

PUBLIC NOTICE OF APPLICATION

Sale and Supply of Alcohol Act 2012 Section 101

METLIFECARE RETIREMENT VILLAGES LIMITED, (THE LICENSEE, 27 Somme Street, Merivale, Christchurch 8014), has made application to the District Licensing Committee at Christchurch for the issue of ON-LICENCE NEW in respect of the premises situated at 27 Somme Street, St Albans known as MERIVALE RETIREMENT VILLAGE.

The general nature of the business conducted under the licence is: ON-LICENCE RETIREMENT VILLAGE

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

MONDAY TO FRIDAY 12.00 MIDDAY TO 8.00 PM

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: 25 February 2025

www.ccc.govt.nz/alcohol

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

Application for new On-licence

For office use only:

Connect Ref:

225/238

Section 100, Sale and Supply of Alcohol Act 2012

| About this application: | | | | | | |
|--|--|--|--|--|--|--|
| Please ensure you have read the Step-by-step guide before you apply www.ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences | | | | | | |
| your completed application and pay the associated fee. The Alcohol Lice | Please complete this form and then arrange a Lodgement Meeting appointment with an Alcohol Licensing Inspector in order to lodge your completed application and pay the associated fee. The Alcohol Licensing Team are located at Civic Offices, 53 Hereford Street, Christchurch 8154 and can be contacted by phone (03) 941 8999 or email <u>alcohollicensing@ccc.govt.nz</u> | | | | | |
| This application cannot be accepted if the form is incomplete and do Lodgement meeting. Filing is not complete unless your invoice is pai | | | | | | |
| Note: All application fees are for processing of an application and are non-refunda- | ble, they must be paid when you apply. | | | | | |
| We can only process your application once we have both the Proof of form and required documents). | f Payment of fees AND the required paperwork (application | | | | | |
| Accepted methods of payment are: CASH – EFTPOS – Internet Banking. | | | | | | |
| Any questions contact the Alcohol Licensing Team to discuss and for mo | re information, ph 03 941 8999 or alcohollicensing@ccc.govt.nz | | | | | |
| Endorsements: (state by type every endorsement sought) Caterer | BYO only | | | | | |
| 1. New application for: | | | | | | |
| a. Trading name: Marunte Rotrement VIII | ane | | | | | |
| b. Licensee: Mathifocare Vatvement VI | The same of the | | | | | |
| a. Trading name: Merivale Retirement VIII b. Licensee: Metlifecare Retirement V | illages Lta | | | | | |
| 2. Lodgement meeting, Fees Calculation Invoice | ce and Payment | | | | | |
| (Refer fees information sheet) To be completed at lodgement meetin | ng with inspector before invoicing. | | | | | |
| At the Lodgement meeting an inspector will – check the application for completeness, confirm the risk weighting and fees payable, and issue the invoice for payment. | | | | | | |
| Weighting and fees calculation | | | | | | |
| a. Type of licensed premises: On-licence | Weighting: | | | | | |
| a. Type of licensed premises: On-Licence b. Latest alcohol sale time: | Weighting: | | | | | |
| c. Enforcements: | Weighting: | | | | | |
| d. Total weighting: Fee Category: Very lo | | | | | | |
| e. Fees payable: Application fee: \$ 609.50 Annual | | | | | | |
| f. Premises Certificate of Compliance | ertificate already issued and attached? Yes No | | | | | |
| g. Inspector confirm | s No (refer to lodgement notes on back page) | | | | | |
| Inspectors Signati | Date: 30 (2015 dd/mm/yyyy | | | | | |
| To be completed by a | | | | | | |
| Council Use Only | A CONTRACTOR OF THE PARTY OF TH | | | | | |
| Connect Invoice number: Receipt No.: | | | | | | |
| Date | | | | | | |

