

# West Coast Councils



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Record No.:
Date lodged:
Debtor No.:
Application Fee:
Receipt:
Invoice:

## Application for Special Licence [Form 6] Section 138 Sale and Supply of Alcohol Act 2012

Please use a separate sheet of paper if there is insufficient space provided.

- To: The Secretary  Buller District Licensing Committee  
 Grey District Licensing Committee  
 Westland District Licensing Committee

Application for a Special licence is made in accordance with the details set out below.

### 1. Type of special licence applied for, and whether event foreseeable

State whether event is on-site or off-site:  On-Site  Off-Site

State whether the event for which the special licence is applied for could reasonably have been foreseen:

Yes  No If no, describe circumstances: \_\_\_\_\_

If no, an application for Waiver under Section 208 must also be applied for.

### 2. Details of Applicant

a. Status of Applicant (tick appropriate box):

*If your organisation does not fit any of this criteria, it needs to be lodged by an individual (natural person) on behalf of your organisation)*

- Natural Person  Private Company  Public Company  
 Partnership  Territorial/Local Authority  Licensing or Community Trust  
 Trustee  Government department or other instrument of the Crown  
 Manager under the Protection of Personal and Property Rights Act 1988  
 Board, organisation, or other body to which section 28(1)(c) of the Act applies  
 Body corporate (S 28(1)(b) of the Act). State authority of incorporation: \_\_\_\_\_

b. Full legal name or names to be on licence: \_\_\_\_\_

If applicant is an individual, note any maiden name or aliases: \_\_\_\_\_

c. Postal Address for service of documents: \_\_\_\_\_

d. Contact details for Applicant:

Full legal name of contact person: Surname \_\_\_\_\_

Christian Name/s \_\_\_\_\_

Maiden Name \_\_\_\_\_

e. Alias (if applicable): \_\_\_\_\_

- f. Usual residential address: \_\_\_\_\_
- g. Postal address for service of documents: \_\_\_\_\_
- h. Daytime contact name and number: \_\_\_\_\_
- i. Fax number: \_\_\_\_\_
- j. Email Address: \_\_\_\_\_
- k. Website (if applicable): \_\_\_\_\_
- l. Preferred mode of contact: \_\_\_\_\_
- m. Date and Place of Birth: \_\_\_\_\_
- n. Gender:  Male  Female
- o. Criminal Convictions of Individuals, Company directors or partners: (State all 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)

Nature of offence	Date of Conviction	Penalty

- p. I agree to the release of information obtained by the Police when compiling background checks.  
 Yes  No (Note that failure to allow Police to disclose this information may result in your application being determined at a hearing.)

**3. Details of all Managers appointed:**

Full Legal Name: \_\_\_\_\_

Certificate No. \_\_\_\_\_ Expiry: \_\_\_\_\_

Full Legal Name: \_\_\_\_\_

Certificate No. \_\_\_\_\_ Expiry: \_\_\_\_\_

Full Legal Name: \_\_\_\_\_

Certificate No. \_\_\_\_\_ Expiry: \_\_\_\_\_

**4. Details of Premises: On-Site and Off-Site Event/s (if not a conveyance)**

- a. Address of proposed licensed premises: \_\_\_\_\_
- b. Details of Business if applicant is not an individual: (Describe principal business and any other businesses)  
 \_\_\_\_\_
- c. Is a licence already held for the premises or conveyance concerned:  Yes  No If yes:  
 State kind of licence, licence number and expiry: \_\_\_\_\_
- d. Any name, trading name or name of building (if any): \_\_\_\_\_

e. Tenure of the premises: (eg leasehold, under tenancy agreement of licence) \_\_\_\_\_

f. Does the applicant own the proposed licenced premises? (Tick one)  Yes  No

If no, please provide the following details:

Full name and address of owner: \_\_\_\_\_

Signature of owner authorising use of premises: \_\_\_\_\_

g. Is the licence sought conditional on the completion of building work? (Tick one)  Yes  No

If yes, please provide details: \_\_\_\_\_

### 5. Details of conveyance( if not applicable proceed to 6.)

a. Type of conveyance: (eg. Ship, railway carriage, bus, etc) \_\_\_\_\_

b. Any registration number: \_\_\_\_\_

c. Any home base address: \_\_\_\_\_

d. Any name used or proposed for conveyance: \_\_\_\_\_

### 6. Event Details

Days/Dates and hours proposed for sale of alcohol: (iUse separate piece of paper to itemise if more than three events)

