

District Office 15 Galileo Street Private Bag 544 Ngaaruawaahia 3742

Telephone (all hours) 07 824 8633 Call Free 0800 492 452 Huntly Area Office 142 Main Street0800 492 452Raglan Area Office 7 Bow Street07 825 8129Tuakau Area Office 2 Dominion Road0800 492 452

email: <u>rss@waidc.govt.nz</u> <u>www.waikatodistrict.govt.nz</u>

Application for On-Licence or Renewal of On-Licence

(please strike out one)
Sections 100 and 127(2), Sale and Supply of Alcohol Act 2012

To: The Secretary

District Licensing Committee Waikato District Council Private Bag 544

NGARUAWAHIA 3742

Application for an On-Licence or renewal of an On-Licence is made in accordance with the details set out below:

Details of Application			
Type of application (tick box the	at applies):		
☐On-Licence	Renewal of On-Licence	☐ Variation of On-Licence	
Is a licence already held for the	premises or conveyance concerne	ed?	
☐Yes ☐ No			
If Yes, state kind of licence and	licence number:		
Endorsements			
Type of endorsement(s) sought	or sought to be renewed (tick all o	appropriate boxes):	
BYO restaurant	Caterer		
Details of Applicant			
Full legal name or names to be	on licence:		
Contact powers			
Contact person: Daytime phone: Email:			
Email:			
Postal Address for service of de	ocuments:		
Town: Post Code:		: Code:	
Status of applicant:			
☐ Natural person	Private company	Public company	
☐ Partnership	Limited partnership	Trustee	
	d, organisation or other body; Licensing T trument of the Crown; Local Authority; Tr sonal and Property Rights Act 1988		

For an applicant that is a natural person or persons (complete for each applicant):				
Full legal name:		☐ Male ☐ Female		
Also known as:				
Residential address:				
Town:	Post Code:			
Occupation:				
Date of Birth:	Place of Birth:			
Phone:	Email:			
Preferred mode of contact:				
Full legal name:		☐ Male ☐ Female		
Also known as:				
Residential address:				
Town:	Post Code:			
Occupation:				
Date of Birth:	Place of Birth:			
Phone:	Email:			
Preferred mode of contact:				
Full legal name:		☐ Male ☐ Female		
Also known as:				
Residential address:				
Town:	Post Code:			
Occupation:				
Date of Birth:	Place of Birth:			
Phone:	Email:			
Preferred mode of contact:				
Business details: (describe principal business and any other businesse	es)			
Criminal convictions (state all criminal convictions other than convictions not contained in Part 6, and offences to which the Criminal Reco				
For a body corporate, authority under which incorporated:				

Further Details Where	Applicant is a Company				
Date and place of incorporat	ion:				
Give full details of each direc Name	tor: (Use an additional sheet of paper if necessary) Address	Date of I	Birth Place	of Birth	Designation
Public Company Only: Give	full details of each person who holds 20 percen	nt or more of the shares i	ssued by the compa	ny:	
Name	Address	Date of I	Birth Place	of Birth	Designation
Private Company Only:	Authorised Capital \$	Paid-up Cap	oital \$		
Give full details of each person w	ho holds any shares issued by the company:				
Name	Address	Date of Birth	Place of Birth	Designation	Face value of shares held

Further Details Where Applicant is a Partnership

(attach a copy of the partnership agreement to the application)

Give full details of each partner: (Use an additional sheet of paper if necessary)					
Name	Address	Date of Birth	Place of Birth	Designation	

Details of Premises
Address of premises:
Proposed trading name:
Does the applicant own the proposed licensed premises?
If No, what is the full name and address of the owner:
Full Name:
Address:
Town: Post Code:
Tenure: (freehold, unit title, leasehold or under licence, including term)
Is the licence conditional on completion of building work?
If Yes, please state details:
Details of Conveyance
Type of conveyance (bus, ship, railway carriage etc):
Registration number (if any):
Address of home base:
Any name used or proposed for conveyance
Principal route travelled:
Does the applicant own the conveyance?
If No, what is the full name and address of the owner:
Full Name:
Address:
Town:Post Code:
Tenure: (eg leasehold, or under licence, including term)
Is the licence conditional on completion of building work?
If Yes, please state details:

