

PUBLIC NOTICE OF APPLICATION

Sale and Supply of Alcohol Act 2012 Section 101

EPSILON VENTURES LIMITED, (THE LICENSEE, PO Box 8224, Christchurch 8440), has made application to the District Licensing Committee at Christchurch for the issue of OFF-LICENCE NEW in respect of the premises situated at 133 Riccarton Road, Riccarton known as PAK N SAVE RICCARTON.

The general nature of the business conducted under the licence is: OFF-LICENCE SUPERMARKET

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

MONDAY TO SUNDAY 7.00 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: 20 May 2025

www.ccc.govt.nz/alcohol

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

For office use only:

Application for new Off-licence

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-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 Lodgement meeting. Filing is not complete un		ssing. You will be given an invoice at the						
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 form and required documents).	We can only process your application once we have both the Proof of Payment of fees AND the required paperwork (application							
Accepted methods of payment are: CASH – EFTP	OS – Internet Banking.							
Any questions contact the Alcohol Licensing Tear	m to discuss and for more information,	oh 03 941 8999 or alcohollicensing@ccc.govt.nz						
Endorsements: (state by type every endorsement sought) Auctioneers Remote Sales								
1. New application for:								
a. Trading name: PAK'nSAVE Riccarton								
b. Licensee:	EPSILON VENTURES LIMIT	TED .						
2. Lodgement meeting, Fees Ca	lculation Invoice and Pay	ment						
(Refer fees information sheet) To be complete	ed at lodgement meeting with inspecto	r 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: SUPPLM	ARKET Weigh	nting: 15						
a. Type of licensed premises: SUPCLMb. Latest alcohol sale time: 11 ° c	O DM Weigh	nting: 3						
c. Enforcements:	Weigh							
d. Total weighting:	e Category: Very low Low	Medium						
e. Fees payable: Application fee: \$ 1003	- 50 Annual fee: \$ 1039	-00						
f. Premises Certificate of Compliance (alcohol) application lodged? Yes	f. Premises Certificate of Compliance							
g. Inspector confirmed application vetted and	complete for lodgement Yes	No (refer to lodgement notes on back page)						
Inspectors Signature: To be completed by the inspector at the loagement	meeting.	19-05-2025dd/mm/yyyy						
Council Use Only								
Connect invoice number:	Receipt No.:							
	Date:							



3.	Details of applicant Please give lega	l name as appears on Birth Certif	icate or Passport				
a.	Company name or full legal name(s) if individua EPSILON VENTURES LIMITED	to be on licence:					
b.	Other names/aliases known by: N/a						
c.	Date of birth:		Sex: Male	Female			
d.	Occupation/Current employment (including for all Directors):						
e.	Residential address						
f.	Website:						
g.	Convictions of Company Directors, Partners, o	r individuals:					
	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 explain the circumstances on another page)						
	Name of offence:	Penalty suffer	ed:				
h.	Postal address for service of documents: PO BO	8224					
	Suburb: RICCARTON	City: CHRISTCHU	IRCH	Postcode: 8440			
	Is this address used for any other business with 0	Council? e.g. Rates; dog regist	ration. Yes	√ No			
	If Yes and this address has changed recently please go to the "Contact us" link at www.ccc.govt.nz/contact-us to update your addess details for all other Council business.						
Ĭ.	Daytime Contact Name: HELEN BURNETT						
	Phone:	Mobile:					
	Email: helen.burnett@fssi.co.nz						
j.	Preferred mode of contact: email						
k.	Status of applicant: (tick appropriate box)						
	Natural Person	Private Company		Trustee			
	Licensing Trust	Partnership		Public Company			
	Government Department Manager under the protection of Personal a	Local Authority and Property Rights Act 1988		Incorporated Society			
	Body Corporate to which section 28(1)(b) of Board, organization, or other body to which	the Act applies. Authority inc	corporated under:				
	Other						



Current Staff with Managers Cerhficales.

Name	Certificate #	Expiry DOB
Tania Preston	GM60/CERT/296/2019	13/05/2026
Fiona Maureen Maclean	GM 60/CERT/317/2019	29/05/2026
Nickoli Alexander	GM 60/CERT/33/2015	16/02/2027
Gurjinder Singh	GM 007/CERT/6115/2016	13/04/2028
Rosita Singh	GM60/CERT/218/2018	30/04/2028
Ginalyn Valleser Oculam	GM 60CERT/310/2021	21/06/2025
Matthew Parker	GM60CERT/586/2018	1/11/2025
Robin Dixon	GM60/CERT/29//2017	9/01/2026
Harriet Isobel Grace	GM60/CERT/55/2022	23/02/2026
Jeralyn Riveral Gaje	GM60/CERT/33/2023	17/01/2027
Franco Perti	GM56/CERT/068/2019	26/08/2026
Cecilyn Relliy	GM60/CERT/254/2023	19/06/2027
Frances Pasaol	63/CERT/25/2019	18/07/2026
Jenalyn Cacpal Monces	GM60/CERT/257/2024	21/05/2025
Sammy Hiscock	59/CERT/276/2017	16/12/2025
Helen Burnett	59/CERT/079/2014	3/08/2026
Kyle Burnett	59 CERT/023/2015	28/05/2027
Rowan Bunting	59/CERT/285/2017	7/12/2025
Mitchell Parker	60/CERT/1344/2014	17/12/2026
Debbie Drain	59/CERT/086/2014	31/07/2027
Callum Kennedy	59/CERT307/2017	27/02/2027

