

#### PUBLIC NOTICE OF APPLICATION

## Sale and Supply of Alcohol Act 2012 Section 127 & 101

SPENCER PARK SURF LIFESAVING CLUB INCORPORATED, (THE SECRETARY, PO Box 76141, NORTHWOOD POSTCENTRE, Christchurch 8548), has made application to the District Licensing Committee at Christchurch for the renewal of CLUB LICENCE RENEWAL in respect of the premises situated at 150 Heyders Road, Spencerville known as SPENCER PARK SURF LIFE SAVING CLUB.

The general nature of the business conducted under the licence is: CLUB LICENCE CLASS 3

The days on which and the hours during which alcohol is sold under the licence are:

#### MONDAY TO SUNDAY 12.00 MIDDAY TO 10.00 PM

The application may be inspected during ordinary office hours at the office of the Christchurch District Licensing Committee, Civic Offices, 53 Hereford Street, Christchurch. Phone 941 8999 to arrange with the Alcohol Licensing Team.

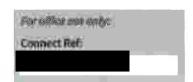
Any person who is entitled to object and who wishes to object to the grant of the application may, not later than 25 working days after the date of the first publication of this notice, file a notice in writing of the objection with the Secretary of the District Licensing Committee, P O Box 73013, Christchurch 8154.

No objection to the renewal of a licence may be made in relation to a matter other than a matter specified in section 131 of the Sale and Supply of Alcohol Act 2012.

Date of first publication on website: 10 June 2025

www.ccc.govt.nz/alcohol

ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licence-public-notification



# **Application for renewal of licence**

Section 100, Sale and Supply of Alcohol Act 2012

About this application:		
Please complete this form and forward it with all required documen webpage or in person, or post to Christchurch City Council, 53 Herefo		ugh the
This application cannot be accepted if the form is incomplete and invoice is paid. Invoices are posted to you 2 months in advance of		s your
Accepted methods of payment are: CASH – EFTPOS – Internet Bankin	ng.	
Note: Application fees are non-refundable and are for the processing of your of	pplication and must be paid when you apply for your renewal.	
We can only process your application once we have both the Proof of and required documents).	of Payment of fees AND the required paperwork (applicat	ion form
The original of this application should be filed with the District Licenthe licence. After that time it may be filed only with the permission of application be filed after the licence has expired. You will be deer equired.	of the District Licensing Committee. In no case may the	renewal
Any questions contact the Alcohol Licensing Team to discuss and for	r more information, ph 03 941 8999 or alcohollicensing@o	ccc.govt.nz
• Endorsements: (state by type every endorsement sought)	Caterer BYO Auctioneers Remote sale	s
Renewal with Variation: (changes to licence conditions)		
Renewal of Club-off licence		
1. Renewal application for: (details as on current lice		
a. Trading name: Spencer Park Suf	Life Saving Club Incorporat Life Saving Club 22	Ted
b. Licencee: Spencer. Park Suf 1	Life Saving Club	
c. Licence number: 60 / CL / 26 / 202	22	
d. Licence Expiry date: 3 /7/2025		
7.12020		
If Renewal with Variation: Risk Weighting verification and fees reca	alculation for invoice (Office to complete)	
(If variation, please make an appointment with an Inspector to disconsyment as we may have to make adjustments to your renewal inv		ore
Total Weighting:	Fee Category:	
Updated Premises Certificate of Compliance (alcohol) application	on needed? Yes No	
If YES, Certificate already applied for? Yes No OR	Already issued and attached?	
Inspector confirmed application vetted and complete for lodgen	ment Yes No – refer to lodgement notes on ba	ack page
Inspectors Signature:	Date of verification: dd/mi	m/yyyy
Council Use Only		
Connect Invoice number: Receipt No.:		
Date:		
Date.		



2.	Details of Applicant							
a.	. Company or Club or Society name or full legal name(s) if individual to be on licence:							
	Spencer Park Surf Life Saving Club							
b.	Other names/aliases known by:							
c.	Date of Birth: Sex: Male Female							
d.	Occupation/Current employment (including for all Directors):							
e.	Residential address: 160 He ideas Orad Specialist Claristics							
f.	Residential address: 150 Heyders Road Spencerville Christchurch Website: www. Spencer Park Surf Life Saving Club							
	Convictions of Company Directors, Partners, or individuals:							
ъ.								
	Have you ever been convicted of any offence (including traffic but not parking)? Note: As per the Criminal Records (Clean Slate) Act 2004, if you have no convictions in the last 7 years, you need not declare any convictions prior to that date other than convictions relating to imprisonment or indefinite disqualified from driving.							
	If YES, give details below. (You may wish to explain the circumstances on another page)  NB: Information on how to check your criminal record history details can be found at justice.govt.nz/criminal-records)							
	Name of offence: Date of conviction: Penalty suffered:							
h.	Postal address for service of documents: P.O. Box 76141 Northwood							
	Postal address for service of documents: P.O. Box 76141 Northwood  Suburb: City: Christehurch Post Code: 8548							
i.	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 <a href="ccc.govt.nz/contact-us">ccc.govt.nz/contact-us</a> to update your address details for all other Council business.							
j.	Daytime Contact Name: Michelle Balk							
	Phone:							
	Email:							
k.	Preferred mode of contact: email							
l.	Status of applicant: (tick appropriate box)							
	Natural Person Private Company Trustee							
	Licensing Trust Partnership Public Company							
	Government Department Local Authority							
	Manager under the protection of Personal and Property Rights Act 1988							
	Body Corporate to which section 28(1)(b) of the Act applies. Authority incorporated under:  Board, organisation, or other body to which section 28(1)(c)							
	Incorporated Society Other:							