Is a current Safe Ship Management Certificate (if a ship, ferry or hovercraft) or a current Certificate of Airworthiness (if an aircraft) or a Rail Service Licence (if a train) or current Warrant or Certificate of Fitness (if a car or bus) in effect for this conveyance?				
Yes - expiry date:	No			
Details of Managers If more than four bar managers are to be employed, give details on a separate	e sheet of paper			
Full name and address:				
Manager's certificate number:	Expiry date:			
Full name and address:				
Manager's certificate number:	Expiry date:			
Full name and address:				
Manager's certificate number:	Expiry date:			
Full name and address:				
Manager's certificate number:	Expiry date:			
Business Details				
What is the general nature of the business to be conducted	by the applicant if the licence is granted? (eg hotel			
tavern, restaurant, function centre, entertainment/nightclub):	,			
Is the sale of liquor intended to be the principal purpose of If NO, what is intended to be the principal purpose of the b				
, , , ,				
Is the applicant engaged, or intending to be engaged, in the food, or in the provision of any services other than those food?	11, , , ,			
☐ Yes ☐ No				
If Yes, what are those other goods and services?				

On which	days and during which hours does the applicant intend to sell liquor under the licence? (BYO
applicants -	– fill in trading days and hours here too)
-	: (if any) of the premises does the applicant intend should be designated as:
(i)	A supervised area
(ii)	A restricted area
(BYO rest	taurant only) Does the applicant wish to have the licence endorsed under Section 37 of the Act?
☐ Yes	□ No
Condition	ons
What is th	ne experience and training of the applicant?
	n detail the availability for purchase of:
Food (desc	cribe type and range):
Non-alcor	nolic beverages (describe type and range):
Low-alcoh	nol beverages? (describe type and range):
To what e	extent and where is drinking water intended to be freely available to patrons?
If water is	not mains supply, what potable water is intended to be available?
What step	os are intended to be taken to provide help with and information about alternative forms of transport
-	premises?

What steps are proposed to be taken to prevent the sale and supply of alcohol to prohibited people?
Describe any other steps proposed to promote the responsible consumption of alcohol:
What other systems (including training systems) and staff are in place (or are to be in place) for compliance with
the Act?

Notes

PLEASE ALSO REFER TO CHECKLIST ON THE NEXT PAGE TO ENSURE ALL INFORMATION IS SUPPLIED WITH THE APPLICATION

This application must be accompanied by the prescribed fee (see information below). Payment may be made online to BNZ Hamilton, 02 0316 0246517 01. Use 'Alcohol' and the Applicant name as the reference.

USE THIS PAGE TO ENSURE YOU LODGE A COMPLETE APPLICATION.

NOTE: IF NOT COMPLETE, YOUR APPLICATION MAY BE RETURNED TO YOU.

