

Notice of Management Change - Section 231, Sale and Supply of Alcohol Act 2012

GUIDE NOTES

The Sale and Supply of Alcohol Act 2012 allows an uncertified person to be appointed as an acting or temporary manager if a holder of a Manager's Certificate is not available. An acting or temporary manager is considered to have the responsibilities of the holder of a Manager's Certificate and can be prosecuted for breaches of the Act just as the holder of a Manager's Certificate can.

An **acting manager** can be appointed to cover for short term absences where the manager is ill, absent, or on holiday. The acting manager may only be appointed for up to three weeks at any one time and up to six weeks in any 12-month period.

A **temporary manager** can be appointed where a manager is ill or absent for any reason or is dismissed or resigns. The person appointed must apply for a Manager's Certificate within two working days. The person may then continue as a temporary manager until the application for a Manager's Certificate is determined.

Notifying changes - A licensee must give notice of the appointment, cancellation or termination of any permanent, temporary or acting duty manager, within 48 hours of the change to both the Licensing Inspector and the Police (if the temporary or acting duty manager is appointed for 48 consecutive hours or less no notification is required).

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What are you notifying?		
 □ Temporary Manager □ Acting Manager □ New Certified Manager Appointment □ Termination/Cancellation of Manager Appointment 		
Licence Details:		
Name of licensed premises:		
Licensee:		
Licence Number: 51/ON/	51/OF/	
Contact Name:	Contact Phone:	
Contact email:		
Temporary Manager (Note that a temporary manager must apply for a manager's certificate within two days of their appointment)		
Full name:	Date of Birth:	
Residential address:		
Who they are replacing and certificate number:		
Reason:		
Acting Manager		
Full name:	Date of Birth:	
Residential address:		
Who they are covering and certificate number:		
Reason:		
Effective from:	to	

Full name:			
Certificate number: Certificate expiry date: Effective from: Date of Birth: Certificate number: Date of Birth: Certificate number: Certificate expiry date: Birch and Date Sign and Date Applicant's signature: Print name and position: Applicant's signature: Termination to: The Secretary Tasman District Licensing Committee Private Bag 4	New manager appointment:		
Effective from: Termination/Cancellation of manager appointment: Full name:	Full name:	Date of Birth:	
Termination/Cancellation of manager appointment: Full name:	Certificate number: Certificate number:	cate expiry date:	
Full name:	Effective from:		
Certificate number: Certificate expiry date: Effective from: Sign and Date Date: Print name and position: Applicant's signature: Forward this completed form, within two working days of appointment or termination to: The Secretary Tasman District Licensing Committee Private Bag 4	Termination/Cancellation of manager appointment:		
Effective from: Sign and Date Date: Print name and position: Applicant's signature: Forward this completed form, within two working days of appointment or termination to: The Secretary Tasman District Licensing Committee Private Bag 4	Full name:	Date of Birth:	
Sign and Date Date: Print name and position: Applicant's signature: Forward this completed form, within two working days of appointment or termination to: The Secretary Tasman District Licensing Committee Private Bag 4	Certificate number: Cer	tificate expiry date:	
Date: Print name and position: Applicant's signature: Forward this completed form, within two working days of appointment or termination to: The Secretary Tasman District Licensing Committee Private Bag 4	Effective from:		
Print name and position: Applicant's signature: Forward this completed form, within two working days of appointment or termination to: The Secretary Tasman District Licensing Committee Private Bag 4	Sign and Date		
Forward this completed form, within two working days of appointment or termination to: The Secretary Tasman District Licensing Committee Private Bag 4	Date:		
The Secretary Tasman District Licensing Committee Private Bag 4	Print name and position:	Applicant's signature:	
The Secretary Tasman District Licensing Committee Private Bag 4	Forward this completed form, within two working days	of appointment or termination to:	
Tasman District Licensing Committee Private Bag 4	To ward this completed form, within two working days of appointment of termination to.		
Private Bag 4	The Secretary		
Richmond 7050 or email to regulatory.admin@tasman.govt.nz	Private Bag 4		
	New Zealand Police		
	Private Bag 39 Nelson 7040 or email to NNbays.alcohol@police.govt.nz		