3. Details of al	i managers a	ippointed for the I	premises		
Full list of all curre (Please attach separe		oloyed and Certificate Numb	pers of Manager's Certifica	ate(s):	
Name:	Known as:	Address:	certificat they have	te number, or if no e held confirm if e applied for one	Expiry Date
Michelle Ann Balk	Michalle		A: 60	CEPT 357/	3018 3012 3
					2018 re-applied 8/5/25
	mber to complete a	a separate <b>Notice of Duty M</b> ty managers.	anager Appointment or	Change form for al	l new Duty Manager
4. Further det	ails of where	e applicant is a co	mpany		
a. Date of incorporat	ion:				/
b. Place of incorpora	tion:			/	
		ecretary (if any), as follows:			
Full name:	Address:	Date of birtl	n: Place of birth:	Designation:	Face value of shares held:
d. Private Company o			Paid-up Ca		
e. Private Company:	Full details o	f each person who holds any	shares issued by the cor	mpany:	
Full name:	Address:	Date of birth	n: Place of birth:	Designation:	Face value of shares held:
		/			
f. Public Company: F by the company.	full details of each	person who holds 20 percen	t or more of the shares, o	or of any particular c	lass of shares, issued
Full name:	Address:	Date of birt	n: Place of birth:	Designation:	Face value of shares held:



a. Full details of each part	tner as follows:					
Full name:	Address:	Date of birth:	Place of birth:	Designation:	Face value of shares held:	
	AND COLUMN TO SERVICE AND ADDRESS OF THE PARTY OF THE PAR	Annual Control of the				
o. Signature of each partr	ner:					
C Dunming datai						
6. Premises detai						
THE RESIDENCE OF THE PROPERTY OF THE PARTY O		mote Sales this is the offi				
Is this premises location	n known by any other	address? (Note: for Remo	tes Sales this could	be your website ad	dress)	
F. 5.11.25 (\$ 3300	-	, in the state of		,		
b. Type of licence:	Club-C	lass 3				
c. Existing licence numbe	r: 60	1CL /26/2	022			
d. Expiry date:	3/7/20	025				
Existing licence number: 60/CL/26/2022  Expiry date: 3/7/2025  Trading name: Spencer Park Surf Life Saving Club						
Details of premises area. The current licence includes (please attach plans annotated with licenced area):						
Internal areas include: Upstairs lounge area  Outside areas include: Upstairs balconies						
Outside areas include:	Upstairs	balconies				
Any leased public space	e areas? If YES, please	attach copy of the lease.	Yes No			
g. Does the applicant owr	n the proposed license	ed premises? Yes	No			
If NO: Owners full name:						
Owners address:						
	re (state whether to be	e held as leasehold, or un	der tenancy agreem	ent. or licence):		
	(	, , , , , , , , , , , , , , , , , , , ,	art to, and a green	,		
NB: Additional information and	d/or signed documents m	ay be requested in some inst	ances to confirm tenure			
h. What part (if any) of the	e premises does the a	pplicant intend should be	designated as:			
<ul> <li>Supervised designative. Court appointed.</li> </ul>	tion: persons under 1 Those under 18 canno person of any age ma by their parent, or leg		ly if accompanied by by be supplied by the	parent or guardian	1.	
A restricted area:						
A supervised area:						
	or layout changed in a	any way since the last ren	ewal, or are you plar	nning to make any		
If YES, how?						