Attac	chments required to accompany applications
	For a body corporate – a copy of the certificate of incorporation (or equivalent documentation) and full details in the company details section of the application form
	For a partnership — a copy of the partnership agreement and full details of each partner in the partnership details section of the application form
	A map showing the location of the premises within Waikato District
	Photo or artist's impression of outside of the premises
	 Detailed A4 scale floor plan of the interior of the premises showing: those parts of the premises that are to be used for the sale and supply of alcohol each area to be designated as a supervised or restricted area, and indicating whether supervised or restricted area; the principal entrance or principal entrances
	A written statement from the owner of the building consenting to the applicant selling alcohol from the premises
	For new applications - Certificates from Waikato District Council that the proposed use of the premises meets requirements of the Resource Management Act and of the Building Code (forms attached for new applications only, fees apply)
	Statement from the building owner that the premises provides and maintains an evacuation scheme as required by section 76 of the Fire and Emergency New Zealand Act 2017, or that because of the building's current use or nature the owner is not required or is exempt from the requirement to provide and maintain such a scheme (see attached form to complete)
	A copy of all menus and a list of all alcoholic, low-alcohol and non-alcoholic drinks to be available (including the details of how free drinking water will be made available)
	A copy of each manager's certificate and details of the manager's experience
	Details of staff training/staff training plan
	Security plan (including a copy of your incident log and, where appropriate, details of any security company used – including evidence of approval as 'crowd controller' from the Private Security Personnel Licensing Authority
	A Host Responsibility Policy and details of how it will be put into practice
	A completed CPTED (Crime Prevention Through Environmental Design) site assessment (forms attached)
	A written locality assessment of amenity and good order including identification of potential sensitive sites issues including vandalism, noise, disorder and the impact of the proposed licensed premises on these with any proposed mitigation measures – use separate sheet to provide this information
	Noise management plan where appropriate – detailing noise sources and how these will be managed. This may include an acoustic report
	Public Notice - the completed template in your application will be placed on Council's website waikatodistrict.govt.nz. Please also complete Form 7 (site notice) and place on your premises.
	Address the section/s of the Local Alcohol Policy that are relevant to your application (NEW AND VARIATIONS ONLY) (https://www.waikatodistrict.govt.nz/your-council/plans-policies-and-bylaws/policies)
And a	ttachments required to accompany RENEWAL applications
	Copies of existing building and planning certificates (if there have been any changes under the Resource Management Act or Building Code new certificate applications may be required)
	An assessment of the amenity and good order in the locality, any issues caused from the operation of the licensed premises and mitigation measures taken to address these (please write on separate sheet)
	If the premises operates gaming machines: - provide a written statement of gross sales revenue for the last financial year (certified by a chartered accountant), outlining gross revenue from Gaming, Alcohol, Food, Accommodation (if applicable) and Other.

CPTED checklist for on-licensed premises

Bar Area			
Bar staff have good visibility of entire premises	Yes	No	N/A
Area behind the bar is raised to improve visibility	Yes	No	N/A
Bar area is open with no obstructions affecting monitoring of premises	Yes	No	N/A
Cash registers are front facing	Yes	No	N/A
If cash registers are not front facing mirrors are installed for monitoring customers	Yes	No	N/A
Safe is out of public view	Yes	No	N/A

Internal Layout			
Premises is laid out so staff can monitor patrons at all times	Yes	No	N/A
There are no obstructions within the bar causing blind spots	Yes	No	N/A
Where there may be blind spots, mirrors or CCTV are installed	Yes	No	N/A
Bar is easily approached by customers	Yes	No	N/A
Customers can easily move around the premises	Yes	No	N/A
Sufficient seating is provided	Yes	No	N/A
Customers cannot climb on structures or fittings	Yes	No	N/A

Crowding			
The premises are not overcrowded	Yes	No	N/A
The maximum number of patrons for the premises is displayed and complied with	Yes	No	N/A

Lighting			
Internal lighting is suitable	Yes	No	N/A
Lighting allows door staff to check IDs etc	Yes	No	N/A
Lighting allows staff to monitor patrons inside the premises	Yes	No	N/A
No areas are too dark inside the premises	Yes	No	N/A
Internal lighting can be raised in an emergency or incident and at closing time	Yes	No	N/A
External lighting is suitable	Yes	No	N/A
External security lighting is installed	Yes	No	N/A

Ventilation			
A ventilation system is installed	Yes	No	N/A
The premises are maintained at a suitable temperature	Yes	No	N/A

CCTV			
CCTV is installed	Yes	No	N/A
CCTV is positioned to monitor vulnerable areas	Yes	No	N/A
Patrons are aware of the CCTV system	Yes	No	N/A
Staff understand its operation	Yes	No	N/A

