

For office use only:

Connect Ref:

ALC /            /

# Application for new Club Licence

Section 100 and 127 (2), Sale and Supply of Alcohol Act 2012

## About this application:

Please ensure you have read the **step-by-step guide before you apply**

[www.ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences](http://www.ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences)

Please complete this form and then arrange a **Lodgement Meeting** appointment with an Alcohol Licensing Inspector in order to lodge your completed application and pay the associated fee. The Alcohol Licensing Team are located at Civic Offices, 53 Hereford Street, Christchurch 8154 and can be contacted by phone (03) 941 8999 or email [alcohollicensing@ccc.govt.nz](mailto:alcohollicensing@ccc.govt.nz)

**This application cannot be accepted if the form is incomplete and documents are missing. You will be given an invoice at the Lodgement meeting. Filing is not complete unless your invoice is paid.**

*Note: All application fees are for processing of an application and are non-refundable, they must be paid when you apply.*

**We can only process your application once we have both the Proof of Payment of fees AND the required paperwork (application form and required documents).**

Accepted methods of payment are: CASH – EFTPOS – Internet Banking.

Any questions contact the Alcohol Licensing Team to discuss and for more information, ph 03 941 8999 or [alcohollicensing@ccc.govt.nz](mailto:alcohollicensing@ccc.govt.nz)

This application for a club licence is made in accordance with the details set out below.

## 1. New application for:

- Trading name:
- Licensee:

## 2. Lodgement meeting, Fees Calculation Invoice and Payment

(Refer Fees information sheet) To be completed at lodgement meeting with inspector before invoicing.

At the Lodgement meeting an inspector will – check the application for completeness, confirm the risk weighting and fees payable, and issue the invoice for payment.

### Weighting and fees calculation

- |  |                       |            |  |        |      |           |
|--|-----------------------|------------|--|--------|------|-----------|
| a. Type of licensed premises:  | Weighting:            |            |  |        |      |           |
| b. Latest alcohol sale time:   | Weighting:            |            |  |        |      |           |
| c. Enforcements:   | Weighting:            |            |  |        |      |           |
| d. Total weighting:  | Fee Category:         | Very low   | Low  | Medium | High | Very high |
| <b>e. Fees payable: Application fee: \$</b>                          | <b>Annual fee: \$</b> |            |  |        |      |           |
| f. Premises Certificate of Compliance (alcohol) application lodged?  | Yes                   | No         | If YES, Certificate already issued and attached? | Yes    | No   |           |
| g. Inspector confirmed application vetted and complete for lodgement | Yes                   | No         | <i>(refer to lodgement notes on back page)</i>   |        |      |           |
| Inspectors Signature:  | Date:                 | dd/mm/yyyy |  |        |      |           |

*To be completed by the inspector at the lodgement meeting.*

### Council Use Only

Connect Invoice number:

Receipt No.:

Date:

### 3. Details of the Club Please give legal name as appears on Certification of Incorporate or equivalent document.

a. Full Society, Association or Club name to be on licence:

b. Is the Club incorporated?      Yes      No

If YES

Under what Act is the Club incorporated?

What is the date of the Club's incorporation?

c. Postal address for service of documents:

Suburb:

City:

Postcode:

d. Is this address used for any other business with Council? e.g. Rates; dog registration.      Yes      No

*If Yes and this address has changed recently please go to the "Contact us" link at [www.ccc.govt.nz/contact-us](http://www.ccc.govt.nz/contact-us) to update your address details for all other Council business.*

e. Daytime Contact Name:

Phone:

Mobile:

Email:

Role of Contact person:

f. Status of Club:      Chartered Club      Sport Club      Other

g. Predominant purpose of Club:

h. Membership numbers: Total of      of whom about      are under the age of 18 years.

i. Do you have affiliated members?      Yes      No

*Note: Please provide a copy of the **Club's Certificate of Incorporation**, and of the **Club Charter and Rules** (or any other equivalent document that: 1. details the clubs membership rules, including about **affiliated membership**, and 2. that names (lists) all the other clubs with which the club has **reciprocal visiting rights for members**)*

j. Full name of Secretary:

Address of Secretary:

Occupation of Secretary:

