

r 19(1)
Sections 24 and 47, Sale of Liquor Act 1989
Form 17
Fee: \$132.00

To: The Secretary
Kaipara District Licensing Agency
Kaipara District Council
Private Bag 1001
Dargaville

Application for temporary authority to carry on the sale and supply (*or delivery*) of liquor is made in accordance with the details set out below.

Details of Applicant

Full Name:

Address:.....

.....

Occupation:.....

Postal Address for Service of Documents:.....

.....

Daytime Contact Name: Daytime Phone:

Details of Licence (*tick appropriate box*) On Licence Off Licence Licence Number**Details Of Premises** (*To be included only where the licence applies to any premises*)

Address:

Trading or other name (*if any*):.....**Details Of Conveyance** (*To be included only where the licence applies to any conveyance*)

Type of conveyance:

Address of home base (*if any*):.....Trading or other name (*if any*):.....**Further Details**

What right, title, estate or interest does the applicant have:

In the premises (*or conveyance*) to which the application relates?.....In any business conducted in the premises (*or conveyance*) to which the application relates?.....

.....

Does the applicant intend to carry on the sale and supply (or delivery) of liquor personally? Yes / No

If No:

What is the name, address and occupation of the person through whom the applicant intends to carry on the sale and supply (or delivery) of liquor?

Full Name:

Address:.....

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Occupation:.....

What are the reasons for the applications?

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Dated at this day of 20.....

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Applicant

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Applicant

Notes

1. The District Licensing Agency may require notice of this application to be given to any person or persons it may specify.
2. For the matters that are to accompany this application, see regulation 19 (2) of the Sale of Liquor Regulations 1990.
3. In order to assist with the timely processing of your application it is important that you submit **three** complete copies of the application (including any supporting documentation) at the time of lodgement