Entrances and Exits			
Entrances and exits are visible from behind the bar area	Yes	No	N/A
CCTV is installed to monitor blind entrances and exits	Yes	No	N/A
Door staff monitor entrances and exits	Yes	No	N/A
Where queuing occurs outside the premises, there is sufficient space	Yes	No	N/A

Outdoor Drinking Areas			
Outdoor drinking areas are monitored by bar and/or security staff	Yes	No	N/A
Lighting allows staff to monitor patrons	Yes	No	N/A
Customers can move easily around the outdoor drinking areas	Yes	No	N/A
Outdoor drinking areas are well defined from surrounding external environment	Yes	No	N/A
Pavement creep is not evident	Yes	No	N/A
Outdoor drinking areas are not overcrowded	Yes	No	N/A
A street trading licence or equivalent is held and is current			N/A

Toilets			
Toilet facility entrances are visible from the bar area	Yes	No	N/A
Toilets are inspected regularly	Yes	No	N/A

Staff			
There are sufficient numbers of staff to ensure control of the premises	Yes	No	N/A
Staff are visible to patrons	Yes	No	N/A
Staff monitor the premises for conflict and crime	Yes	No	N/A
Security staff are properly trained and certified	Yes	No	N/A

Fees

Fees are based on a "cost/risk rating" of each premises and take into account the type of premises, hours of operation and any enforcement actions in the previous 18 months. A weighting for each of these will produce the rating for the premises as shown below.

Type of premises (on licences)	Weighting
Night clubs, Taverns, Adult premises, "Class I" restaurants	15
Hotels, Function centres, "Class 2" restaurants, Universities and Polytechnics	10
"Class 3" restaurants, other premises not specified elsewhere	5
Theatres/cinemas, BYO restaurants	2

Note:

"Class I" restaurant is defined as a restaurant having a significant separate bar operated at least once a week in the manner of a tavern (in the opinion of council).

"Class 2" restaurant is defined as a restaurant having a separate bar area that is not operated in the manner of a tavern at any time (in the opinion of council).

"Class 3" restaurant is a restaurant that only serves alcohol to the table and does not have a bar area.

Latest trading time allowed by on licence	Weighting
2am or earlier	0
Between 2.01am and 3.00am	3
All other closing times	5

Number of enforcements in last 18 months	Weighting
None	0
	10
2 or more	20

The "cost/risk rating" is the combined total of the weightings for each of the three parameters. To determine the cost/risk rating for your premises add the three weightings applicable to your premises.

There are 5 fee categories depending on the total rating:

Cost/Risk rating	Fee Category	Application fee		Annual fee	
		GST Excl	GST Incl	GST Excl	GST Incl
0-2	Very low	\$320	\$368	\$140	\$161
3-5	Low	\$530	\$609.50	\$340	\$391
6-15	Medium	\$710	\$816.50	\$550	\$632.50
16-25	High	\$890	\$1023.50	\$900	\$1035.00
26+	Very high	\$1050	\$1207.50	\$1250	\$1437.50

Note: The application fee must be paid at the time of application. For a new licence application, if the application is granted, the annual fee must be paid before the licence will be issued. An invoice will be issued once the decision is made. For a renewal application the annual fee is invoiced at the same time as the application and is payable by the anniversary date of the licence. The final determination of the fee category for the premises is made by the Council.

PUBLIC NOTICE

of application for on-licence

NOTE: DO NOT PUBLISH THIS NOTICE IN THE NEWSPAPER - return

this completed form with your application

This notice will be published on the Waikato District Council website: waikatodistrict.govt.nz

There will be an administration fee for this service, payable at the time of application (this applies from 1 July 2021)

