

#### **PUBLIC NOTICE OF APPLICATION**

## Sale and Supply of Alcohol Act 2012 Section 101

RENEGADE BREWING CO LIMITED, (THE LICENSEE, 109 Orbell Street, Sydenham, Christchurch), has made application to the District Licensing Committee at Christchurch for the issue of ON-LICENCE NEW in respect of the premises situated at 109 Orbell Street, Sydenham known as RENEGADE BREWING CO.

The general nature of the business conducted under the licence is: ON-LICENCE TAVERN

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

#### MONDAY TO SUNDAY 11.00 AM TO 11.00 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: 9 May 2025

www.ccc.govt.nz/alcohol

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

# Commercial Rest. ALC/2025/1256

# **Application for new On-licence**

Section 100, Sale and Supply of Alcohol Act 2012

| About this application:   |                             |                     |            |                  |                |                   |
|---|-----------------------------|---------------------|------------|------------------|----------------|-------------------|
| Please ensure you have read the Ste www.ccc.govt.nz/consents-and-lice   |                             |                     | cohol/alc  | cohol-licences   |                |                   |
| Please complete this form and then a your completed application and pay to Christchurch 8154 and can be contact | he associated fee. The A    | Icohol Licensing T  | eam are l  | ocated at Civic  |                |                   |
| This application cannot be accepted Lodgement meeting. Filing is not co   |                             |                     | ts are mis | ssing. You will  | be given an i  | nvoice at the     |
| Note: All application fees are for processing   | of an application and are n | on-refundable, they | must be pa | nid when you app | ly.            |                   |
| We can only process your application form and required documents).  | n once we have both th      | e Proof of Payme    | ent of fee | s AND the requ   | ired paperw    | ork (application  |
| Accepted methods of payment are: C/   | ASH - EFTPOS - Internet     | Banking.            |            |                  |                |                   |
| Any questions contact the Alcohol Lic   | ensing Team to discuss a    | and for more infor  | mation, p  | h 03 941 8999    | or alcohollice | nsing@ccc.govt.nz |
| Endorsements: (state by type every e  | ndorsement sought)          | Caterer E           | BYO only   |                  |                |                   |
| 1. New application for:   |                             |                     |            |                  |                |                   |
| a. Trading name: RENEGA   | DE BREWT                    | ING CO              |            |                  |                |                   |
| b. Licensee:  |                             |                     |            | DENEGO           | ANG RO         | ENING CO LTD      |
|   |                             |                     |            | 20400            |                | C. C. C. C. Z.    |
| 2. Lodgement meeting,   | Fees Calculation            | n Invoice an        | d Payr     | nent             |                |                   |
| (Refer fees information sheet) To l   | ne completed at lodgem      | ent meeting with i  | nspector   | hefore invoicir  | ıσ             |                   |
| At the Lodgement meeting an insp  |                             |                     |            |                  |                | and foos navable  |
| and issue the invoice for payment   |                             | opiication toi com  | pieteriess | s, commin the r  | or weighting   | and lees payable, |
| Weighting and fees calculation  |                             |                     |            |                  |                |                   |
| a. Type of licensed premises:   | vern                        |                     | Weigh      | ting: 15         |                |                   |
| b. Latest alcohol sale time: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\   |                             | Weighting:          |            |                  |                |                   |
| c. Enforcements: None   |                             |                     | Weigh      |                  |                |                   |
| d. Total weighting: 15  | Fee Category:               | Very low            | Low        | Medium           | High           | Very high         |
| e. Fees payable: Application fee: \$  | 816.50                      | Annual fee: \$      | 632        | 50               |                |                   |
| f. Premises Certificate of Compliance   |                             | If YES, Certifica   |            |                  | tached?        | Yes No            |
| g. Inspector confirmed application  | etted and complete for l    | lodgement           | Tes .      | No (refer to loc | lgement notes  | on back page)     |
| Inspectors Signature:   |                             |                     | Date:      | 02/05/           |                |                   |
| To be completed by the inspector at th  | e lodgement meeting.        |                     |            |                  |                |                   |
| Council Use Only  |                             |                     |            |                  |                |                   |
| Connect Invoice number:   | Receipt No.                 |                     |            |                  |                |                   |
|   | Date:                       | 11                  |            |                  | 01.            | at alamata        |



