

APPLICATION FOR ON LICENCE

Incomplete applications will not be processed

The application must be accompanied by the correct fee (see below).

When a licence has been granted, it will not be issued until the annual fee has been paid.

The District Licensing Committee (DLC) will notify the public of this application via the Dunedin City Council website and the Otago Daily Times (the advertising cost is included in the application fee).

The contact person will be emailed a copy of the public notice to be displayed on the premises.

Please use separate pages to provide extra information where necessary.

If you have any questions while completing this form, please contact Dunedin DLC staff on 03 474 3481 or email dla@dcc.govt.nz.

Please read and complete the following checklist before submitting the application

Written statement from the owner of the building or property giving you approval to sell and supply alcohol and allow its consumption on the premises. An email is acceptable, this can be sent to *dla@dcc.govt.nz* with the name of the premises and applicant included as a reference.

If a body corporate: certificate of incorporation (or equivalent document)

Planning and building certificates (not required for a conveyance)

A copy of the proposed food and drinks menus

A scale plan of the premises showing the principal entrance and the areas where alcohol is to be sold, supplied and consumed, with an indication of which areas are to be:

- undesignated anyone of any age allowed
- supervised minors must be with their parent/guardian
- restricted R18.

Map showing location of 'sensitive' locations, e.g., schools, early childhood facilities, hospitals and churches

A risk mitigation plan detailing how you will ensure the impact on the community will be minimized, e.g. control of noise and litter, parking and dispersal of patrons

Copy of host responsibility policy – for high risk premises please also include an alcohol management plan explaining how you will implement the points of the policy

Letter of authorisation if a consultant is completing this form on your behalf

Office use only

Date received:



Calculate your application fee

Select your premises type:

Class 1 restaurants – restaurants with a significant separate bar area which, in the opinion of the DLC, operate that bar at least one night a week in the nature of a tavern (such as serving alcohol without meals to tables situated in the bar area)

Class 2 restaurants – restaurants that have a separate bar (including small bar areas) but which, in the opinion of the DLC, do not operate that area in the nature of a tavern at any time

Class 3 restaurants – restaurants that only serve alcohol to tables and do not have a separate bar area

Type of premises	Points
Class 1 restaurant, nightclubs, taverns, adult premises	15
Class 2 restaurant, hotels, function centres, universities, polytechnics	10
Class 3 restaurant, other premises not specified	5
Theatres, cinemas, BYO restaurants, cellar doors	2
Premises points	

Select the latest time you intend to sell alcohol:

Latest alcohol sales time	Points
2am or earlier	0
Between 2.01am and 3am	3
3am onwards	5
Trading hours points	

Add the premises points and trading hours points together to get the total:

Use the table below to work out the fee payable:

Total points	Risk rating	Application fee (GST inc)	Annual fee (GST inc)	Total fee required
0-2	Very low	\$368.00	\$161.00	\$529.00
3-5	Low	\$609.50	\$391.00	\$1000.50
6-15	Medium	\$816.50	\$632.50	\$1449.00
16-25	High	\$1,023.50	\$1,035.00	\$2058.50
26 plus	Very high	\$1,207.50	\$1,437.50	\$2645.00

APPLICATION FOR ON LICENCE

Section 224 of the Sale and Supply of Alcohol Act 2012

To the Secretary, Dunedin District Licensing Committee

Application for an on-licence is made in accordance with the particulars set out below:

Endorsements (tick if applicable)

Contact person

BYO restaurant – tick if you are a restaurant that does not intend to sell alcohol, i.e. you want to offer BYO only Caterer's on licence – for off-site catering, instead of, or in addition to, food/alcohol supplied on the premises (please provide menus, website information, bookings etc)

Name:				
Phone:				
Email:				
Postal address:				
	Postcoo	de:		
Applicant details				
Applicant status (please select from the below	options)			
Individual	Partnership	Body corporate		
Public company	Private company	Club		
Trustee	Local authority	Licensing trust		
Government department or other instrument of the Crown	Manager under the Protection of Personal Property Rights Act 1988	Board, organisation or other body		
Legal name/s of the person/s or organisation t Include any other names you may be known by		ales.		
Full legal name:				
Any other names you may be known by:				
Address:				
Postcode:				
Occupation:				
Phone:				
Email:				
Date of birth: Place	e of birth:	Gender:		
Is this your principal business? Yes No				
Please state any other businesses:				

Further details where the applicant is a company or an incorporated society For a company (whether incorporated under the Companies Act 1993 or equivalent foreign legislation), give full legal names of
directors.
Where the applicant is a private company , give full details of each person who holds any shares issued by the company as follows: full name, address, date of birth, place of birth, designation in company and percentage of shares held.
Please also provide:
Authorised capital: Paid up capital:
Where the applicant is a public company , give full details of each person who holds 20% or more of the shares, or any particular class of shares, issued by the company, as follows: full name, address, date of birth, place of birth, designation in company.
Further details where the applicant is a partnership
Full details of each partner as follows: full legal name, address, date of birth, place of birth.
Signature of each partner
If a body corporate, please state the authority under which you are incorporated, e.g. Companies Act 1993, Incorporated Societies

Criminal convictions

Please state all criminal convictions against any applicants including Directors or Shareholders (except convictions for offences to which the Criminal Records (Clean Slate) Act 2004 applies).