Section 101, Sale and Supply of Alcohol Act 2012
(State Full name, address and occupation of applicant) *SEE NOTES BELOW
has made application to the District Licensing Committee at Ngaruawahia for an on-licence in respect of the premises situated at:
(address of premises)
and known as
(trade name)
The general nature of the business to be conducted under the licence is:
(eg hotel, tavern, restaurant, entertainment/night club)
The days on which and the hours during which alcohol is intended to be sold under the licence are:
(specify days and hours)
The applicant seeks the following variation to the licence conditions: (leave blank if no changes)
(proposed changes to licence conditions) [if any]
The application may be inspected during ordinary office hours at the office of the Waikato District Council, District Licensing Committee, 15 Galileo Street, Ngaruawahia.
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 at Waikato District Council, Private Bag 544, Ngaruawahia 3742. Email rss@waidc.govt.nz and dlc@waidc.govt.nz.
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.

*NOTES: Ensure that the applicant name is the same as the name that you have applied for your on licence under. If the applicant is a company, body corporate or club write the official legal name of the entity seeking the licence, and legal business address, an occupation is not required.

PUBLIC NOTICE

of application for on-licence/renewal of on-licence

Section 101, Sale and Supply of Alcohol Act 2012

This notice is to be displayed in a conspicuous place to be seen from the outside of the premises on or adjacent to the site to which the application relates from the day of filing the application.

Section 101, Sale and Supply of Alcohol Act 2012				
(State Full name, address and occupation of applicant)				
has made application to the District Licensing Committee at Ngaruawahia for an on-licence in respect of the premises situated at:				
(address of premises)				
and known as				
The general nature of the business to be conducted under the licence is:				
(eg hotel, tavern, restaurant, entertainment/night club)				
The days on which and the hours during which alcohol is intended to be sold under the licence are:				
(specify days and hours)				
The applicant seeks the following variation to the licence conditions				
(proposed changes to licence conditions) [if any]				
The application may be inspected during ordinary office hours at the office of the Waikato District Council, District Licensing Committee, 15 Galileo Street, Ngaruawahia.				
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 at Waikato District Council, Private Bag 544, Ngaruawahia 3742. Email rss@waidc.govt.nz and dlc@waidc.govt.nz.				
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.				
This notice was first published on the Waikato District Council website (waikatodistrict.govt.nz)				

on_____

APPLICATION FOR LICENCE ISSUED UNDER THE PROVISIONS OF THE SALE AND SUPPLY OF ALCOHOL ACT 2012

IMPORTANT

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR LICENCE APPLICATION

To enable the District Licensing Committee to process your licence application it must be accompanied by a statement that either:

- The building in which the premises are situated has an evacuation scheme for public safety which meets the requirements of the Fire and Emergency New Zealand Act 2017; or
- The building, by reason of its current use, does not require such a scheme, or that the building is exempt from having to meet the requirements for such a scheme.

s	TATEMENT TO BE COMPLETED BY APPLICANT			
Premises:				
Applicant:				
Statement (either):				
The building in which the premises are situated has an evacuation scheme for public safety which meets the requirements of the Fire and Emergency New Zealand Act 2017; or				
The building, by reason of its current use, does not require such a scheme, or the building is exempt from having to meet the requirements for such a scheme.				
(Cross out paragraph above that does not apply)				
Signed:	Date:			
Position:				
Alternatively the application Zealand.	cant may attach a statement or letter from the Fire and Emergency New			

DECLARATION

The New Zealand Police are required by the Sale and Supply of Alcohol Act 2012 to make inquiries into the suitability of the applicant. This will involve informing the District Licensing Committee and the Alcohol Regulatory and Licensing Authority of any convictions or concerns involving the applicant. Should there be any concerns, the applicant will also be informed.				
I consent to the release of this information				
☐ I hereby state that the above particulars in the appli	cation are true and correct			
I understand that my application will not be lodged with Council until the application fee is paid and all required documents are supplied. Incomplete applications will be returned.				
Signature	Date			
Name	Designation			

Contact us:

Phone 0800 492 452 or 07 8248633 (Regulatory Services Support, alcohol licensing) email rss@waidc.govt.nz