j.	I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the building:  I certify that the Building Owner has confirmed with me that the
	Name of owner: Species Park Suff Life Soving Club
	Signature: Date: 26/5/25 dd/mm/yyyy
	A registered Evacuation
	The building can hold more than 100 people;
	<ul> <li>There are more than 10 employees in the entire building; or</li> <li>Overnight accommodation is provided for more than 5 people.</li> </ul>
	<ul> <li>Overnight accommodation is provided for more than 5 people.</li> <li>ase contact Fire and Emergency NZ (telephone 372 8600) for more information about evacuation schemes and fire safety requirements.</li> </ul>
7.	Business details (Please attach separate sheet if required.)
a.	What is the general nature of the business? (e.g. hotel, tavern, restaurant, entertainment/nightclub):
	Life Saving Club
b.	Is the sale of alcohol intended to be the principal purpose of the business?  Yes  No
	(i) If NO, what is intended to be the principal purpose of the business?  (ii) What part of Section 32 of the Act is applicable to this application?
	(ii) What part of Section 32 of the Act is applicable to this application?
	If section 32(1)(f) (grocery stores) applies you must complete the relevant Statement of Annual Sales Revenue available here ccc. govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences/off-licence/
	If section 32(1)(b) (Bottle store) applies: What percentage of your annual sales is expected to be from sale of alcohol? NB: to assist you may wish to use the form found at the link above.
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
	If YES, what is the nature of those other goods or services?
d.	Current licensed hours: 12 midday to 10.00pm
e.	Full On-licence: are you also intending to permit BYO? Yes No
f.	Has any of the a-c questions above changed since the last renewal or are you planning to make changes to these in the future?
	No
g.	If off-licence remote sales, state the address from where the alcohol will be stored and dispatched from.
8.	Conditions (Please attach separate sheet if required.)
Th	e following questions relate to Variations – changes to licence conditions. Please attach separate sheet if required.
a.	Are there any changes sought to the present conditions of the licence? Yes No (If yes please also refer to note at 11)
	If YES, please detail what changes are sought (this includes hours, premises area, nature of the business)
	If seeking changes:
	<ul> <li>Please DO NOT publish Public Notices until further discussion with the Alcohol Licensing Team on phone (03) 941 8827.</li> </ul>
	<ul> <li>An updated Premises Certificate of Compliance (Alcohol) authorising the changes sought may be required. Applications requesting changes cannot be accepted without this certificate. For more information refer to the Step-by-Step guide www.ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol-licences/variations-to-alcohol- licences-changes-to-your-business/</li> </ul>
b.	For Club Licences only: Your 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?



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9.	Host Responsibility (Please attach separate sheet if required.)
	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 <a href="ccc.govt.nz/alcohol">ccc.govt.nz/alcohol</a>
a.	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):
1	mery attached
	• Non-alcoholic refreshments:
	Sparkling grape jince, temonade, coke, Ginger beer, Lemon, line billes, Juice, Heinekon Ols, Speighlos. Low-alcoholic beverages (Between 1.1% and 2.5%ALC):
	Steinlager light 2.5%, Hargen Citrus 2.5%, light Sav blanc.
	Alcohol range available (attach full drinks menu)
	~ attached
b.	What steps does the applicant propose to take to provide assistance with or information about alternative forms of transport from the premises, for staff and patrons?
	- Club phone & mobiles available to call taxis & Ubers - Signage.
c.	What other steps does the applicant propose to take aimed at promoting the responsible consumption of alcohol?
	- Club Signage promoting responsible drinking. Water to alcohol ration - Free Water grugs available on bar top.
d	What steps does the applicant propose to take to ensure that the requirements of the Act in relation to the sale of alcohol to
u.	prohibited persons (i.e. minors, intoxicated persons, other persons to whom alcohol may not be sold pursuant to the licence) are observed?
	Highly skilled & responsible Bor Manager inducts of how
	Statt. Bar Manager trained to look for signs of intexication and will manage
e.	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)
	Free Water Jugs always available on bar, and freely available to table also
f.	What appropriate systems, staff and training does/will the applicant have in place to ensure compliance with the law?
	Bar manager on site trains and gives full induction to all new staff.
g.	What are the current and possible future noise levels and how does the applicant intend to mitigate them?
	We are isolated in a superior its - Const and onen spaces
	We are isolated in our venue, with a forest and open spaces between us and residential area. Doors of windows kept closed.
h.	What are the current and possible future levels of nuisance and vandalism and how does the applicant intend to mitigate them?
	Doors are closed during event. area is patrolled and Armourguard
	tack access gates every night at approx 9 pm.
i.	What other licensed premises are there in the vicinity of this proposed premises? And, will the granting of this licence contribute to an increase in alcohol related problems in the area? (Explain)
	We are isolated. No nearby premises.
j.	What is the land near the proposed premises being used for? Will the granting of a licence for your premises impact on changing
J.	neighbouring land use? If so, in what way?