Contact details of Secretary:      Phone:

Mobile:

Email:

k. Preferred mode of contact:

### 4. Details of all Managers appointed for the premises

a. Full list of all details of all manager(s) to be employed and Certificate Numbers of Manager's Certificate(s):  
*(Please attach separate sheet if required)*

Name:	Known as:	Address:	Certificate number, or if no certificate held confirm if they have applied for one	Expiry Date

*Note: please remember to complete a separate **Notice of Duty Manager Appointment or Change form** for all appointments or termination of duty managers.*

## 5. Details of the premises

a. Legal address of Club premises:

Is this premises location known by any other address?

b. Is a licence already held for this premises?      Yes      No      If YES, licence number:

c. Is a licence sought conditional upon construction/completion of the premises?      Yes      No

d. Does the Club own the proposed licensed premises?      Yes      No

If NO

Owners full name:

Owners address:

Form and term of tenure: (State whether to be held as leasehold, or under tenancy agreement, or licence)

*Note: Additional information and/or signed documents may be requested in some instances to confirm tenure.*

e. **Details of premises area** – the proposed licence includes: (Please attach plans annotated with licensed area)

Internal areas include:

External areas include:

Any leased public space areas?      Yes      No      If YES, please attach copy of the lease with plans included.

f. What part (if any) of the premises does the Club intend should be designated as:

- **Restricted designation: no person under 18 may be present on the premises.**
- **Supervised designation: persons under 18 may be present, but only if accompanied by a parent, or legal guardian, i.e. Court appointed. Those under 18 cannot be sold alcohol, but may be supplied by the parent or guardian.**
- **Un-designated: Any person of any age may be present on the premises. Those under 18 cannot be served alcohol, but may be supplied by their parent, or legal guardian.**

*Note: Any designated areas MUST be marked on the plan for the premises.*

Area	Designation
------	-------------

g. Does the Club share the premises with any other Club?      Yes      No

If YES

What is the name of the other club?

What months of the year do the respective clubs use the premises?

Do they hold a Club Licence?      Yes      No

h. FIRE SAFETY – Section 100(d):

I certify that the Building Owner has confirmed with me that the building:      **has**      **does not require** an Evacuation Scheme for public safety which meets the requirements of section 76 of the Fire and Emergency New Zealand Act 2017.

Name of owner:

Signature:

Date:

dd/mm/yyyy

A registered Evacuation Scheme is required when:

- the building can hold more than 100 people;
- there are more than 10 employees in the entire building; or
- overnight accommodation is provided for more than 5 people.

*Please contact Fire and Emergency NZ (telephone 372 8600) for more information about evacuation schemes and fire safety requirements.*

## 6. Conditions Please attach separate sheet if required

- a. On which days and during which hours does the Club intend to sell alcohol under this licence?
- b. A Club Licence permits you to sell alcohol to authorised customers under s60(1)(a).  
Do you also want to be able to sell alcohol to guests of authorised visitors from other clubs?      Yes      No
- c. Is the applicant engaged, or intending to be engaged, in the sale or supply of any goods other than alcohol and food, or in the provision of any services other than those directly related to the sale or supply of alcohol and food?      Yes      No
- If Yes, what is the nature of those other goods or services?

**The following questions relate to Host Responsibility. In conjunction with completing the questions, you should provide with this application a copy of your 'Host Responsibility Policy' by using the guidelines on our website at [ccc.govt.nz/alcohol](http://ccc.govt.nz/alcohol)**

- d. What provisions does the applicant intend to make for the sale and supply of alcohol?
- Food (attach menu's, including all day or snack menu):
  - Non-alcoholic refreshments:
  - Low-alcoholic beverages (Between 1.1% and 2.5%ALC):
  - Alcohol range available (attach full drinks menu)
- e. What steps does the Club propose to take to provide assistance with or information about alternative forms of transport from the club, for staff and patrons?
- f. What other steps does the Club propose to take aimed at promoting the responsible consumption of alcohol?
- g. What steps does the Club propose to take to ensure that the requirements of the Act in relation to the sale of alcohol to prohibited persons (i.e. minors, intoxicated persons, other persons to whom alcohol may not be sold pursuant to the licence) are observed?
- h. To what extent, where, and how is drinking water intended to be freely available to patrons? (i.e. explain whether water is bar service only, water jugs, or plumbed water stations and locations)
- i. What appropriate systems, staff and training does/will the applicant have in place to ensure compliance with the law?