District Office 15 Galileo Street Private Bag 544 Ngaaruawaahia 3742 **Huntly** Area Office 142 Main Street Raglan Area Office 7 Bow Street **Tuakau** Area Office 2 Dominion Road 0800 492 452

waikatodistrict.govt.nz

email: rss@waidc.govt.nz

0800 492 452

07 825 8129

Telephone (all hours) 07 824 8633 Call Free 0800 492 452

Application for Building Certificate

Sections 100 and 143 Sale and Supply of Alcohol Act 2012

Applicant Details
Applicant Details
Name:
Name:
Postal address:
Town: Post Code:
Contact Person: Daytime Phone:
Email: : Mobile:
Premises
Owner:
Street address:
Legal description: Valuation Number:
Application Details
Is an alcohol licence currently in force for the premises? Yes No
If Yes: (i) What type of licence? Licence number:
(ii) Are any changes proposed to the business operation - eg hours of operation, style of licence?
Yes No
Give full details of the proposed business including:
Description of business operation:
Maximum number of patrons:
Is the building required to have a Building Warrant of Fitness? Yes No
If Yes, please attach a copy of the current Building Warrant of Fitness

If Yes, give de	ork (including plumbing and drainage work) being			
or will be car	tion being made for a new building to be constr ried out under a building consent? g consent number:		Yes	☐ No
	or comments:			
Signature of a	applicant:	Date:		
Notes This application	on must be accompanied by:			
(i) (ii) (iii) (iv)	 (i) the applicable fee (please check the fee payable from the schedule of fees and charges on Council's website) (ii) if a building Warrant of Fitness is required, a copy of the Warrant of Fitness (iii) if a resource consent has been issued authorising the activity, a copy of the consent 			
Office Use	, ,	and or any building consent in for		
	d: umber: ee:	Due Date: Property ID: Receipt Number:		· -



Email: applications@waidc.govt.nz www.waikatodistrict.govt.nz Telephone (all hours) 07 824 8633

Call Free 0800 492 452

District Office

I 5 Galileo Street Private Bag 544 Ngaruawahia 3742

Application for Planning Certificate

Sections 100 and 143 Sale and Supply of Alcohol Act 2012

If you are unsure of how to complete this form it is recommended that you engage the services of a suitably qualified person to help you with your application. It is important that you answer all questions in full otherwise your application you may be requested to provided further information. Please note that all the information provided in this application is available to the public and for statistical purposes.

APPLICANT DETAILS (the name of the consent holder who will be responsible for the consent and any associated costs, unless

	otherwise stated in Section A.	· · · · · · · · · · · · · · · · · · ·			
Full Name					
(please write all names in full)					
OR					
Name of Company Trust/Organisation					
(Please note that if a Trust, all Trustee Names must be included)					
Postal Address					
			Pos	t Code	
Email					
Phone		Mobile ph	one		
How do you wish to receive correspondence? (Please tick)	Post		E-mail		
If you have an agent / spokesperson a	cting on your behalf, tio	k here			
and enter their details below in A.2					
Please note: if you appoint an agent, the specifically request otherwise. To reques				nless you	
A.2 APPLICATION SITE DET	AILS				
Site/Street Address Town/Location					
Legal Description (from your Rates Notice or Certificate of Title) Owner					
A.3 APPLICATION DETAILS					
Is an alcohol licence currently in force for the premises?					
If Yes to above, What type of licence is in force?					
Will there be a change to the ty	pe of licence?	Yes		No	
If Yes to above, What type of lic	ence is proposed?				