Name:	Known as:	Address:	Certifica	te number, or if no	Expiry Date
	Kilowii as.	Address.	certifica	te held confirm if re applied for one	expiry date
		See attached excel - this ident currently operating at Riccarto			
		people we will be taking from	Lincoln		
Note: please rememb managers.	er to complete a sepa	rate Notice of Duty Manager Appoi l	ntment or Change form fo	r all appointments or t	ermination of duty
5. Further d	etails of whe	ere applicant is a con	npany		
a. Date of incorpo	ration: 19th May 20	009			
	oration: Christchure				
. Full details of e	ach director, and th	ne secretary (if any), as follows:			
Full name:	Address:	Date of birth	e: Place of birth:	Designation:	Face value of shares held:
Kyle James Burnett					
Helen Frances Burne	ett				
d. Private Compar	ny only: Authorised	d Capital:	Paid-up Ca	apital:	
		And it and the first of the same of the sa			
e. Private Compar		s of each person who holds any	shares issued by the co	mpany:	
		s of each person who holds any	MELWOOD INHIBITED STREET	mpany: Designation:	Face value of shares held:
e. Private Compar	ny: Full detail	s of each person who holds any	MELWOOD INHIBITED STREET		
e. Private Compar	ny: Full detail	s of each person who holds any	MELWOOD INHIBITED STREET		
e. Private Compar Full name:	y: Full details	s of each person who holds any	n: Place of birth:	Designation:	shares held:
e. Private Compar Full name:	y: Full details	s of each person who holds any Date of birth ch person who holds 20 percent	n: Place of birth:	Designation:	shares held:
e. Private Compar Full name: . Public Compan by the compan	y: Full details of each	s of each person who holds any Date of birth ch person who holds 20 percent	n: Place of birth:	Designation: or of any particular cl	shares held: ass of shares, issues face value of
e. Private Compar Full name: . Public Compan by the compan	y: Full details of each	s of each person who holds any Date of birth ch person who holds 20 percent	n: Place of birth:	Designation: or of any particular cl	shares held: ass of shares, issues face value of

4. Details of all Managers appointed for the premises



6. Furth	er details o	of where appl	icant is a partner	ship				
a. Full detai	s of each partn	er as follows:						
Full nam	e:	Address:	Date of birth:	Place of birth:	Designation:	Face value of shares held:		
. Signature	of each partne	r:						
. Premi	ses details							
			Sales this is the office base CHRISTCHURCH 8440)				
Is this pre		known by any other a	ddress? (Note: for Remote	s Sales this could be	e your website add	ress)		
. Proposed	trading name f	or premises (if any): ı	PAKnSAVE RICCCARTON		1			
Is a licenc	Proposed trading name for premises (if any): PAKnSAVE RICCCARTON Is a licence already held for this premises? Yes No If yes, licence number:							
. Do you ho	Do you hold a current Temporary Authority to trade on that licence? Yes 🗸 No							
Is a licence sought conditional upon construction/completion of the premises? Yes 🗸 No								
Does the	ooes the applicant own the proposed licensed premises? Yes 🗸 No							
If NO: Owners fu	ll name: SCEN	TRE GROUP WESTFIE	ELD					
	Owners full name: SCENTRE GROUP WESTFIELD Owners address: PO Box 109-208,NEWMARKET,AUCKLAND							
Form and term of tenure (state whether to be held as leasehold, or under tenancy agreement, or licence):								
	TENANCY AGREEMENT -							
B: Additional	nformation and/o	r signed documents ma	y be requested in some instanc	es to confirm tenure.				
. Details of	premises area							
The propo	sed licensed ar	eas include: SEE ATT	ACHED MAP OF SINGLE US	SE ALCOHOL AREA				
NB: Please	NB: Please attach plans annotated with licensed area							
. What part	What part (if any) of the premises does the applicant intend should be designated as:							
Supervi.e. CouUn-des	 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. 							
IB: Any desi	nated areas M	UST be marked on t	he plan for the premises					
A restricte	d area:							
A supervi	ed area:							



