

#### PUBLIC NOTICE OF APPLICATION

## Sale and Supply of Alcohol Act 2012 Section 101

A & A GROUP LIMITED, (THE LICENSEE, 2/18 Goldsmith Place, Christchurch 8023), has made application to the District Licensing Committee at Christchurch for the issue of **ON-LICENCE NEW** in respect of the premises situated at **174 St Asaph Street**, **Central City** known as **THE MUD**.

The general nature of the business conducted under the licence is: **ON-LICENCE TAVERN** 

The days on which and the hours during which alcohol is intended to be sold under the licence are:

MONDAY TO SUNDAY 10.00 AM TO 3.00 AM THE FOLLOWING DAY

The application may be inspected during ordinary office hours at the office of the Christchurch District Licensing Committee, 53 Hereford Street, Christchurch. Phone 941 8999 to arrange with the Alcohol Licensing Team.

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, P O Box 73013, Christchurch 8154.

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.

Date of first publication on website: 3 September 2024

www.ccc.govt.nz/alcohol

ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licence-public-notification

For office use only:

Connect Ref:

2024 2323

# **Application for new On-licence**

Section 100, Sale and Supply of Alcohol Act 2012

| About this applic   | ation:             |                         |                     |                     |                     |                      |
|---|--------------------|-------------------------|---------------------|---------------------|---------------------|----------------------|
| Please ensure you have re<br>www.ccc.govt.nz/consen                                 |                    |                         |                     | cohol/alcohol-lic   | <u>ences</u>        |                      |
| Please complete this form<br>your completed applicatio<br>Christchurch 8154 and can | n and pay the a    | ssociated fee. The A    | lcohol Licensing T  | eam are located a   | t Civic Offices, 53 |                      |
| This application cannot b<br>Lodgement meeting. Filin                               |                    |                         |                     | ts are missing. Yo  | u will be given a   | nn invoice at the    |
| Note: All application fees are fo   | or processing of a | n application and are n | on-refundable, they | must be paid when y | ou apply.           |                      |
| We can only process your form and required docum                                    |                    | nce we have both th     | e Proof of Payme    | ent of fees AND th  | e required pape     | rwork (application   |
| Accepted methods of payn  | nent are: CASH     | – EFTPOS – Internet     | Banking.            |                     |                     |                      |
| Any questions contact the   | Alcohol Licensi    | ng Team to discuss a    | and for more infor  | mation, ph 03 941   | 8999 or alcoholl    | icensing@ccc.govt.nz |
| Endorsements: (state by ty  | pe every endor     | rsement sought)         | Caterer E           | BYO only            |                     |                      |
| 1. New application  | n for:             |                         |                     |                     |                     |                      |
| a. Trading name: The Mu   | d                  |                         |                     |                     |                     |                      |
| b. Licensee: A & A Group  |                    |                         |                     |                     |                     |                      |
| Manager Harronap  | ASAMA ANA          |                         |                     |                     |                     |                      |
| 2. Lodgement me   | eting, Fee         | es Calculation          | Invoice an          | d Payment           |                     |                      |
| (Refer fees information   | sheet) To be co    | ompleted at lodgeme     | ent meeting with    | inspector before ir | nvoicing.           |                      |
| At the Lodgement mee and issue the invoice for                                      |                    | or will – check the ap  | pplication for com  | pleteness, confirm  | n the risk weighti  | ng and fees payable, |
| Weighting and fees calcu  | lation             |                         |                     |                     |                     |                      |
| a. Type of licensed premi   | ses: Tavern        |                         |                     | Weighting:          | 15                  |                      |
| b. Latest alcohol sale tim  | e: 3 AM            |                         |                     | Weighting:          | 3                   |                      |
| c. Enforcements: Nil  |                    |                         |                     | Weighting:          | 0                   |                      |
| d. Total weighting:   | 18                 | Fee Category:           | Very low            | Low Medi            | um 🗸 High           | Very high            |
| e. Fees payable: Applica  | tion fee: \$       | 1023-50                 | Annual fee: \$      | 1,035-00            |                     |                      |
| f. Premises Certificate of (alcohol) application lo                                 | Compliance         |                         | If YES, Certifica   | te already issued a |                     | ✓ Yes No             |
| g. Inspector confirmed a  | oplication vette   | ed and complete for l   | odgement '          | Yes No (refe        | r to lodgement no   | tes on back page)    |
| Inspectors Signature  |                    |                         |                     |                     | 8 2024 dd/1         |                      |
| inspectors signature  |                    |                         |                     | Date. Of Di         | 3039 00/1           | шиуууу               |
| To be completed by the in-  | spector at the lad | gement meeting          |                     |                     |                     |                      |
| To be completed by the ins  | pector at the load | gement meeting.         |                     |                     |                     |                      |
| Council Use Only  |                    |                         |                     |                     |                     |                      |
| Connect Invoice number:   |                    | Receipt No.             |                     |                     |                     |                      |
|   |                    | Date                    |                     |                     | 50                  | 9 9 9                |



