AND OCCASIONAL FAMILY MEMBERS NO SALES TO INTOXICATED PERSONS OR MINORS</p>	<p>Yes / No <input checked="" type="radio"/> No</p> <p>#</p>	<p>Describe any other steps the applicant proposes to promote the responsible consumption of alcohol:</p>	<p>Yes / No <input checked="" type="radio"/> No</p> <p>#</p>	<p>Describe any other steps the applicant proposes to promote the responsible consumption of alcohol:</p> <p>HOST RESPONSIBILITY TRAINING ON DISPLAY ON THE BAR LOW ALCOHOL OPTION AVAILABLE STAFF TRAINING RE SPOTTING SIGNS OF INTOXICATION BAR MANAGER ALWAYS ON DUTY WITH BAR OPEN, WAITING AROUND</p>
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