Will the area of the building changed?	g to be licensed	Yes		No		
If Yes to above, is it increased by how much (GFA)?	ing or decreasing and					
Will the ownership change?		Yes		No		
A.4 PREVIOUS ADVICE						
Have you had any previous advice proposal?	ce and/or correspondence fr	om Council in re	gards to your		Yes	No
Duty Planner	☐ Environmental H	Health Officer/	Licensing Inspec	tor		
Pre application PRE /	Name of person	you received a	advice from			
Copy of advice and/or correspo	ndence attached					
A.5 NUMBER OF COPIE	s					
Please provide ONE (I) complex applications@waidc.govt.nz and	or ONE (I) complete hard	copies.	ŕ	•	J	
It is recommended that you sepa submitting to Council (e.g. liquo		application/s fro	m any other type o	of appli	cation y	ou may be
A.6 SIGNATURE						
By signing this form, I hereby cer is true and correct.	tify that, to the best of my k	nowledge and be	elief, the informatio	n giver	n in this	application
Signed by Applicant/s			Dated			
Note to Agent By signing this form, I hereby certify that: To the best of my knowledge and belief, the information given in this application is true and correct; I am authorised to submit this application on behalf of the applicant/s; and						
Signed by Agent			Dated			
Name and Role (Please print)						
A.7 HOW TO LODGE THIS APPLICATION This is a set fee applicable application. Please refer to Council's current schedule of fees for the current fee. Council's preferred method of payment is internet banking. Your application will not be processed until the required application fee is received						
7.1 If lodging electronically with an Alcohol Licence application: Please provide a complete electronic version of the application, in a separate folder or attachment to your Alcohol Licence application. This may mean providing the same information twice. Please email your applications to applications@waidc.govt.nz						
7.2 If lodging a hard copy with an Alcohol Licence application: Please lodge over the front counter at any service centre. You are required to separate all of the documents required with this application from any other applications you may be making at the time, this may mean you have to provide the same information for two separate applications. Alternatively please use the postal address on the front of this form to send by courier or standard mail						

A.8 MC	ONEY MATTERS					
<u>Payment</u>	Payment Options - please tick					
Internet B	Banking					
	Payment made via Internet Banking – Use the Bill Payment option for your bank, select Waikato DC Resource Consents , quote your name/client(s) name as the reference					
Date of Payment						
	Payment Advice Information attached					
Cheque						
Council O	Council Offices					
	Payment made at Council Office	Receipt Number				
Date of Payment						
Invoice Payment (if applicable) NB your application will not be processed until payment is received						

Important Privacy Information

The information you provided in your application (including personal information) is official information. Your application documents, the details of this consent and any ongoing communications between you and Council will be held at Council's offices and maybe accessed upon request by a third party. Access to information held by Council is administered in accordance with the Local Government Official Information and Meetings Act 1987 and the Privacy Act 1993. Your information may be disclosed in accordance with the terms of these Acts. If you have any concerns about this, please discuss with a Council Planner prior to lodging your application.

B: Information needed for lodging your application

For your application to be processed, your application must meet the requirements of the Resource Management Act. To assist you with this we have developed a checklist below.

BI:	General Requirements	Applicant ☑	Council Check ☑
BI.I	A description of the activity including the existing (if applicable) and proposed hours of operation.		
B1.2	A description of the site at which the activity is to occur		

B2: I	Plans Checklist	A pplicant ☑	Council Check ☑
B2.1	Current copy of Certificate(s) of Title (less than 2 months old) including diagram page, copies of any encumbrances, easements etc, and copies of all legal instruments (e.g consent notices and covenants)		
B2.2	A floor plan showing the layout and uses of the building / tenancy including any outdoor areas. The area(s) of the premises and/or the site where alcohol is to be sold, supplied or consumed must be clearly shown.		
B2.3	A site plan (to an appropriate metric scale of either 1:100 or 1:200) showing (where relevant)		
	(a) A north arrow and the scale		
	(b) Legal and physical roads.		
	(c) The location of the building / tenancy in relation to legal site boundaries.		
	(d) Existing and proposed access points (entrances).		
	(e) Existing and proposed access-ways/right of ways.		
	(f) On-site manoeuvring, and existing and proposed vehicle parking spaces.		
B2.4	If relevant, a copy of the most recent resource consent and / or any previous planning certificates for the premise.		