- j. What are the current and possible future noise levels and how does the applicant intend to mitigate them?
  
- k. What are the current and possible future levels of nuisance and vandalism and how does the applicant intend to mitigate them?
  
- l. What other licensed premises are there in the vicinity of these proposed premises? And, will the granting of this licence contribute to an increase in alcohol related problems in the area? (Explain)
  
- m. What is the land near the proposed premises being used for? Will the granting of a licence for your premises impact on changing neighbouring land use? If so, in what way?

## 7. Please attach the following documents:

You must provide the following prescribed documents (your application will not be accepted without these documents)

Floor plans annotated to show licensed area (for whole of premises, including any outside area and mark any restricted or supervised designated areas)

Leased outside areas – Footpath, public or private space lease details and plan if held for any outside areas (annotated to show licensed area)

Photo of principle entrance to the premises

Certificate of Incorporation (or equivalent document. Include full registration details of the Society.)

A copy of the Club Charter or Rules (or any other equivalent document that:

1. Details the clubs membership rules, including details of any affiliated memberships, and
2. A list of the names the other clubs with which the club has reciprocal visiting rights for members)

Premises Certificate of Compliance (Alcohol)

**You should also provide the following documents to assist with assessment of your application (if these are not provided this will delay assessment of your application)**

Duty Manager appointment forms for all your duty managers

Training documentation, including explaining the systems you use to check membership at the bar.

Food Menu

Drinks/Beverage Menus

Host Responsibility Policy

A Club Alcohol Management Plan and Club Alcohol Policy (desirable)

Any other information you wish to include to support your application

Notes:

- The Agencies may request to inspect a copy of your staff training plan/manuals.
- Tenure (Q5d) – Additional information and/or signed documents may be requested in some instances to confirm tenure.
- Please remember to complete a separate **Notice of Duty Manager Appointment or Change form for any new Duty Manager appointments or termination of duty managers** and provide a copy to both the Alcohol Licensing Team and the Police, as detailed on the form [ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/managers-certificate/notification-of-management-change](http://ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/managers-certificate/notification-of-management-change)

## Important to note – Public notification of application

All alcohol licence application public notices are published on the dedicated webpage located on [ccc.govt.nz/alcohol](http://ccc.govt.nz/alcohol). Applications are no longer required to be published in the local newspaper.

1. We will take care of the publication of your public notice when you make your application to us.
  - There is a small administration charge for our assistance in loading the content onto the licensing notification webpage. The fee will need to be paid in advance of publication.
  - Your notice will be published within a week of your application being received and the public notice fee being paid.
2. We will send you a copy of the published notice for your records at the same time we send you the front entrance notice for display on your premises. You will need to display the notice on your main entrance for at least 15 working days.
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).

## 8. Payment

You will be issued an invoice at your lodgement meeting when you file your application. **Payment of Fee MUST be made immediately on receiving the invoice.**

Accepted methods of payment are: CASH – EFTPOS – INTERNET BANKING

Note: All application fees are for processing of an application and are non-refundable, they must be paid when you apply. *We can only process your application once we have both the Proof of Payment of fees AND the required paperwork (application form and required documents).*

Any questions? Contact the Alcohol Licensing Team to discuss and for more information, ph 03 941 8999 or [alcohollicensing@ccc.govt.nz](mailto:alcohollicensing@ccc.govt.nz).

## 9. Authorisation You must complete this section in full

**Have you completed ALL relevant sections of this form and attached ALL requested documents?**      **Yes**      **No**

Incomplete applications WILL be returned. **We can only process your application once we have BOTH the Proof of Payment of fees AND the required paperwork (application form and required documents).**

## Privacy Statement

Information contained in your application and any supporting information will be held by Christchurch City 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 as part of the public notification of your application. The information will be provided to the statutory reporting agencies (the Police, the Medical Officer of Health, and the Council's Licensing Inspectors) for the purposes of assessing and reporting on your application, and to the Christchurch District Licensing Committee for the purposes of making a decision on your application. This information may form part of a public hearing of your application before the Christchurch District Licensing Committee and may be used in the Committee's decision for your application. Decisions will be made publicly available.