| 3. | . Details of applicant Please give leg  | gal name as appears on Birth Cer   | tificate or Passport |                |  |  |
|----|---|--|----------------------|----------------|--|--|
| а. | Company name or full legal name(s) if individu<br>A & A Group Limited   | al to be on licence:   |                      |                |  |  |
| b. | Other names/aliases known by:   |  |                      |                |  |  |
| c. | Date of birth:  |  | Sex: Male            | Female         |  |  |
| d. | Occupation/Current employment (including fo   | r all Directors): Registered Co  | ompany               |                |  |  |
| e. | Residential address:  | A CONTRACTOR OF THE CONTRACTOR |                      |                |  |  |
| f. | Website:  |  |                      |                |  |  |
| g. | Convictions of Company Directors, Partners  | , or individuals:  |                      |                |  |  |
|    | Have you ever been convicted of any offence (including traffic but not parking)? Note: As per the Criminal Records Clean Slate Act 2004, if you have no convictions in the last 7 years, you need not declare any convictions prior to that date other than convictions relating to imprisonment or indefinitely disqualified from driving.  Yes Vo |  |                      |                |  |  |
|    | If YES, give details below. (You may wish to exp  | lain the circumstances on an   | other page)          |                |  |  |
|    | Name of offence:  | Date of conviction:  | Penalty suffere      | ed:            |  |  |
|    |   |  |                      |                |  |  |
|    |   |  |                      |                |  |  |
|    |   |  |                      |                |  |  |
|    |   |  |                      |                |  |  |
| h. |   |  |                      |                |  |  |
|    |   |  |                      |                |  |  |
|    | If Yes and this address has changed recently please goother Council business.   | o update your addess details for all   |                      |                |  |  |
| i. | Daytime Contact Name: Angrej Singh  |  |                      |                |  |  |
|    | Phone   |  |                      |                |  |  |
|    | Email   |  |                      |                |  |  |
| j. | Preferred mode of contact: Mobile Phone (0223   | 496600)  |                      |                |  |  |
| k. | Status of applicant: (tick appropriate box)   |  |                      |                |  |  |
|    | Natural Person  | ✓ Private Company  |                      | Trustee        |  |  |
|    | Licensing Trust   | Partnership  |                      | Public Company |  |  |
|    | Government Department   | Local Authority  |                      |                |  |  |
|    | Manager under the protection of Persona   | al and Property Rights Act 198   | 8                    |                |  |  |
|    | Body Corporate to which section 28(1)(b)  | of the Act applies. Authority  | incorporated under:  |                |  |  |
|    | Board, organization, or other body to wh  | ich section 28(1)(c)   |                      |                |  |  |
|    | Incorporated Society  | Other:   |                      |                |  |  |