| 3. | Details of applicant Please give l   | egal name as appears on Birth Cer  | tificate or Passport   |  |  |  |  |
|----|--|--|--|--|--|--|--|
| a. | Company name or full legal name(s) if individ  | ual to be on licence:  |  |  |  |  |  |
|    | RENEGADE BREWIN  | JG CO LTD  |  |  |  |  |  |
| b. | Other names/aliases known by: RENE   | SADE BREWS   | ENG CO   |  |  |  |  |
|    | Date of birth:   |  | Sex: Male Female   |  |  |  |  |
| d. | Occupation/Current employment (including t   | for all Directors): OLLINIE  | RIOPERATOR/BREWER  |  |  |  |  |
|    | Residential address  | , 0,000  | RICFERTIONINELWOR  |  |  |  |  |
|    | Website: RENEGADEBREI  | NTOIC CO.NT  |  |  |  |  |  |
|    | Convictions of Company Directors, Partner  |  |  |  |  |  |  |
| 5. |  |  | and Nation to work a Criminal Reserved Class Class Ass       |  |  |  |  |
|    | 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 indefinitely disqualified from driving.  Yes  No |  |  |  |  |  |  |
|    | If YES, give details below. (You may wish to ex  | YES, give details below. (You may wish to explain the circumstances on another page) |  |  |  |  |  |
|    | Name of offence:   | Date of conviction:  | Penalty suffered:  |  |  |  |  |
|    |  |  |  |  |  |  |  |
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|    |  |  |  |  |  |  |  |
|    |  |  |  |  |  |  |  |
|    | Is this address used for any other business w  | th Council? e.g. Rates; dog regi   | istration. ✓Yes No   |  |  |  |  |
|    | If Yes and this address has changed recently please other Council business.  | go to the "Contact us" link at <u>www.</u>   | ccc.govt.nz/contact-us to update your addess details for all |  |  |  |  |
| į, | Daytime Contact Name: THOMAS T   | EVERSON  |  |  |  |  |  |
|    | Phone: Mobile:   |  |  |  |  |  |  |
|    | Email: OFFICE@RENEGADE   | BREWING. CO. N   | 7  |  |  |  |  |
| j. | Preferred mode of contact: EMAIL   | <i>5</i>   |  |  |  |  |  |
| k. | 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 Person   | nal and Property Rights Act 198  | 18   |  |  |  |  |
|    | Body Corporate to which section 28(1)(   | b) of the Act applies. Authority   | incorporated under:  |  |  |  |  |
|    | Board, organization, or other body to w  | hich section 28(1)(c)  |  |  |  |  |  |
|    | Incorporated Society   | Other:   |  |  |  |  |  |



|                                   | etails of all manager<br>parate sheet if required |                             | d and Certificate N | Numbers of Manager      | s Certificate(s):                                      |                            |  |
|-----------------------------------|---|-----------------------------|---------------------|-------------------------|--|----------------------------|--|
| Name:                             |   |                             | CE                  |                         | number, or if no<br>held confirm if<br>applied for one | Expiry Date                |  |
| THOMAS<br>DEVERSON                | THOMAS  |                             |                     | APPLI                   | ED   |                            |  |
| SIMON<br>MITCHELL                 | SIMON   |                             |                     | 60/CE                   | TT 1324/2022   | 27/07/2026                 |  |
| lote: please remembe<br>nanagers. | er to complete a separ                            | ate <b>Notice of Duty M</b> | anager Appointme    | nt or Change form for c | ıll appointments or t                                  | ermination of duty         |  |
| 5. Further d                      | etails of whe                                     | re applican                 | t is a compa        | iny                     |  |                            |  |
| a. Date of incorpo                | ration: 28 A                                      | ugust                       | 2023                |                         |  |                            |  |
|                                   |   |                             |                     | LEALAND                 |  |                            |  |
| . Full details of e               | ach director, and th                              | e secretary (if any)        | , as follows:       |                         |  |                            |  |
| Full name:                        | Address:  |                             | Date of birth:      | Place of birth:         | Designation:   | Face value of shares held: |  |
| THOMAS ST<br>DEVERSO              |   |                             |                     |                         |  |                            |  |
| d. Private Compai                 |   | s of each person w          | ho holds any shar   | res issued by the com   | ipany:   |                            |  |
| Full name:                        | Address:  |                             | Date of birth:      | Place of birth:         | Designation:   | Face value of shares held: |  |
| THOMAS STEP<br>DEVERSON           |   |                             |                     |                         |  | shares netu.               |  |
| f. Public Compan                  |   | th person who hol           | ds 20 percent or n  | nore of the shares, or  | of any particular c                                    | lass of shares, issue      |  |
| Full name:                        | Address:  |                             | Date of birth:      | Place of birth:         | Designation:   | Face value of shares held: |  |
|                                   |   |                             |                     |                         |  |                            |  |
|                                   |   |                             |                     |                         |  |                            |  |