i.	FIRE SAFETY – Section 100(d): I certify that the Building Owner has confirmed with me that the building: A has 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: HELEN AND KYLE BURNETT
	Signature: Date: 19 05 25 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. case contact Fire and Emergency NZ (telephone 372 8600) for more information about evacuation schemes and fire safety requirements.
	and the second of the second o
8.	Business details Please attach separate sheet if required
a.	Does the applicant seek the licence in connection with the business of a remote seller? Yes No
	If yes, state the address from where the alcohol will be stored and dispatched from.
b.	Does the applicant seek the licence in connection with the business of an auctioneer? Yes No
c.	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? GROCERIES - SUPERMARKET
	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 the sale of alcohol?
d.	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?
	Groceries, General Merchandise
e.	On which days and during which hours does the applicant intend to sell alcohol under this licence? Note for remote sellers: s49 can permit sales "at any time on any day". s59(1) imposes restrictions on hours for delivery to the buyer for all remote. sales licences.
	Mon-Sun 7am-11pm
f.	Does the applicant intend to provide complimentary samples of alcohol on the premises? Yes No



9.	Conditions Please attach separate sheet if required
	e following questions relate to Host Responsibility. In conjunction with completing the questions, you should provide th this application a copy of your 'Host Responsibility Policy' by using the guidelines on our website ccc.govt.nz
a.	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?
	We will ensure our Host Responsibility Policy is adhered to in the sale of liquor at Riccarton Pak'nSave. Training for the team.
b.	Are there any other steps the applicant intends to take to promote the responsible drinking of alcohol?
	This is all identified in our Host Responsibility - Supervisor swipes will be used for any member who does not hold a managers certificate.
c.	Where the principal business is other than the manufacture or sale of alcohol: What kind or kinds of alcohol does the applicant intend to sell or deliver under the licence?
	Beer and wine and cider. 0% alcohol
d.	What appropriate systems, staff and training does/will the applicant have in place to ensure compliance with the law?
	We will induct everyone at checkout with basics of the sale of liquor Act and ensure we train all supervisors and duty managers with Managers C
e.	What are the current and possible future noise levels and how does the applicant intend to mitigate them?
	Not/Applicable
f.	What are the current and possible future levels of nuisance and vandalism and how does the applicant intend to mitigate them?
	Security and management of people.
g.	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 map- the current store is already operating. No increase in alcohol related problems. We hope to support the police and arla in reducing har.
h.	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?

the area is currently a mall - increased security in the mall and in store will support the area and keep customers safe.



LIQUOR STORES IN A CLOSE PROXIMITY

	Store Name	Address	Opening Hours	Approx. Distance from Pak'nSave Riccarton
	Liquorland Riccarton	43 Riccarton Road, Riccarton	Mon–Thu: 9:00 AM – 10:00 PM Fri–Sat: 9:00 AM – 11:00 PM Sun: 11:00 AM – 8:00 PM	~1.2 km (3 min drive)
2	Liquorland Church Corner	334 Riccarton Road, Upper Riccarton	Mon–Wed: 10:00 AM – 9:00 PM Thu–Fri: 10:00 AM – 10:00 PM Sat: 10:00 AM – 10:00 PM Sun: 11:00 AM – 7:00 PM	~2.0 km (5 min drive)
3	Liquorland Blenheim Road	Road,	Mon–Sat: 9:00 AM – 9:00 PM Sun: 9:30 AM – 7:30 PM	~2.0 km (5 min drive)
4	Super Liquor Blenheim Rd	280 Blenheim Road, Upper Riccarton	Mon: 9:00 AM – 9:00 PM Tue–Wed: 9:00 AM – 10:00 PM Thu–Sat: 9:00 AM – 11:00 PM Sun: 10:00 AM – 9:00 PM	~2.0 km (5 min drive)
5	Thirsty Liquor Riccarton	5/62 Riccarton Road, Upper Riccarton	Mon-tues 9am-10pm Wed-sun 10am-10pm	-1km (3min drive)



Pakini Save Riccarto-

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, and mark any restricted or supervised designated areas)
 Photo of principle entrance to the premises
- ✓ Certificate of Incorporation (including the extract details of directors and shareholders)
- ✓ Premises Certificate of Compliance (Alcohol)
- All Grocery Stores must complete a Statement of Annual Sales Revenue if applicable. Template statement available here ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences/off-licence

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)

- ✓ Host Responsibility Policy
- ✓ Duty Manager appointment forms for all your duty managers
- ✓ 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
- **Bottle Stores 32(1)(b):** 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 ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences/off-licence

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 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. 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 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).

11. 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, and 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 **Privacy Statement**

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

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).

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	10	day of	may	20 25
Applican't 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 ccc.govt.nz/alcohol