The Council is required to keep a record of every premises licence application (including for renewals and variations) filed with the District Licensing Committee and the Committee's decision on it. This information (which includes the application and all attachments) is made available to the Council's Licensing Inspectors, the Medical Officer of Health, and the Police for the purposes of monitoring ongoing compliance with any licence conditions and undertakings, Duty Manager appointments, and the Act.

The Council is required to report statistics about applications to the Alcohol Regulatory and Licensing Authority.

Any member of the public may, under the Local Government Official Information and Meetings Act 1987, request access to information held by the Council. The Privacy Act 2020 applies to the Council and under that Act, you have the right to see and correct personal information that the Council holds about you.

**I have read and understood the above privacy statement**      **Yes**      **No**

Dated at Christchurch this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Signed on behalf of \_\_\_\_\_ Club.

By:

Designation:

## 10. Lodgement meeting and invoicing

Please make an appointment with an alcohol licensing Inspector for a Lodgement meeting. The inspector will confirm your fees and issue your invoice for payment. Your application will not be accepted without this meeting. Phone (03) 941 8999 for an appointment.

## 11. Processing Timelines:

Premises applications should be made well before your licence is required. On average about 5-6 weeks is required for a standard application to allow for public notification, processing, statutory reporting on your application, and issuing of a District Licensing Committee (DLC) decision on your licence. Timelines will be longer if there are public objections or agency oppositions or missing information on your application. More information about statutory timelines can be found at [www.ccc.govt.nz/alcohol](http://www.ccc.govt.nz/alcohol)

## Lodgement notes – for office use only

# Notice of duty manager appointment or change

Section 231, Sale and Supply of Alcohol Act 2012

Refer also s229, s230 and Part 4 of SSA Regulations 2013

## Office use only

Received by District Licensing Committee:

Time:

Date:

\* Mandatory fields

Note: This form can be completed online at <https://ccc.govt.nz/notification-of-management-change/>

Full trading name:\*

Address of premises:\*

Signature of licensee:

Date:\*

Licensee name (please print):\*

Position (Director, Partner, Licensee or their representative completing this form):\*

Phone:\*

Email:\*

## What are you notifying? Please tick and COMPLETE ONE of the applicable boxes below.

Note: It is not necessary to notify the DLC or Police in respect of the appointment of an acting manager for any period not exceeding 48 consecutive hours.

### A New permanent manager (hold a current General Managers Certificate)

Effective from:\*/ /20

First name:\*

Middle name:\*

Family name:\*

Known as:\*

Date of birth:\*

Gender:

Certificate no:\*

Certificate expiry date:\*

### B Temporary manager (until a General Manager's Certificate is issued)

Effective from:\*/ /20

First name:\*

Middle name:\*

Family name:\*

Known as:\*

Date of birth:\*

Gender:

Residential address:\*

Name of who they are replacing:\*

Their certificate no:

Reason for appointment:

Note: A temporary manager must apply for a manager's certificate within two working days of their appointment.

### C Acting manager (used to cover absences)

Effective from:\*/ /20 to / /20

First name:\*

Middle name:\*

Family name:\*

Known as:\*

Date of birth:\*

Gender:

Residential address:\*

Name of who they are replacing:\*

Their certificate no:

Reason for replacement:\*

### D Termination/Cancellation of existing manager appointment

Effective from:\*/ /20

First name:\*

Middle name:\*

Family name:\*

Known as:\*

Date of birth:\*

Gender:

Certificate no:\*

Certificate expiry date:\*

Forward a copy of this completed form, within two working days of the appointment (or termination) to BOTH Agencies:

• **The Secretary**, District Licensing, PO Box 73013, CHRISTCHURCH 8154  
Email: [managerchange@ccc.govt.nz](mailto:managerchange@ccc.govt.nz)

• **The Licensing Sergeant**, NZ Police District, PO Box 2109, CHRISTCHURCH  
Email: [alcoholcanterbury@police.govt.nz](mailto:alcoholcanterbury@police.govt.nz)

Please keep a copy of this form as part of your Premises Record (s232) of Duty Managers required to be kept by all licensees, as you may need to produce it to show it was sent and received.



