

PUBLIC NOTICE OF APPLICATION

Sale and Supply of Alcohol Act 2012 Section 101

RYMAN HEALTHCARE LIMITED, (THE LICENSEE, UNIT D/92 RUSSLEY ROAD, CHRISTCHURCH 8042), has made application to the District Licensing Committee at Christchurch for the issue of ON-LICENCE NEW in respect of the premises situated at 25 Steadman Road, Riccarton Park known as KEVIN HICKMAN RETIREMENT VILLAGE.

The general nature of the business conducted under the licence is: **ON-LICENCE RETIREMENT VILLAGE**

The days on which and the hours during which alcohol is intended to be 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, 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 issue of the licence 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 issue of a licence may be made in relation to a matter other than a matter specified in section 105(1) of the Sale and Supply of Alcohol Act 2012.

Date of first publication on website: 12 May 2025

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

Application for new On-licence

For office use only.

Convert Rel:

Section 100, 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

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 <u>alcohollicensing@ccc.govt.nz</u>

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

Endorsements: (state by type every endorsement sought) Caterer BYO only

1. New application for:

- a. Trading name: Kevin Hickman Retirement Village
- b. Licensee: Ryman Healthcare Limited

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: On 🔶		Weigh	ting: 5		
b.	Latest alcohol sale time: 10:00 pm		Weigh	iting:		
c.	Enforcements: None		Weigh	iting:		
d.	Total weighting:	Fee Category:	Very low / Low	Medium	High Very high	
e.	Fees payable: Application fee: \$ 609	.50	Annual fee: \$ 391			
f.	Premises Certificate of Compliance (alcohol) application lodged? Yes	No	If YES, Certificate alread	y issued and atta	ached? 🖌 Yes 🛛 N	٩٥
g.	Inspector confirmed application vetted a	and complete for l	odgement Yes	No (refer to lodg	gement notes on back page	e)
	Inspectors Signature:		Date:	20/04/25	dd/mm/yyyy	
	To be completed by the inspector at the lodger	nent meeting.				
4	Council Use Only					
3	Contract Invoice number:	Receipt No.				
		Date:			Olani et element	

3.	Details of applicant Please give	e legal name as appears on Birth Ce	ertificate or Pa	assport		
a.	Company name or full legal name(s) if indiv	idual to be on licence:				
	Ryman Healthcare Limited					
ь.	Other names/aliases known by:					
	Date of birth:		Sex:	Male	Female	
١.	Occupation/Current employment (includin	g for all Directors):				
	Residential address: 92D Russley Road, Rus	sley, Christchurch 8042				
	Website: https://www.rymanhealthcare.co.nz/					
g. Convictions of Company Directors, Partners, or individuals:						
	Have you ever been convicted of any offend 2004, if you have no convictions in the last relating to imprisonment or indefinitely dis	7 years, you need not declare a				
	If YES, give details below. (You may wish to	explain the circumstances on a	nother page)		
	Name of offence:	Date of conviction:	Per	alty suffere	d:	
	Postal address for service of documents: 9	2D Russley Road				
	Suburb: Russley	City: Christch	urch		Postcode: 8042	
	Is this address used for any other business	with Council? e.g. Rates; dog re	gistration.	Yes	No	
	f Yes and this address has changed recently please go to the "Contact us" link at <u>www.ccc.govt.nz/contact-us</u> to update your addess details for all the Council business.					
	Daytime Contact Name: Edrich Tandy					
	Phone:					
	Email: eddie.tandy@rymanhealthcare.com		an a			
	Preferred mode of contact: Email					
	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 Pers	onal and Property Rights Act 19	988			
	Body Corporate to which section 28(1	.)(b) of the Act applies. Authorit	y incorporat	ed under:		
	Board, organization, or other body to	which section 28(1)(c)				
	Incorporated Society	Other:				



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
Elizabeth Jane Hampton			Application In Progress	In Progress
Maureen Pencz			Application In Progress	In Progress
Tracey Herron			Application In Progress	In Progress

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

5. Further details of where applicant is a company

- a. Date of incorporation: 08/05/1987
- b. Place of incorporation: Christchurch
- c. Full details of each director, and the secretary (if any), as follows:

Full name:	Address: See attached documentation	Date of birth:	Place of birth:	Designation:	Face value of shares held:
d. Private Company only: /	Authorised Capital:		Paid-up Capi	tal:	
e. Private Company:	Full details of each person w	vho holds any shares	issued by the comp	oany:	
Full name:	Address:	Date of birth:	Place of birth:	Designation:	Face value of shares held:
f. Public Company: Full de by the company.	etails of each person who hol	lds 20 percent or mo	re of the shares, or o	of any particular clas	ss of shares, issued
Full name:	Address:	Date of birth:	Place of birth:	Designation:	Face value of shares held:

6. Further details of where	applicant is a partnership
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a.	Full details of each partner	as follows:				
	Full name:	Address:	Date of birth:	Place of birth:	Designation:	Face value of shares held:
b.	Signature of each partner:					

