

Licence No. \_\_\_\_\_  
Office use only

## Application for a temporary authority checklist

This application and all supporting documentation must be lodged with the Agency at least 10 working days before the Temporary Authority is required to commence.

### Have you provided the following?

Fee - \$296.70

### Supporting documents

You must provide copies of all these documents with your application – if you don't, your application can be delayed or rejected.

- Signed lease or purchase agreement
- Certificate of Incorporation
- A copy of the current holder's alcohol licence
- Written consent from the building or conveyance owner, and body corporate if required (*template attached*)
- Manager certificates (*if not issued by Tasman District Council*)
- CV or details of experience in the alcohol industry
- Menus and drinks lists

### Application for registration of food business

For on-licence premises, you can find information about registering to sell food at: [www.tasman.govt.nz/my-business/food-premises-and-licensing](http://www.tasman.govt.nz/my-business/food-premises-and-licensing)

I have applied for a certificate of registration

### Need help?

Phone Tasman District Council and ask for Alcohol Licensing on 03 543 8400 or email [regulatory.admin@tasman.govt.nz](mailto:regulatory.admin@tasman.govt.nz)

**Tasman District Council**  
Email [info@tasman.govt.nz](mailto:info@tasman.govt.nz)  
Website [www.tasman.govt.nz](http://www.tasman.govt.nz)  
24 hour assistance

**Richmond**  
189 Queen Street  
Private Bag 4  
Richmond 7050  
New Zealand  
Phone 03 543 8400

**Murchison**  
92 Fairfax Street  
Murchison 7007  
New Zealand  
Phone 03 523 1013

**Motueka**  
7 Hickmott Place  
PO Box 123  
Motueka 7143  
New Zealand  
Phone 03 528 2022

**Tākaka**  
78 Commercial Street  
PO Box 74  
Tākaka 7142  
New Zealand  
Phone 03 525 9972

# Application for a temporary authority

## Section 136, Sale and Supply of Alcohol Act 2012

To: The Secretary  
District Licensing Committee  
Private Bag 4  
Richmond 7050

Please **PRINT** clearly.

### Applicant details

Full legal name/s of the person/s or company who will receive any proceeds from alcohol sales:

Address:

Postcode:

Postal address for service of documents:

### Contact details

Name of daytime contact:

Phone number(s):

Email (*this is our preferred way of contacting you*):

Have you been convicted of any offence, diversion or any matter currently before the Court (including traffic offences)?

Yes  No

If yes, please state the type and date of conviction.

### Current licence details

Type of licence:  On-licence  Off-licence

Licence number: 51/ON/\_\_\_\_\_ 51/OFF/\_\_\_\_\_

### Premises details (*For a conveyance licence, skip and complete the next section*)

Address:

Current trading name for the premises:

Proposed/new trading name for the premises:

## Conveyance details

Type of conveyance (*for example, bus, ship*):

Address of home base:

Trading or other name:

## Further details

What right, title, estate or interest does the applicant have?

In the premises or conveyance (*for example, leasee or property owner*):

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In any business conducted on the premises or conveyance (*for example, purchase of business*):

Does the applicant intend to personally sell, supply or deliver alcohol?

Yes     No

If no, what is the full legal name, residential address and occupation of the person through whom the applicant intends to carry on the sale and supply (*or delivery*) of alcohol?

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Date the Temporary Authority should commence: \_\_\_\_\_

Full name of any duty manager(s) / nominated person(s) in charge of the supply of alcohol at the event. If you will have certificated duty managers, provide their certificate numbers and expiry dates. Name:

Certificate number: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Name:

Certificate number: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Name:

Certificate number: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Is this the first application for a temporary authority?

Yes     No

Please describe the applicant's experience, qualifications and training in the sale and supply of alcohol (*attach CV or other details*)

**Please note:** The New Zealand Police are required by the Sale and Supply of Alcohol Act to make enquiries into the suitability of the applicant. This will involve informing the District Licensing Committee of any convictions or concern involving the applicant. Any concerns will be forwarded to the applicant. By signing this form, you consent to the release of this information.

### Sign and Date

**Dated at (place):**

**on (date):**

Print name:

Applicant's signature:

### Payment

Payment can be made by:

- Internet banking to ASB 12-3193-0002048-03
- By cash or card at any Council Office (credit card payments will incur a fee)

# Premises or conveyance owner's consent - template

To: The Secretary  
District Licensing Committee  
Private Bag 4  
Richmond 7050

## Person giving consent

Name \_\_\_\_\_ Date \_\_\_\_\_

Company (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

Dear Secretary

I am  the owner  Body Corporate Chair  building manager  other\*: \_\_\_\_\_

of \_\_\_\_\_  
(name or address of building)

I confirm that I

consent to  am authorised by the owners to consent to  
the proposed sale and supply of alcohol by

\_\_\_\_\_

(applicant name – must match application) on the following days and hours

\_\_\_\_\_

(days and hours must match application)

The following extra conditions apply to this consent (write none if none applicable)

Yours faithfully,

\_\_\_\_\_

(Name of person giving consent)

\_\_\_\_\_

(Signature)

\* If none of these options apply, describe the letter writer's role and why they are authorised to give consent on behalf of the building owner.