Full Name	Conviction			Date of conviction
(Use a separate sheet if necessar	y)			
Details of premises				
Proposed trading name:				
Current trading name (if appli	cable):			
Name of the building (if applic	able):			
Address of the premises:				
			Postcode:	
Does the applicant own the pr	emises? Yes No			
If "no", please provide the full	legal name and address of the owner:			
	d from the owner of the building or prop ses. This can be sent to <i>dla@dcc.govt.nz</i> v			
What type of lease does the ap	oplicant have and when does it expire?			
Is the licence conditional on co	ompletion of building work? Yes	No		
If yes, please provide details:				
Does the building have a curre	ent building warrant of fitness (BWOF)?	Yes	No	
What is the maximum occupan	ncy of your entire premises including out	side area	s?	
Please describe in detail the nurinals, unisex facilities and a	umber and nature of the toilet arrangem ccessible facilities:	nents, e.g.	number of male an	d female toilets, number of

Fire Evacuation Declaration - Fire and Emergency Act 2017

Which of the following fire evacuation statements applies to you?

Is the sale of alcohol intended to be the principal purpose of the business?

If no, what is the principal purpose of the business?

If unsure, check with Fire and Emergency New Zealand

The owner of the building in which the premises is situated provides and maintains an evacuation scheme as required by section 76 Fire and Emergency Act 2017

Because of the building's current use, the owner is not required to provide and maintain an evacuation scheme

Because of the nature of the building, the owner is exempt from the requirement to provide and maintain an evacuation

Signed					Date		
Details of con	Details of conveyance (e.g. if this application is for a ship, bus, train etc.)						
Type of convey	ance (e.g. ship, t	ous or train):					
Trading name	of conveyance:						
Registration nu	umber:						
Address where	e based:						
					Postcode:		
Does the appli	cant own the cor	nveyance? Y	es No				
If "no", please ¡	provide the full l	egal name and a	ddress of the ow	vner:			
A written statement is required from the owner of the building or property giving you approval to sell and supply alcohol and alloits consumption on the premises. This can be sent to dla@dcc.govt.nz with the name of the premises and applicant included as a reference. What type of lease does the applicant have and when does it expire?							
Business deta	Business details						
Is there a curre	ent alcohol licen	ce for the premi	ses?? Yes	No	Type: on	off cl	ub
Licence numbe	Licence number: Expiry:						
What is the general nature of the business to be conducted under the licence?							
Tavern/bar	-	Café/restaura	ant	Hotel	Nightclub	Entertai	nment
Other (specify)							
Please select which days, and during which hours, you wish to be licensed to sell alcohol:							
Day	Mon	Tues	Weds	Thurs	Fri	Sat	Sun
Start time							
End time							

Yes

No

	Yes	No	If yes, provide details:			
Do	es the ar	oplica No	int provide, or intend to provide, any services other than those related to the sale or supply of alcohol or food? If yes, provide details:			
Wh	What designation(s) are required for the premises? Undesignated (people of any age are permitted) Supervised (people under 18 years must be accompanied by a parent or legal guardian)					
lf c			people under 18 years not permitted) nations are required for different areas, please describe:			
Pro	inager d ovide the I name		S w details for each manager or proposed manager. Date of birth Manager's certificate number Expiry date			
	nditions nat exper		e and training does the applicant have in relation to premises licensed to sell and/or supply alcohol?			
Wh			does the applicant intend to make for the sale and/or supply of: De type and range and when it will be served, attach menu)			
ii.	non-alc	oholi	c drinks (describe type and range)			
iii.	low-alc	ohol	drinks (2.5% alcohol by volume or less, describe type and range)			

Does the applicant supply or sell, or intend to supply or sell, any goods other than alcohol and food?

To what extent, and where, will drinking water be for	reely available to patron	s?		
If no access to mains water supply is available, hov	v will clean drinking wat	er be made available?		
What steps will be taken to provide help with, and i	nformation about, trans	port options from the premises?		
What steps will be taken to prevent the sale and su	pply of alcohol to prohib	ited people (minors and intoxicated people)?		
What other steps will the applicant take to promote	the responsible consur	nption of alcohol?		
How does the applicant intend to staff the premises Please provide the number of staff and their experi		with the Act?		
How will the applicant train staff to ensure they cor	mply with the Act?			
For high risk premises, what arrangements will be made for security staff?				
Signed	Date	Place		

Privacy statement

The information you provide in this application, and any supporting documents, will be used by the Dunedin City Council to process your application under the Sale and Supply of Alcohol Act 2012. The information will be shared with the Dunedin District Licensing Committee (DLC), Dunedin District Licensing Inspectors, Police and the Medical Officer of Health as part of the approval process. If required, the information may form part of a public hearing before the DLC and may be used in any subsequent decision relating to your application. The decision will be publicly available.

If your application is publicly advertised, the associated information will be publicly available.

The DCC is required to keep a statutory register of all alcohol licence applications and anyone can request a copy of that information under the Local Government Official Information and Meetings Act 1987. This information may also be used or shared for other purposes in line with the Privacy Act 2020. If you would like a copy of the personal information we hold about you, or to have the information corrected, please contact us at privacy@dcc.govt.nz or 03 477 4000.