7. Premises details

a.	Legal address of premises:			
	25 Steadman Road, Riccarton Park, Christchurch			
	Is this premises location known by any other address?			
b.	Proposed trading name for premises (if any): Kevin Hickman Retirement Village			
c.	Is a licence already held for this premises? Yes 🖌 No If yes, licence number:			
d.	Do you hold a current Temporary Authority to trade on that licence? 👘 Yes 🖌 No			
e.	Is a licence sought conditional upon construction/completion of the premises? Yes 🖌 No			
f.	Does the applicant 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):			
NB.	Additional information and/or signed documents may be requested in some instances to confirm tenure.			
g.	Details of premises area:			
	The proposed licensed areas to include: (Please attach plans annotated with proposed licensed area)			
	Internal areas include: Bar, Iounge, dining room, games room, craft area, cinema, activities room, library, cafe			
	Outside areas include: Patio / Courtyard Area			
	Any leased public space areas? Yes 🖌 No If YES, please attach copy of the signed lease with plans.			
	NB: Please attach plans annotated with licensed area			
h.	What part (if any) of the premises does the applicant 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. 			
NE	: Any designated areas MUST be marked on the plan for the premises			
	A restricted area: None, all undesignated			
	A supervised area: None, all undesignated			



i.	FIRE SAFETY – Section 100(d): I certify that the Building Owner has confirmed with me that the building: A 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: Edrich Tandy
	Signature: e: 03/04/2025 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.
Ple	• Overnight accommodation is provided for more than 5 people. ease contact Fire and Emergency NZ (telephone 372 8600) for more information about evacuation schemes and fire safety requirements.
8	Business details Please attach separate sheet if required
a.	What is the general nature of the business to be conducted by the applicant in the premises if the licence is granted? (e.g. hotel, tavern, restaurant, entertainment/nightclub.)
	Retirement Village
h	Is the sale of alcohol intended to be the principal purpose of the business? Yes 🖌 No
D.	
	If NO, what is intended to be the principal purpose of the business? Retirement Village
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?
	Retirement Village
d	On which days and during which hours does the applicant intend to sell alcohol under this licence?
u.	Monday to Sunday 12:00 pm Midday to 10:00 pm
	Monday to Sunday 12.00 pm Midday to 10.00 pm
e.	BYO Restaurants only: Does the applicant wish to have the licence endorsed under Section 37 of the Act? Yes No
f.	Full On-licence: Are you also intending to permit BYO? 💦 Yes 🖌 No



9. Conditions 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 <u>ccc.govt.nz/alcohol</u>

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):

See attached menu

Non-alcoholic refreshments:

See attached menu

Low-alcoholic beverages (Between 1.1% and 2.5%ALC):

The bar will remain stocked with Low Alcohol (less than 2.5%) beverages and no alcohol beverage options. See attached menu

Alcohol range available (attach full drinks menu)

See attached menu

b. What steps does the applicant propose to take to provide assistance with or information about alternative forms of transport from the club, for staff and patrons?

See attached documentation

c. What other steps does the applicant propose to take aimed at promoting the responsible consumption of alcohol?

See attached documentation

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 prohibited persons (i.e. minors, intoxicated persons, other persons to whom alcohol may not be sold pursuant to the licence) are observed?

See attached documentation

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 drinking water will be available at the bar.

f. What appropriate systems, staff and training does/will the applicant have in place to ensure compliance with the law?

See attached documentation

g. What are the current and possible future noise levels and how does the applicant intend to mitigate them?

See attached documentation

h. What are the current and possible future levels of nuisance and vandalism and how does the applicant intend to mitigate them?
 See attached documentation



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)

See attached documentation

j. 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?

Retirement Village

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 extract details of directors and shareholders)
- 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

- Food Menu
- Drinks/ beverage menus
- Host Responsibility Policy (NB: If you are permitting BYO, you will need to indicate how you will manage BYO on your premises)
 Background information on applicant(s) and Directors business experience and training experience in the hospitality industry (a brief CV outlining work history would assist)

Background information on the Operational Manager (if not to be the licensee) – experience and training in the hospitality industry (a brief CV would assist)

Any other information you wish to include to support your application, e.g. business plan, promotional materials etc

Notes:

- The Agencies may request to inspect a copy of your staff training plan/manuals.
- Tenure (Q7f) 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 <u>ccc.govt.nz/consents-and-licences/business-licences-and-consents/ alcohol/managers-certificate/</u> 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. 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 25 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 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).

11. Payment

You will be issued an invoice at your lodgement meeting when you file your application. Payment of Fees 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.

12. 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. Please note, your full application, including name and contact details will be used by Council staff to assess and provided to decision makers. Your application, with names only will be available on our website. However, if requested under the Local Government Official Information and Meetings Act 1987, we may disclose applications including personal details. If you feel there are reasons why your contact details and/or personal details should be kept confidential, please contact us.

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 understoo	od the above privacy statement	Yes	No		
Dated at Christchurch this	3rd	day of	April	 20 25	
Applicant's Signature: (must not be signed by an Agent or Solicitor)					



13. 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.

14. Processing Timelines:

Manager Certificate applications should be made well before your certificate is required. On average about 5-6 weeks is required for a standard application to allow for 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 agency oppositions or missing information on your application. More information about statutory timelines can be found at <u>ccc.govt.nz/alcohol</u>

Lodgement notes - for office use only