Christchurch City Council

Beach & forest

### 10. 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 (including the details of directors and shareholders)
- Premises Certificate of Compliance (Alcohol) (may be required when seeking a Variation of the licence)
- All Grocery Stores must complete a Statement of Annual Sales Revenue if applicable. Template statement available here <a href="ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences/off-licence/">Ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences/off-licence/</a>

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 or any additional duty managers
- Host Responsibility Policy
  - Food Menu
  - Drinks/ beverage menus
- Any other information you wish to include to support your application, e.g. business plan, promotional materials etc
  - **Bottle Stores:** To assist with confirmation of percentage annual income expected from alcohol you may wish to complete a Statement of Annual Sales Revenue if applicable. Template statement available here <a href="mailto:cc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences/off-licence">cc.govt.nz/consents-and-licences/off-licences/

#### Clubs:

- 1. Provide an updated copy of Club charter and membership rules (including details of any Affiliated memberships)
- 2. A list of names of clubs with which the club has reciprocal visiting rights for members; and
- 3. A Club Alcohol Management Plan and Club Alcohol Policy (desirable)

#### Notes:

- The Agencies may request to inspect a copy of your staff training plan/manuals.
- 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 <a href="mailto:ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/managers-certificate/notification-of-management-change">ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/managers-certificate/notification-of-management-change</a>

# 11. Payment and submitting the application

Please complete this form and forward it with all required documents. You can submit the form (and documents) online through the webpage or in person, or post to Alcohol Licensing, Christchurch City Council, 53 Hereford Street, PO Box 73013, Christchurch 8154.

This application cannot be accepted if the form is incomplete and documents are missing. Filing is not complete unless your invoice is paid. Invoices are posted to you 2 months in advance of the due date to your last address provided to us.

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.

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

# 12. 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. 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).



13. Authorisation	You must complete this sec	ction in full			
Have you completed ALL r	elevant sections of this fo	rm and attached A	LL requested docume	nts? Yes	No
Incomplete applications WI AND the required paperwor			ication once we have	BOTH the Proof of	f Payment of fees
<b>Privacy Statemen</b>	t				
Information contained in you application to be processed request as part of the public (the Police, the Medical Offic application, and to the Christinformation may form part oused in the Committee's decimal of	under the Sale and Supply notification of your applic cer of Health, and the Coun stchurch District Licensing of of a public hearing of your a	of Alcohol Act 2012 ation. The informat cil's Licensing Inspe Committee for the p application before the	. This information will ion will be provided to ectors) for the purposes ourposes of making a d ne Christchurch Distric	be made available the statutory repo s of assessing and ecision on your ap	e to the public on orting agencies reporting on your oplication. This
The Council is required to ke the District Licensing Comm attachments) is made availa monitoring ongoing complia	nittee and the Committee's able to the Council's Licensi	decision on it. This ing Inspectors, the M	nformation (which inc Medical Officer of Healt	ludes the applicat h, and the Police f	ion and all or the purposes of
The Council is required to re	eport statistics about applic	cations to the Alcoho	ol Regulatory and Licer	nsing 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.					
miormation that the counci	l holds about you.				
I have read and understoo		ment Yes	No		
	d the above privacy state	ment Yes	No		
		ment Yes	No May		as
I have read and understoo	d the above privacy state				
I have read and understoo  Dated at Christchurch this	d the above privacy state				
Dated at Christchurch this Applicant's Signature: (must not be signed	d the above privacy state				
Dated at Christchurch this Applicant's Signature: (must not be signed	d the above privacy states	day of	May	20	as
Dated at Christchurch this  Applicant's Signature: (must not be signed by an Agent or Solicitor)	the above privacy states  The states of the above privacy states  The states of the above privacy states of the ab	day of  ith Variation g Inspector to lodge	May  Lodgement an	20  Id Invoicing	as
Dated at Christchurch this  Applicant's Signature: (must not be signed by an Agent or Solicitor)  14. Important to replease make an appointment	note — Renewal we not with an Alcohol Licensing our risk rating and fees and	day of  ith Variation g Inspector to lodge I frequired re-issue	May  Lodgement an  your new renewal with your invoice for payment	20  Id Invoicing	as
Dated at Christchurch this  Applicant's Signature: (must not be signed by an Agent or Solicitor)  14. Important to represent the inspector will confirm y	note — Renewal with an Alcohol Licensing our risk rating and fees and not be accepted without a	day of  ith Variation g Inspector to lodge I frequired re-issue	May  Lodgement an  your new renewal with your invoice for payment	20  Id Invoicing	as
Dated at Christchurch this  Applicant's Signature: (must not be signed by an Agent or Solicitor)  14. Important to make an appointment of the inspector will confirm you remaind the inspector will be a signed by an Agent or Solicitor.	note — Renewal well to the accepted without a nelines: tions should be made well to the should be made well to the should be longer.	day of  Ith Variation g Inspector to lodge I if required re-issue In Inspector Verification before your certificative reporting on your If there are agency	May  Lodgement an  your new renewal with your invoice for payme tion being completed.  Ite is required. On averapplication, and issuit oppositions or missing	ad Invoicing a variation before yent of fees.	you make payment.

Lodgement notes - for office use only							