|                                   | details of all manager(s) t<br>eparate sheet if required) | o be employ  | ed and Certificate  | Numbers of Manage     | er's Certificate(s):      |                            |
|-----------------------------------|---|--|---------------------|-----------------------|---------------------------|----------------------------|
| Name:                             | Known as:   | Address:  Certificate number, or if no certificate held confirm if they have applied for one |                     | te held confirm if    | Expiry Date               |                            |
| Mahendrnath Mahendra<br>Chivukula |   |  |                     | 72/CERT/              | 199/2016                  | 24/11/2026                 |
|                                   |   |  |                     |                       |                           |                            |
| Note: please remem managers.      | ber to complete a separate <b>N</b>                       | otice of Duty I  | Manager Appointme   | ent or Change form fo | r all appointments or ter | mination of duty           |
| 5. Further                        | details of where  | applicar   | nt is a comp        | any                   |                           |                            |
| a. Date of incorp                 | oration: 27/09/2023                                       |  |                     |                       |                           |                            |
| b. Place of incorp                | poration: Christchurch                                    |  |                     |                       |                           |                            |
| c. Full details of                | each director, and the sec                                | retary (if any   | y), as follows:     |                       |                           |                            |
| Full name:                        | Address:  |  | Date of birth:      | Place of birth:       | Designation:              | Face value of shares held: |
| Amritvail Singh                   |   |  |                     |                       |                           | 50%                        |
| Angrej Singh                      |   |  |                     |                       |                           | 50%                        |
| d. Private Compa                  | any only: Authorised Cap                                  | ital: 1000   |                     | Paid-up Ca            | apital: 1000A             |                            |
| e. Private Compa                  | any: Full details of e                                    | ach person v   | who holds any sha   | res issued by the co  | mpany:                    |                            |
| Full name:                        | Address:  |  | Date of birth:      | Place of birth:       | Designation:              | Face value of shares held: |
| Amritvail Singh                   | 10 Kilkivan Lane  | e, Broomfield,   | 21/07/1991          | India                 | Director/shareholder      | 50%                        |
| Angrej Singh                      | 2/18 Goldsmith  | Place, Walth   | 14/07/1989          | India                 | Director/shareholder      | 50%                        |
| f. Public Compa<br>by the compa   | ny: Full details of each pe<br>ny.                        | rson who ho  | lds 20 percent or i | more of the shares, o | or of any particular cla  | ss of shares, issued       |
| Full name:                        | Address:  |  | Date of birth:      | Place of birth:       | Designation:              | Face value of shares held: |
|                                   |   |  |                     |                       |                           |                            |
|                                   |   |  |                     |                       |                           |                            |
|                                   |   |  |                     |                       |                           |                            |

4. Details of all Managers appointed for the premises



| 6  | . Further details o  | f where appli  | cant is a partner              | ship                                    |                     |                            |
|----|--|--|--------------------------------|---|---------------------|----------------------------|
| a. | Full details of each partne                                | r as follows:  |                                |   |                     |                            |
|    | Full name:   | Address:   | Date of birth:                 | Place of birth:                         | Designation:        | Face value of shares held: |
|    |  |  |                                |   |                     |                            |
|    |  |  |                                |   |                     |                            |
|    |  |  |                                |   |                     |                            |
| h  | Signature of each partner                                  |  |                                |   |                     |                            |
| Ь. | Signature of each partner.                                 |  |                                |   |                     |                            |
|    |  |  |                                |   |                     |                            |
| 7  | Premises details   |  |                                |   |                     |                            |
| a. | Legal address of premises                                  | St   |                                |   |                     |                            |
|    | 174 St Asaph Street, Christo                               | church   |                                |   |                     |                            |
|    | Is this premises location k                                | nown by any other a  | ddress?                        |   |                     |                            |
| b. | Proposed trading name fo                                   | or premises (if any):  | The Mud                        |   |                     |                            |
| c. | Is a licence already held fo                               | or this premises?  | Yes ✓ No If y                  | es, licence number                      | :                   |                            |
| d. | Do you hold a current Tem                                  | nporary Authority to t                                       | rade on that licence?          | Yes 🗸 No                                |                     |                            |
| e. | Is a licence sought conditi                                | onal upon constructi   | on/completion of the pre       | mises? Yes                              | ✓ No                |                            |
| f. | Does the applicant own th                                  | ne proposed licensed   | premises? Yes                  | / No                                    |                     |                            |
|    |  |  |                                |   |                     |                            |
|    | Owners address: Hooker                                     | Associates Limited, 4 B                                      | ounty Street, Bryndwr, Chris   | tchurch, 8053                           |                     |                            |
|    | Form and term of tenure (                                  | state whether to be h  | neld as leasehold, or unde     | er tenancy agreeme                      | nt, or licence):    |                            |
|    | 4 year term (12 years from 1                               | 3th May 2024)  |                                |   |                     |                            |
| NB | : Additional information and/or                            | signed documents may   | be requested in some instan    | ces to confirm tenure.                  |                     |                            |
| g. | <b>Details of premises area:</b> The proposed licensed are |  | e attach plans annotated       | with proposed lice                      | nsed area)          |                            |
|    | Internal areas include: Pu                                 | blic Area, bar area and                                      | facilities as per attached pla | ins                                     |                     |                            |
|    | Outside areas include: Ni                                  | 1  |                                |   |                     |                            |
|    | Any leased public space a                                  | reas? Yes 🗸  | No If YES, please attac        | h copy of the signed                    | d lease with plans. |                            |
|    | NB: Please attach plans anno                               | tated with licensed area                                     |                                |   |                     |                            |
| h. | What part (if any) of the pr                               | remises does the app   | licant intend should be d      | esignated as:                           |                     |                            |
|    | <ul> <li>Supervised designatio</li> </ul>                  | n: persons under 18 ose under 18 cannot erson of any age may |                                | if accompanied by<br>be supplied by the | parent or guardian  |                            |
| NE | 8: Any designated areas M                                  | UST be marked on ti  | ne plan for the premises       |   |                     |                            |
|    | A restricted area: Nil                                     |  |                                |   |                     |                            |
|    | A supervised area: The w                                   | hole premises  |                                |   |                     |                            |



