

To: The Secretary  
Tasman District Licensing Committee  
Private Bag 4  
Richmond 7050

# Application for Special Licence

## Section 138, Sale and Supply of Alcohol Act 2012

Application for a special licence is made in accordance with the particulars set out below

**This application form may be made publicly available to anyone enquiring, including any contact details and personal information contained in it. Please read the information sheet on Special Licences before completing this form.**

Type of special licence applied for: *(tick one)*  On-site  Off-site  Conveyance

Number of working days between application and event: \_\_\_\_\_

If less than 20 working days, could the event have been reasonably foreseen?: *(tick one)*  Yes  No

If **"No"**, describe circumstances: \_\_\_\_\_

If **"Yes"**, why is the application late?: \_\_\_\_\_

### Event details

Name of event: \_\_\_\_\_

Nature of event: *(describe)* \_\_\_\_\_

Principal purpose of event: \_\_\_\_\_

#### Days and hours proposed for sale of alcohol

Days alcohol proposed to be sold: \_\_\_\_\_

Proposed hours each day: \_\_\_\_\_

Estimate of number of people attending: \_\_\_\_\_

Probable age distribution of people attending: \_\_\_\_\_

Types of alcohol to be sold/supplied: \_\_\_\_\_

Types of container in which alcohol to be sold/supplied: \_\_\_\_\_

Do you intend to sell or supply any goods other than alcohol and food, or provide any services other than those directly related to the sale or supply of alcohol and food?

*(tick one)*  Yes  No

If **"Yes"**, what is the nature of other goods or services?: \_\_\_\_\_

## Details of premises

Name, trading name, or name of building:
Address:
Tenure: <i>(state whether to be held as freehold, unit title, leasehold, under licence, or hire)</i>

**OR**

## Details of conveyance

Type of conveyance: <i>(e.g. ship, railway carriage, bus, etc)</i>
Registration number:
Home base address:
Name of conveyance:

Is a licence already held for premises or conveyance concerned: *(tick one)*  Yes  No

If **"Yes"**, what kind of licence? *(tick one)*  On licence  Club licence  Off licence

## Applicant Details

Contact person: *(please provide your details so we can contact you about your application)*

Name:	
Position:	Ph:
Mobile:	Fax:
Email:	
Postal Address for service of documents:	

What is the full legal name of the entity or person you want to hold the licence?:

What is the status of the applicant wishing to hold the licence?: *(tick one)*

- |   |  |
|---|--|
| <input type="checkbox"/> A person (an individual)                         | <input type="checkbox"/> Body corporate  |
| <input type="checkbox"/> Private company                                  | <input type="checkbox"/> Licensing trust   |
| <input type="checkbox"/> Club   | <input type="checkbox"/> Trustee   |
| <input type="checkbox"/> Incorporated society                             | <input type="checkbox"/> Manager under the Protection of Personal Property Rights Act 1998 |
| <input type="checkbox"/> Partnership                                      | <input type="checkbox"/> Local Authority   |
| <input type="checkbox"/> Government Department or Instrument of the Crown |  |

Please complete the details for ONE type of applicant only:

**For a Person**

Details of Applicant that wishes to personally hold the licence:

Name: \_\_\_\_\_

Residential Address: \_\_\_\_\_  
\_\_\_\_\_

Sex: (tick one)  Male  Female

Occupation: \_\_\_\_\_

D.O.B:        /        /                      Place of Birth: \_\_\_\_\_

**For a Private Company**

For a private company incorporated under the Companies Act 1993, state:

Company name: \_\_\_\_\_

Full legal names of all Directors: (list)

\_\_\_\_\_

\_\_\_\_\_

**For a Club, Incorporated Society, Licensing Trust, Trustee, Manager, Local Authority, Government Department (tick one)**

**Club** (Club Name: \_\_\_\_\_ )       **Incorporated Society** (Inc. Society Name: \_\_\_\_\_ )

**Licensing Trust**                                       **Trustee**

**Local Authority**                                       **Government Department or other instrument of Crown**

**Manager under the Protection of Personal and Property Rights Act 1988**

**For a Partnership**

Full legal details for each partner:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

D.O.B:        /        /                      Place of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

D.O.B:        /        /                      Place of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_

### For a Body Corporate

Details of Applicant that is a Body Corporate, authority under which incorporated:

### Criminal convictions

Has the applicant been convicted of any offence, diversion or any matter currently before the Court (including traffic offences)?

(tick one)  Yes  No

If "Yes", what are the details of each offence?

Nature of Offence	Date of Conviction	Penalty Suffered

### Details of managers

If you will have a Duty Manager who holds a Manager's Certificate supervising the bar at the event, provide their full legal name, number and expiry date of manager's certificate:

Name:			
Managers Certificate #:		Expiry Date of Managers Certificate:	/   /

Name:			
Managers Certificate #:		Expiry Date of Managers Certificate:	/   /

If no Manager's Certificate holders will be present, who will take the responsibility for management of all alcohol activities during the event?:

Name: \_\_\_\_\_

Position: \_\_\_\_\_

### Supporting information

Please provide details of the following where applicable. This information will be passed to the Police, and Public Health and Licensing Inspector, so it should be detailed enough to make an assessment of your application.

