

# FORM 6A APPLICATION FOR SPECIAL LICENCE [OFF-SITE] CHECKLIST

## FOR OFFICE USE ONLY

Checked By

Inspector

Date

Fee Payable \$

## YOU'LL NEED TO INCLUDE THE FOLLOWING WITH YOUR APPLICATION FOR US TO BE ABLE TO PROCESS IT:

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Completed, signed and dated application form                       |
| <input type="checkbox"/> | Owners permission  |
| <input type="checkbox"/> | Public Health questionnaire  |
| <input type="checkbox"/> | Google Earth aerial map showing the exact location of the premises |
| <input type="checkbox"/> | This checklist   |

### Details for Person Responsible

- |                          |  |                          |              |
|--------------------------|--|--------------------------|--------------|
| <input type="checkbox"/> | Full name  | <input type="checkbox"/> | Full address |
| <input type="checkbox"/> | DOB and driver's licence number and / or passport number |                          |              |

### Details for Certified Manager

- |                          |  |                          |              |
|--------------------------|--|--------------------------|--------------|
| <input type="checkbox"/> | Full name  | <input type="checkbox"/> | Full address |
| <input type="checkbox"/> | DOB and driver's licence number and / or passport number |                          |              |
| <input type="checkbox"/> | Manager's Certificate number                             |                          |              |

### A4 plan showing

- |                          |   |                          |                         |
|--------------------------|---|--------------------------|-------------------------|
| <input type="checkbox"/> | Principal entrance                              | <input type="checkbox"/> | Toilets                 |
| <input type="checkbox"/> | Fire exits                                      | <input type="checkbox"/> | Smoking area            |
| <input type="checkbox"/> | Evacuation assembly points                      | <input type="checkbox"/> | Security                |
| <input type="checkbox"/> | Position where alcohol will be sold or supplied | <input type="checkbox"/> | Access to free water    |
| <input type="checkbox"/> | Kitchen   | <input type="checkbox"/> | Designation of premises |

**Please contact a Licensing Inspector to arrange a pre-lodgement check of your application.**

We won't accept your application without an appointment with an inspector.

Phone [06] 356 8199 or email [eps@pncc.govt.nz](mailto:eps@pncc.govt.nz)



# FORM 6A APPLICATION FOR SPECIAL LICENCE [OFF-SITE] INFORMATION SHEET



Please read these notes before completing the application

Not supplying all the details needed could mean your licence takes longer or it could be opposed.

## WHEN DO I NEED A SPECIAL LICENCE?

If you are holding a function or an event where alcohol will be sold, either over the bar, by ticket system, donation or koha or where the cost of alcohol is included in pre-sold tickets, you are deemed to be selling alcohol. If you are selling alcohol you need a special licence. If the event is in already licensed premises such as a bar, café, tavern or sports club and is within the conditions of that premise's licence, then you are covered by that licence. However, if the event is being held in premises not already licensed, or is outside the usual hours or conditions of an existing licence, you need a special licence.

## TYPES OF SPECIAL LICENCES

There are two types of special licences:

**On-Site** / Allows for the sale and supply of alcohol at your event for consumption on the premises.

**Off-Site** / Allows for the sale and supply of alcohol at your event for customers to purchase un-opened bottles of alcohol to take away from the premises and to allow free tastings.

There are separate applications for an on-site and off-site Special Licence.  
Please ensure you complete the correct application for your event.

## TIMEFRAMES

You need to allow 25 working days for your application to be processed.  
The Police and Medical Officer of Health [MOH] have 15 working days to report on your application.

## CERTIFIED MANAGER

The District Licensing Committee, Police and Medical Officer of Health [MOH] may require, as a condition of a Special Licence, that the holder of a Manager's Certificate be present and responsible for the sale of alcohol under the licence.

## PLANS

**Not required for events held on premises that are already licenced ie: Bar, Hotel, Club.**

Please supply an A4 plan of the interior of the premises showing the following:

- Principal entrance
- Fire exits
- Evacuation assembly points
- Position where alcohol is to be sold or supplied
- Kitchen
- Toilets
- Smoking area
- Security
- Access to free water
- Designated areas

Also required is a Google Earth aerial map showing the exact location of the premises.

TO: The Secretary  
 District Licensing Committee  
 Palmerston North

Application for a Special Licence is made in accordance with the details set out below.

**DETAILS OF APPLICANT**

Full legal name or names to be on licence

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Postal address / for service of documents

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Contact person	Phone
Email	

**WHETHER LICENCE ALREADY HELD FOR PREMISES CONCERNED**

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Type of licence / If yes
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**APPLICANT STATUS / by reference to section 28 of Sale and Supply of Alcohol Act 2012**

<input type="checkbox"/> Natural Person/s	<input type="checkbox"/> Private Company	<input type="checkbox"/> Body Corporate / to which Section 75[1][ba] of the Act applies
<input type="checkbox"/> Club	<input type="checkbox"/> Licensing Trust	<input type="checkbox"/> Board, organisation, or other body to which section 75 [1][bb] of the Act applies
<input type="checkbox"/> Public Company	<input type="checkbox"/> Partnership	<input type="checkbox"/> Government Department or other instrument of the Crown
<input type="checkbox"/> Local Authority	<input type="checkbox"/> Trustee	<input type="checkbox"/> Managers under the Protection of Personal and Property Rights Act 1988

## DETAILS OF MANAGER/S OR PERSON RESPONSIBLE

Full legal name / including any middle names, aliases and/or maiden name that you may be known by

Date of birth

Manager's certificate number / if applicable

Manager's certificate expiry date / if applicable

Driver's licence number

Passport number

Full legal name / including any middle names, aliases and/or maiden name that you may be known by

Date of birth

Manager's certificate number / if applicable

Manager's certificate expiry date / if applicable

Driver's licence number

Passport number

Full legal name / including any middle names, aliases and/or maiden name that you may be known by

Date of birth

Manager's certificate number / if applicable

Manager's certificate expiry date / if applicable

Driver's licence number

Passport number

## DETAILS OF PREMISES

Any name, trading name, or name of building

Physical address

**Tenure**

Owned by applicant

Hire / Lease

Tenancy agreement

Licence

Full legal name of owner if not the applicant / including any middle names, aliases and/or maiden name that you may be known by

Owner postal address / if not the applicant

**EVENT DETAILS**

Nature of event / describe

Days and hours proposed for sale of alcohol

Estimate if number of people attending

Probable age distribution of people attending

Principal purpose of event

What containers does the applicant propose to sell alcohol in?

## CONDITIONS

For the duration of the event the premises will be designated as

Undesignated

Supervised

Restricted

**Undesignated** / Anyone of any age may be present on the premises.

**Supervised** / Minors must not be admitted unless accompanied by a parent or legal guardian.

**Restricted** / An area to which minors must not be admitted.

Experience and training of applicant and staff

Steps proposed to be taken to prevent the sale and supply of alcohol to prohibited people / describe

If the application is being applied for outside of the 25 working days, what are the reasons for the late application / describe

Dated at Palmerston North this

day of

20

Date

Month

Year

Applicant's Signature

### PLEASE NOTE

1. This form must be accompanied by the prescribed fee.
2. If required to do so by the secretary of the District Licensing Committee, the applicant must within 10 working days after filing this application with the committee ensure that notice of this application in form 8 is attached in a conspicuous place on or adjacent to the site to which this application relates.