| i.  | FIRE SAFETY – Section 100(d): I certify that the Building Owner has confirmed with me that the building: has does not require an Evacuation Scheme for public safety which meets the requirements of section 76 of the Fire and Emergency New Zealand Act 2017.  |
|-----|--|
|     | Name of owner: Angrej Singh (Director)   |
|     | Signature: Date: 29/08/2024 dd/mm/yyyy   |
|     | A registered Evacuation Scheme is required when:   |
| Ple | <ul> <li>The building can hold more than 100 people;</li> <li>There are more than 10 employees in the entire building; or</li> <li>Overnight accommodation is provided for more than 5 people.</li> <li>Page contact Fire and Emergency NZ (telephone 372 8600) for more information about evacuation schemes and fire safety requirements.</li> </ul> |
| 8.  | Business details Please attach separate sheet if required  |
| a.  | What is the general nature of the business to be conducted by the applicant in the premises if the licence is granted? (e.g. hotel, tavern, restaurant, entertainment/nightclub.)  |
|     | Tavern   |
| b.  | Is the sale of alcohol intended to be the principal purpose of the business?  Yes   No   |
|     | If NO, what is intended to be the principal purpose of the business?   |
|     | The owners are targeting sale of food for lunch and dinner. Food will be promoted after hours when the restaurants operation turns into a tavern operation. Therefore sale of food will be the main purpose of the business.   |
| с.  | Is the applicant engaged, or intending to be engaged, in the sale or supply of any goods other than alcohol and food, or in the provision of any services other than those directly related to the sale or supply of alcohol and food? Yes   No  |
|     | If YES, what is the nature of those other goods or services?   |
| d.  | On which days and during which hours does the applicant intend to sell alcohol under this licence?   |
|     | Monday to Sunday 10am to 3am   |
| e.  | BYO Restaurants only: Does the applicant wish to have the licence endorsed under Section 37 of the Act?  Yes   No  |
| f.  | Full On-licence: Are you also intending to permit BYO? Yes ✓ No  |



#### **9. Conditions** Please attach separate sheet if required

The following questions relate to Host Responsibility. In conjunction with completing the questions, you should provide with this application a copy of your Host Responsibility Policy' by using the guidelines on our website at <a href="ccc.govt.nz/alcohol">ccc.govt.nz/alcohol</a>

- a. What provisions does the applicant intend to make for the sale and supply of alcohol?
  - · Food (attach menu's, including all day or snack menu):

Menu is attached

· Non-alcoholic refreshments:

A range of fruit juces, fizzy drinks, energy drinks and water free of charge at all times

Low-alcoholic beverages (Between 1.1% and 2.5%ALC):

Light beers - Heineken 2.5% will be available

· Alcohol range available (attach full drinks menu)

Spirits, wine and beer will be available. Menu will be completed soon.

b. What steps does the applicant propose to take to provide assistance with or information about alternative forms of transport from the club, for staff and patrons?