<b>1</b> Event:		
Date/s:		Proposed hours:
Estimate of number of people attending:	Probable age distribution of people attending:	Types of containers in which alcohol is to be sold:
Nature (principal purpose) of event: <i>(example – wedding, fundraiser etc)</i>		
Is the applicant engaged, or intending to be engaged, in the sale or supply of any goods other than liquor and food, or in the provision of any services other than those directly related to the sale or supply of liquor and food? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the nature of those other goods or services?		

<b>2</b> Event::		
Date/s:		Proposed hours:
Estimate of number of people attending:	Probable age distribution of people attending:	Types of containers in which alcohol is to be sold:
Nature (principal purpose) of event: <i>(example – wedding, fundraiser etc)</i>		
Is the applicant engaged, or intending to be engaged, in the sale or supply of any goods other than liquor and food, or in the provision of any services other than those directly related to the sale or supply of liquor and food? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the nature of those other goods or services?		

3 Event :

Date/s:	Proposed hours:
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Estimate of number of people attending:	Probable age distribution of people attending:	Types of containers in which alcohol is to be sold:
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Nature (principal purpose) of event:  
*(example – wedding, fundraiser etc)*

Is the applicant engaged, or intending to be engaged, in the sale or supply of any goods other than liquor and food, or in the provision of any services other than those directly related to the sale or supply of liquor and food?  
 Yes  No If yes, what is the nature of those other goods or services?

**7. Conditions: All events**

a. What experience and training does the applicant have? \_\_\_\_\_  
\_\_\_\_\_

b. What steps will be taken to ensure that the requirements of the Act in relation to the sale of alcohol to prohibited persons are observed? (i.e. minors, intoxicated persons, other persons to whom alcohol may not be sold pursuant to the licence) are observed?  
\_\_\_\_\_  
\_\_\_\_\_

c. What other steps will be taken to promote the responsible consumption of alcohol?  
\_\_\_\_\_  
\_\_\_\_\_

d. What other systems (incl. training systems, security) and staff are or will be in place for compliance with the Act?  
\_\_\_\_\_  
\_\_\_\_\_

**8. Further Conditions for On-Site Event/s Only**

a. What provision will be made for the sale and supply of:  
Food:  Attach Menu/s or separate list advertising types of food and availability.  
If application is for more than one event, please itemise menus/food service for each event on separate page.  
Non-alcoholic beverages (specify types): \_\_\_\_\_  
\_\_\_\_\_

Low alcohol beverages (specify brands): \_\_\_\_\_  
\_\_\_\_\_  
b. To what extent and where will free drinking water be freely available to patrons: \_\_\_\_\_  
\_\_\_\_\_

- c. If no access to mains water supply, potability of water intended to be available (you may be asked to provide a certificate certifying the potability of the water) \_\_\_\_\_  
\_\_\_\_\_
- d. What steps will be taken to provide assistance with or information about alternative forms of transport from the premises?  
\_\_\_\_\_  
\_\_\_\_\_
- e. What is the land near the proposed premises currently being used for? (ie are you in a commercial or residential area)  
\_\_\_\_\_
- f. Will the granting of the licence impact on neighbouring land use? If so, in what way and how will you mitigate these effects?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- g. What are the current and possible future noise/nuisance, vandalism, litter levels and how do you intend to mitigate them?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- h. What other on-licensed premises are there in the vicinity of the proposed venue?  
\_\_\_\_\_  
\_\_\_\_\_
- i. Will the granting of this licence contribute to an increase in alcohol related problems in the area? (Explain)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 9. Attachments

- Checklist provided indicating all relevant attachments required.

## 10. Signature: Please ensure this application is signed and dated ☺

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_  
(Place ie. Westport, Greymouth, Hokitika) (day) (month) (Year)

\_\_\_\_\_  
Applicant Signature

## Notes

1. This form must be accompanied by the prescribed fee
2. If required to do so by the secretary of the District Licensing Committee, the applicant must within 10 working days after filing this application with the committee ensure that notice of this application in form 8 is attached in a conspicuous place on or adjacent to the site to which this application relates.