Please use this flowchart to help you work out what section of the form you need to fill out.

This guide will help you to fill out the correct fields in your section.

The section at the top always needs to be filled out in full.

A. Are you appointing a new permanent duty manager (who holds a current General Manager certificate)? This includes existing staff that may have got their duty manager certificate or new starters to the premises.

Yes – Fill out Section A.

\*Please ensure full name and DOB is filled in correctly. This allows us to properly identify the person in case of two people with the same name.

B. Do you want to make one of your staff a permanent duty manager but they don't currently have a manager's certificate?

Yes – Fill out Section B.

\*Please ensure full name and DOB is filled in correctly. This allows us to properly identify the person in case of two people with the same name.

\*\* If completing the Temporary Manager section for someone replacing a duty manager who is leaving, please also complete Section D for the person leaving.

C. Is your duty manager going on annual or sick leave for more than 48 hours?

Yes – You may need to fill out Section C. Read on to see if it applies to your situation

\* If a duty manager is sick or on leave for no more than three weeks at any time (with a maximum accumulated period of six weeks within a year) you can appoint an Acting Manager as cover, however you cannot use an Acting Manager for longer periods..

\*\* They do not need a manager's certificate.

\*\*\* Please ensure full name and DOB is filled in correctly – this allows us to properly identify the person in case of two people with the same name.

D. Has a duty manager stopped working at your premises?

Yes – Fill out Section D.

\*Please include the date they stopped working as a duty manager for your premises.

### Notice of duty manager appointment or change

Section 231, Sale and Supply of Alcohol Act 2012  
Refer also s229, s230 and Part 4 of SSA Regulations 2013

**Office use only**  
Received by District Licensing Committee:  
Time:  Date:

\* Mandatory fields

Note: This form can be completed online at <https://ccc.govt.nz/notification-of-management-change/>

Full trading name:*			
Address of premises:*			
Signature of licensee:		Date:*	
Licensee name (please print):*			
Position (Director, Partner, Licensee or their representative completing this form):*		Phone:*	
Email:*			

**What are you notifying? Please tick and COMPLETE ONE of the applicable boxes below.**

Note: It is not necessary to notify the DLC or Police in respect of the appointment of an acting manager for any period not exceeding 48 consecutive hours.

**A New permanent manager** (hold a current General Managers Certificate)

Effective from:  /  / 20

First name:  Middle name:  Family name:

Known as:  Date of birth:  Gender:

Certificate no:  Certificate expiry date:

**B Temporary manager** (until a General Manager's Certificate is issued)

Note: A temporary manager must apply for a manager's certificate within two working days of their appointment.

Effective from:  /  / 20

First name:  Middle name:  Family name:

Known as:  Date of birth:  Gender:

Residential address:

Name of who they are replacing:  Their certificate no:

Reason for appointment:

**C Acting manager** (used to cover absences)

Effective from:  /  / 20 to  /  / 20

First name:  Middle name:  Family name:

Known as:  Date of birth:  Gender:

Residential address:

Name of who they are replacing:  Their certificate no:

Reason for replacement:

**D Termination/Cancellation of existing manager appointment**

Effective from:  /  / 20

First name:  Middle name:  Family name:

Known as:  Date of birth:  Gender:

Certificate no:  Certificate expiry date:

**Forward a copy of this completed form, within two working days of the appointment (or termination) to BOTH Agencies:**

- **The Secretary**, District Licensing, PO Box 73013, CHRISTCHURCH 8154  
Email: [managerchange@ccc.govt.nz](mailto:managerchange@ccc.govt.nz)
- **The Licensing Sergeant**, NZ Police District, PO Box 2109, CHRISTCHURCH  
Email: [alcoholcanterbury@police.govt.nz](mailto:alcoholcanterbury@police.govt.nz)

**Please keep a copy of this form as part of your Premises Record (s232) of Duty Managers required to be kept by all licensees, as you may need to produce it to show it was sent and received.**