Taxi number will be displayed at 2 points in A4 size, Staff can call a cab. Encourge patrons to call UBER if they are UBER customers. We will promote designated driver scheme

c. What other steps does the applicant propose to take aimed at promoting the responsible consumption of alcohol?

The company will hire security inside the premises and at the door. The security officer will be trained to deal with prohibited persons. If in doubt, the security person will call the manager on duty.

d. What steps does the applicant propose to take to ensure that the requirements of the Act in relation to the sale of alcohol to prohibited persons (i.e. minors, intoxicated persons, other persons to whom alcohol may not be sold pursuant to the licence) are observed?

Alcohol will not be sold or supplied to intoxicated persons and minors. The staff are trained to recognize the intoxicated persons using the SCAB formula and the IDS that are acceptable. If in doubt contact the manager on duty.

e. To what extent, where, and how is drinking water intended to be freely available to patrons? (i.e. explain whether water is bar service only, water jugs, or plumbed water stations and locations)

Drinking water free of charge will be available on two water stations on ether side at the bar. Water will be served at any time on request from a customer.

f. What appropriate systems, staff and training does/will the applicant have in place to ensure compliance with the law?

Staff will be trained by a certificated manager every 3 months and when a staff is hired. Records of such training will be kept in our folder

g. What are the current and possible future noise levels and how does the applicant intend to mitigate them?

The noise level will not exceed the maximum noise allowed at the boundary. The background noise is high in the area as it falls in an area where there are similar operations.

h. What are the current and possible future levels of nuisance and vandalism and how does the applicant intend to mitigate them?

Patrons will not be allowed to get intoxicated on the premises. We will stop service to any customer who shows signs of intoxication and offer them food, non-alcoholic drinks so they do not cause social problems, vandalism and nuisance in the area.



- i. What other licensed premises are there in the vicinity of this proposed premises? And, will the granting of this licence contribute to an increase in alcohol related problems in the area? (Explain)
  - The area falls in the Central Christchurch Business District where there are other similar operations. We will have a good control of our premises so there should not be any increase in the alcohol related problems. There might be patrons who have been refused drinks from other premises, we will ensure that we will not entertain such customers.
- j. What is the land near the proposed premises being used for? Will the granting of a licence for your premises impact on changing neighbouring land use? If so, in what way?

The premises falls in a commercial area with similar operations.

## 10. Please attach the following documents:

You must provide the following prescribed documents (your application will not be accepted without these documents)

- Floor plans annotated to show licensed area (for whole of premises, including any outside area and mark any restricted or supervised designated areas)
- Leased outside areas Footpath, public or private space lease details and plan if held for any outside areas (annotated to show licensed area)
- Photo of principle entrance to the premises
- Certificate of Incorporation (including the extract details of directors and shareholders)
- Premises Certificate of Compliance (Alcohol)

You should also provide the following documents to assist with assessment of your application (if these are not provided this will delay assessment of your application)

- Duty Manager appointment forms for all your duty managers
- ✓ Food Menu
- ✓ Drinks/ beverage menus
- ✓ Host Responsibility Policy (NB: If you are permitting BYO, you will need to indicate how you will manage BYO on your premises)
- Background information on applicant(s) and Directors business experience and training experience in the hospitality industry (a brief CV outlining work history would assist)
- Background information on the Operational Manager (if not to be the licensee) experience and training in the hospitality industry (a brief CV would assist)
- Any other information you wish to include to support your application, e.g. business plan, promotional materials etc

#### Notes:

- The Agencies may request to inspect a copy of your staff training plan/manuals.
- Tenure (O7f) Additional information and/or signed documents may be requested in some instances to confirm tenure.
- Please remember to complete a separate Notice of Duty Manager Appointment or Change form for any new Duty Manager
  appointments or termination of Duty Managers and provide a copy to both the Alcohol Licensing Team and the Police,
  as detailed on the form <a href="mailto:ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/managers-certificate/notification-of-management-change">ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/managers-certificate/notification-of-management-change</a>



## Important to note - Public notification of application

All alcohol licence application public notices are published on the dedicated webpage located on ccc.govt.nz/alcohol. Applications are no longer required to be published in the local newspaper.