4. Details of all Managers appointed for the premises



| 6  | . Further details o   | f where a         | pplicant is a        | partners       | ship                |              |                            |  |  |
|----|---|-------------------|----------------------|----------------|---------------------|--------------|----------------------------|--|--|
| a. | Full details of each partner  | r as follows:     |                      |                |                     |              |                            |  |  |
|    | Full name:  | Address:          | Dat                  | e of birth:    | Place of birth:     | Designation: | Face value of shares held: |  |  |
|    |   |                   |                      |                |                     |              |                            |  |  |
|    |   |                   |                      |                |                     |              |                            |  |  |
|    |   |                   |                      |                |                     |              |                            |  |  |
| b. | Signature of each partner:  |                   |                      |                |                     |              |                            |  |  |
| 7  | . Premises details  |                   |                      |                |                     |              |                            |  |  |
| a. | Legal address of premises   |                   |                      |                |                     |              |                            |  |  |
|    | UNIT 2, 105 ORBELL, STREET, SYDENHAM, CHCH, 8023 Is this premises location known by any other address? NO   |                   |                      |                |                     |              |                            |  |  |
| b. | Proposed trading name for premises (if any): RENEGADE BREWING CO  |                   |                      |                |                     |              |                            |  |  |
|    | Is a licence already held fo  |                   |                      |                |                     |              |                            |  |  |
| d. | . Do you hold a current Temporary Authority to trade on that licence? Yes No  |                   |                      |                |                     |              |                            |  |  |
| e. | Is a licence sought condition   | onal upon cor     | struction/completi   | on of the prer | nises? Yes          | √No          |                            |  |  |
| f. |   |                   |                      |                |                     |              |                            |  |  |
|    | Owners address: 12 TIMARA CRESCENT, MARSHLAND, CHCH   |                   |                      |                |                     |              |                            |  |  |
|    | Form and term of tenure (state whether to be held as leasehold, or under tenancy agreement, or licence):  |                   |                      |                |                     |              |                            |  |  |
| NE | TENANCY AGREEMENT, FIVE YEARS  NB: Additional information and/or signed documents may be requested in some instances to confirm tenure.   |                   |                      |                |                     |              |                            |  |  |
| g. | Details of premises area:<br>The proposed licensed are  |                   | (Please attach plan  | ns annotated   | with proposed licer | nsed area)   |                            |  |  |
|    | Internal areas include: GROUNO FLOOR AND MEZZANINE Outside areas include: STEPS   |                   |                      |                |                     |              |                            |  |  |
|    | Any leased public space areas? Yes No If YES, please attach copy of the signed lease with plans.  |                   |                      |                |                     |              |                            |  |  |
|    | NB: Please attach plans anno  | tated with licen: | sed area             |                |                     |              |                            |  |  |
| h. | What part (if any) of the pr  | remises does t    | the applicant intend | d should be de | esignated as:       |              |                            |  |  |
| N  | <ul> <li>Restricted designation: no person under 18 may be present on the premises.</li> <li>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.</li> <li>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.</li> </ul> |                   |                      |                |                     |              |                            |  |  |
| 14 | B: Any designated areas M  A restricted area: NON   |                   | a on the plan for t  | ue hiennaes    |                     |              |                            |  |  |
|    |   |                   | ITIATIA              | COAL           | IN FLANA            | 1111 1110    | CZZNALTIA:                 |  |  |
|    | A supervised area: ENT  | TKE RI            | VILLDING             | , GROU         | IND + LOOK          | HIND IM      | FLYHNTNE                   |  |  |



| i.  | FIRE SAFETY – Section 100(d): I certify that the Building Owner has confirmed not require an Evacuation Scheme for public safety which meets the requirem Zealand Act 2017.   |             |                       |                 |  |  |  |  |
|-----|---|-------------|-----------------------|-----------------|--|--|--|--|
|     | Name of owner: KADI COBNIT  |             |                       |                 |  |  |  |  |
|     | Signature:  | Date:       | 2/5/25.               | dd/mm/yyyy      |  |  |  |  |
|     | A registered Evacuation Scheme is required when:  |             |                       |                 |  |  |  |  |
| Ple | <ul> <li>The building can hold more than 100 people;</li> <li>There are more than 10 employees in the entire building; or</li> <li>Overnight accommodation is provided for more than 5 people.</li> <li>ease contact Fire and Emergency NZ (telephone 372 8600) for more information about evacual</li> </ul> | ation sc    | hemes and fire safety | y 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 tavern, restaurant, entertainment/nightclub.)  |             |                       |                 |  |  |  |  |
|     | OUR SPACE IS A TAPROOM TO DRINK BEVERAGES MADE ON-<br>SITE, BREWERY TOURS AND EDUCATION, AN EVENT SPACE TO HOLD<br>PRIVATE AND PUBLIC FUNCTIONS TO ENGAGE THE LOCAL<br>COMMUNITY.   |             |                       |                 |  |  |  |  |
| b.  | Is the sale of alcohol intended to be the principal purpose of the business?  | Yes         | No                    |                 |  |  |  |  |
|     | If NO, what is intended to be the principal purpose of the business?  |             |                       |                 |  |  |  |  |
| c.  | Is the applicant engaged, or intending to be engaged, in the sale or supply of a provision of any services other than those directly related to the sale or supply  |             |                       |                 |  |  |  |  |
|     | If YES, what is the nature of those other goods or services?  |             |                       |                 |  |  |  |  |
|     | NON-ALCOHOLIC DRINKS, BREWERY MER<br>T-SHIRTS, HATS, PINT GLASSES (BRANDE   | CHE<br>ED). | NDISE, S              | TICKERS,        |  |  |  |  |
| d.  | On which days and during which hours does the applicant intend to sell alcoho   | ol unde     | r this licence?       |                 |  |  |  |  |
| e.  | THURSDAY, FRIDAY, SATURDAY SUNDAY, MUNDAY, TUESDAY, WEDNES I am - I pm SEVEN DAYS A W  BYO Restaurants only: Does the applicant wish to have the licence endorsed of  | JEE         | K                     | ct? Yes No      |  |  |  |  |
| f.  | Full On-licence: Are you also intending to permit BYO?  Yes  No   |             |                       |                 |  |  |  |  |
|     | V 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 <a href="mailto:cc.govt.nz/alcohol">cc.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):

