



## Notice of Management Change

### Sections 231, Sale and Supply of Alcohol Act 2012

<b>Name of Licensed Premises:</b>	
<b>Licensee:</b>	<b>Licence Number:</b>
<b>Address of Licensed Premises:</b>	
<b>Email:</b>	<b>Contact telephone:</b>

**What are you notifying?** (Please tick and complete the applicable box below)

<input type="checkbox"/>	<b>New Certificate Holding Manager</b>
Full name:	Effective from:
Certificate number:	Certificate expiry date:
<input type="checkbox"/>	<b>Temporary Manager</b> <i>(see s229, Sale and Supply of Alcohol Act)</i>
Effective from:	to
Full name:	Date of birth:
Residential address:	
Who they are replacing:	Certificate number:
Reason:	
<i>(NB: A Temporary Manager must apply for a Manager's Certificate within two working days of their appointment)</i>	
<input type="checkbox"/>	<b>Acting Manager</b> <i>(see s230, Sale and Supply of Alcohol Act)</i>
Effective from:	to
Full name:	Date of birth:
Residential address:	
Who they are replacing:	Certificate number:
Reason:	

Termination/cancellation of Manager appointment	
Full name:	Effective from:
Certificate number:	Certificate expiry date:

Identification		
NZ Drivers Licence _____ Please include your number above.	<b>Or</b>	Passport _____ Please include your number above.

<p><i>Post to:</i></p> <p>The Secretary          Kaipara District Licensing Committee          Alcohol and Licensing Department          c/- Kaipara District Council,          Unit 5 The Hub          6 Molesworth Drive  <b>Mangawhai 0505</b></p>	<p><i>Email to:</i></p> <p><a href="mailto:kdclicensing@kaipara.govt.nz">kdclicensing@kaipara.govt.nz</a></p> <p>Attention: Liquor Licensing</p>
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Signature of licensee: .....

Date:

Name: .....

Position: .....