- 1. We will take care of the publication of your public notice when you make your application to us.
  - There is a small administration charge for our assistance in loading the content onto the licensing notification webpage. The fee will need to be paid in advance of publication.
  - · Your notice will be published within a week of your application being received and the public notice fee being paid.
- 2. We will send you a copy of the published notice for your records at the same time we send you the front entrance notice for display on your premises. You will need to display the notice on your main entrance for at least 25 working days.
- 3. Except in the case of a conveyance, within 10 working days after filing this application with the District Licensing Committee, the applicant must ensure that notice of this application is attached in a conspicuous place on or adjacent to the site to which this application relates (unless the Secretary of the District Licensing Committee agrees that it is impracticable or unreasonable to do so).

#### 11. Payment

You will be issued an invoice at your lodgement meeting when you file your application. Payment of Fees MUST be made immediately on receiving the invoice.

Accepted methods of payment are: CASH - EFTPOS - INTERNET BANKING

Note: All application fees are for processing of an application and are non-refundable, they must be paid when you apply. We can only process your application once we have both the Proof of Payment of fees AND the required paperwork (application form and required documents).

Any questions? Contact the Alcohol Licensing Team to discuss and for more information, ph 03 941 8999 or alcohollicensing@ccc.govt.nz.

Have you completed ALL relevant sections of this form and attached ALL requested documents? \( \sqrt{Yes} \) No

Incomplete applications WILL be returned. We can only process your application once we have BOTH the Proof of Payment of fees AND the required paperwork (application form and required documents).

## **Privacy Statement**

Information contained in your application and any supporting information will be held by Christchurch City Council to enable your application to be processed under the Sale and Supply of Alcohol Act 2012. Please note, your full application, including name and contact details will be used by Council staff to assess and provided to decision makers. Your application, with names only will be available on our website. However, if requested under the Local Government Official Information and Meetings Act 1987, we may disclose applications including personal details. If you feel there are reasons why your contact details and/or personal details should be kept confidential, please contact us.

The information will be provided to the statutory reporting agencies (the Police, the Medical Officer of Health, and the Council's Licensing Inspectors) for the purposes of assessing and reporting on your application, and to the Christchurch District Licensing Committee for the purposes of making a decision on your application. This information may form part of a public hearing of your application before the Christchurch District Licensing Committee and may be used in the Committee's decision for your application. Decisions will be made publicly available.

The Council is required to keep a record of every premises licence application (including for renewals and variations) filed with the District Licensing Committee and the Committee's decision on it. This information (which includes the application and all attachments) is made available to the Council's Licensing Inspectors, the Medical Officer of Health, and the Police for the purposes of monitoring ongoing compliance with any licence conditions and undertakings, Duty Manager appointments, and the Act.

The Council is required to report statistics about applications to the Alcohol Regulatory and Licensing Authority.

Any member of the public may, under the Local Government Official Information and Meetings Act 1987, request access to information held by the Council. The Privacy Act 2020 applies to the Council and under that Act, you have the right to see and correct personal information that the Council holds about you.

| have read and understood the above privacy statement | √ Yes | No |
|--|-------|----|
|  |       |    |

| Dated at Christchurch this                       | 29 | day of | AUGUST | 20 24 |  |
|--|----|--------|--------|-------|--|
| Applicant's Signature:                           |    |        |        |       |  |
| (must not be signed<br>by an Agent or Solicitor) |    |        |        |       |  |

## 13. Lodgement meeting and invoicing

Please make an appointment with an alcohol licensing Inspector for a Lodgement meeting. The inspector will confirm your fees and issue your invoice for payment. Your application will not be accepted without this meeting. Phone (03) 941 8999 for an appointment.

## 14. Processing Timelines:

Manager Certificate applications should be made well before your certificate is required. On average about 5-6 weeks is required for a standard application to allow for processing, statutory reporting on your application, and issuing of a District Licensing Committee (DLC) decision on your licence. Timelines will be longer if there are agency oppositions or missing information on your application. More information about statutory timelines can be found at <a href="mailto:cc.govt.nz/alcohol">cc.govt.nz/alcohol</a>.

| Lodgement notes - for office use only |    |  |
|---------------------------------------|----|--|
|                                       |    |  |
|                                       |    |  |
|                                       |    |  |
|                                       |    |  |
|                                       |    |  |
|                                       |    |  |
|                                       | v2 |  |