BASE PIZZA SPECIAL FOOD MENU, OCCASIONAL FOOD TRUCKS, SNACKS

· Non-alcoholic refreshments:

KARMA COLA BEVERAGE RANGE, HOP WATER, KOMBUCHA, WATER

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

SUPER SESSION XPA 2.5%

· Alcohol range available (attach full drinks menu)

SEE ATTACHED

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?

WE WILL HAVE FREE WIFI AND SIGNAGE WITH TAXI SERVICE PHONE NUMBER SO PATRONS CAN EASILY ORGANISE SAFE TRANSPORT. ALTEMATIVELY, WE STAFF CAN ORGANISE RIDES WITH BREWERY PHONE.

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

PROMOTION OF ON-SITE BREWEO LOW AND NON-ALCOHOLIC PRODUCTS, AS WELL AS THE KARMA KOLA RANGE, FOOD PAIRINGS AND SNACKS AVAILABLE, FREE AND ACCESSIBLE WATER.

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?

CHECK VALID IDENTIFICATION OF ANYONE ORDERING ALCOHOL, STAFF TRAINED AND WATCHING FOR INTOXICATION INDICATORS. WE WILL APPLY METHODS OF SLOWING DOWN OR CUTTING OFF.

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)

WATER JUGS FILLED AND PRESENTED ON THE BAR WITH GLASSES AND SMALLER JUGS THAT CAN BE BROUGHT BACK TO TABLES.

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

ALL STAFF WILL BE TRAINED IN HOST RESPONSIBILITY POLICY, WILL KNOW THE TYPE OF LICENCE THEY ARE WORKING UNDER, THE MANAGER WILL SUPPORT THE STAFF TO CREATE A SAFE ENVIRONMENT FOR ALL.

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

OUR BREWERY PATRONS WILL ONLY ALWAYS BE INSIDE, AND THE LATEST WE SHOULD CLOSE WILL BE 8 PM. IN A 300 METRE RADIUS THERE ARE ONLY COMMERCIAL PROPERTIES. VOLUMES OF MUSIC WILL BE AT A MINIMAL LEVEL TO ENSURE COMFORTABLE TALKING.

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

WE WILL ENSURE PATRONS ARE WELL LOOKED AFTER, PREVENTING INTOXICATION, GETTING HOME SAFELY, MAKING SURE THERE IS A POSITIVE ATMOSPHERE AT OUR TAPROOM.



- 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)
  - THERE ARE NO KNOWN OTHER LICENCED PREMISES IN THE NEAR VICINITY. THE SURROUNDING BUSINESES ARE MOSTLY INDUSTRIAL AND OFFICES. OUR TAPROOM WILL ADD TO THE REJUVINATION AND VIBRANCY OF THE AREA.
- 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?

INDUSTRY, STANDARD MONDAY - TRIDAY WORKING HOURS. OUR TAPROOM IS SOLELY INDOORS AND WONT IMPACT THE LAND.

# 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 <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>



# 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 | 12. | Authorisation | You must complete this section in | ful |
|---|-----|---------------|-----------------------------------|-----|
|---|-----|---------------|-----------------------------------|-----|

Have you completed ALL relevant sections of this form and attached ALL requested documents? Ves

? Ves 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 understood the above privacy statement

√ Yes No

Dated at Christchurch this 1 st day of Man 20 25

Applicant's Signature (must not be signed by an Agent or Solicitor)

> Christchurch City Council

# 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 <a href="mailto:cc.govt.nz/alcohol">cc.govt.nz/alcohol</a>