1. What experience and training do you have in running events or holding Special Licences?  
\_\_\_\_\_  
\_\_\_\_\_

2. What food is intended to be available? (describe type and range of food, whether food is free or for sale, and what time food will be available)  
\_\_\_\_\_  
\_\_\_\_\_

3. What non-alcoholic beverages will be available? (describe type and range of drinks, whether beverages are free or for sale)  
\_\_\_\_\_  
\_\_\_\_\_

4. What low-alcohol beverages will be available? *(describe type and range of drinks, whether beverages are free or for sale)*

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5. Where is drinking water intended to be freely available to patrons? How will it be provided? *(e.g. jugs of water & glasses on the bars)*

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6. If private water supply, provide details of water treatment system:

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7. What information and help with transport options will you provide? *(e.g. taxi numbers, courtesy bus)*

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8. How will you prevent the sale and supply of alcohol to underage/minors and intoxicated people?

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9. What steps will you take to promote the responsible consumption of alcohol? *(e.g. only sell wine by the glass)*

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10. What training will you give to volunteers and staff before the event?

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11. Will you have any other measures in place to ensure it is a safe event? *(e.g. security, door staff, people monitoring the crowd)*

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12. Do you want the premises/site to be: *(tick one)*
- Undesignated (anyone of any age can attend)
  - Supervised (minors may only be present if accompanied by a parent or legal guardian)
  - Restricted (no one under 18 years of age may be present)

13. Will your event have any impact on the neighbourhood? *(e.g. noise from loud music, parking congestion)*

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If so, what will you do to minimise the impact?

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14. Attach a site plan showing:

- The bar, location of water, food, music, etc.
- The principle entrance
- Any area to be designated as a supervised area or restricted area, and indicating whether supervised or restricted areas *(see Special Licence Information Sheet for more information).*

15. If your event is for over 400 people, please attach an Alcohol Management Plan – see *Special Licence Information Sheet* for more information, or visit [www.tasman.govt.nz](http://www.tasman.govt.nz) to download a template.

## 8. IMPORTANT – PLEASE sign and date here

Signature of applicant:

Date:

## Fees

The following fees are payable:

<input type="checkbox"/> <b>Class 1</b>	1 Large event; or more than 3 Medium events; or more than 12 Small events	\$575.00
<input type="checkbox"/> <b>Class 2</b>	1 to 3 Medium events; or 3 to 12 Small events	\$207.00
<input type="checkbox"/> <b>Class 3</b>	1 or 2 Small events	\$63.20

**Large event:** An event that the territorial authority believes on reasonable grounds will have patronage of more than 400 people.

**Medium event:** An event that the territorial authority believes on reasonable grounds will have a patronage of between 100 and 400 people.

**Small event:** An event that the territorial authority believes on reasonable grounds will have a patronage of fewer than 100 people.

### Payment can be made by:

- Cheque, payable to Tasman District Council
- Cash, cheque or eftpos/credit card (note: credit card incurs a fee) at any Council Service Centre
- Online payment to: ASB 12-3193-0002048-03. Use 'Special' and surname of applicant as a reference.

### Application form and any supporting information/plan can be submitted:

- By Email: [regulatory.admin@tasman.govt.nz](mailto:regulatory.admin@tasman.govt.nz)
- By hand at any Council Service Centre
- By post to: Tasman District Council, Private Bag 4, Richmond 7050.

We recommend you save a copy of your application to assist you in submitting other applications in future.

## Notes

- Please read the Special Licence Information Sheet before completing this form.**
- If required to do so by the secretary of the District Licensing Committee, you must within 10 working days after filing this application, attach a public notice in a conspicuous place on or adjacent to the site to which this application relates. If this is required we will send you the public notice that you need to display.**

## What happens next?

**Your application will be sent to the Police, Public Health and an Inspector. Any of whom may contact you to discuss your application.**

Feel free to contact us:



Tasman District Council  
Email [info@tasman.govt.nz](mailto:info@tasman.govt.nz)  
Website [www.tasman.govt.nz](http://www.tasman.govt.nz)  
24 hour assistance

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189 Queen Street  
Private Bag 4  
Richmond 7050  
New Zealand  
Phone 03 543 8400  
Fax 03 543 9524

Murchison  
92 Fairfax Street  
Murchison 7007  
New Zealand  
Phone 03 523 1013  
Fax 03 523 1012

Motueka  
7 Hickmott Place  
PO Box 123  
Motueka 7143  
New Zealand  
Phone 03 528 2022  
Fax 03 528 9751

Takaka  
14 Junction Street  
PO Box 74  
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Phone 03 525 0020  
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