| 3. | Details of applicant Please give legal name as appears on Birth Certificate or Passport | | | | |
|----|--|--|--|--|--|
| a. | Company name or full legal name(s) if individual to be on licence: Metlife care Retirement Villages Limited | | | | |
| b. | Other names/aliases known by: | | | | |
| c. | Date of birth: Sex: Male Female | | | | |
| d. | Occupation/Current employment (including for all Directors): | | | | |
| e. | Residential address: 27 Somme St, Merivale, Christchurch 8014 | | | | |
| | Website: Www.metlifecgre.co.nz | | | | |
| 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 No | | | | |
| | If YES, give details below. (You may wish to explain the circumstances on another page) | | | | |
| | Name of offence: Date of conviction: Penalty suffered: | | | | |
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| h. | Postal address for service of documents: | | | | |
| | Postal address for service of documents: 27 Somme St, Suburb: Merivale City: Christchurch Postcode: 80184 | | | | |
| | Is this address used for any other business with Council? e.g. Rates; dog registration. | | | | |
| | If Yes and this address has changed recently please go to the "Contact us" link at www.ccc.govt.nz/contact-us to update your addess details for all other Council business. | | | | |
| i. | Daytime Contact Name: Harry Kaur | | | | |
| | Phone: Mobile: | | | | |
| | Email: harwinder.kaur@ metlifecare.co.nz | | | | |
| j. | Preferred mode of contact: Emgi/ | | | | |
| 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 Personal and Property Rights Act 1988 | | | | |
| | Body Corporate to which section 28(1)(b) of the Act applies. Authority incorporated under: | | | | |
| | Board, organization, or other body to which section 28(1)(c) | | | | |
| | Incorporated Society Other: | | | | |



| 4. Details of a | ll Managers a | appointed for the pr | emises | | | |
|--|------------------------|---|---------------------------|--|-------------------------------|--|
| a. Full list of all details of all manager(s) to be employed and Certificate Numbers of Manager's Certificate(s): (Please attach separate sheet if required) | | | | | | |
| Name: | Known as: | Address: | certificate | e number, or if no held confirm if applied for one | Expiry Date | |
| Jason McTurk | | | 60/6 | cer 575 2 | 223 13/10/20 | |
| Note: please remember managers. | to complete a separate | e Notice of Duty Manager Appoint | ment or Change form for a | all appointments or t | ermination of duty | |
| 5. Further de | tails of where | e applicant is a com | pany | | | |
| a. Date of incorporab. Place of incorporac. Full details of each | ation: | 2 / 1999 secretary (if any), as follows: | | | | |
| Full name: | Address: | Date of birth: | Place of birth: | Designation: | Face value of shares held: | |
| Earl Gasparice Anna Jane Thorburn Johathan Path Wild | rick | | | | | |
| d. Private Company | only: Authorised C | apital: | Paid-up Cap | oital: | | |
| e. Private Company | : Full details o | of each person who holds any s | hares issued by the com | npany: | | |
| Full name: | Address: | Date of birth: | Place of birth: | Designation: | Face value of shares held: | |
| f. Public Company: Full details of each person who holds 20 percent or more of the shares, or of any particular class of shares, issued by the company. | | | | | | |
| Full name: | Address: | Date of birth: | Place of birth: | Designation: | Face value of shares held: | |
| | | | | | | |



| 6. | 6. Further details of where applicant is a partnership | | | | | | | |
|--|---|--------------------------------|-----------------------|-----------------|--------------|----------------------------|--|--|
| a. | Full details of each | partner as follows: | | | | | | |
| | Full name: | Address: | Date of birth: | Place of birth: | Designation: | Face value of shares held: | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| h | Signature of each p | artner | | | | | | |
| | organization of cuert p | ardier. | | | | | | |
| | | | | | | | | |
| 7. | Premises det | tails | | | | | | |
| a. | Legal address of pro | | | | 2 90.11 | | | |
| | | ne Street, Me | | nristchurch | 18014 | | | |
| | is this premises loca | ation known by any other add | ress? | | | | | |
| b. | Proposed trading na | ame for premises (if any): | Vervate Re | etirement | Village | | | |
| c. | Is a licence already held for this premises? Yes \(\sqrt{No} \) If yes, licence number: | | | | | | | |
| d. | . Do you hold a current Temporary Authority to trade on that licence? Yes No | | | | | | | |
| e. | s. Is a licence sought conditional upon construction/completion of the premises? Yes | | | | | | | |
| f. | | | | | | | | |
| | If NO: Owners full name: | Met Le | cave | | | | | |
| | Owners address: | | | | | | | |
| | Form and term of tenure (state whether to be held as leasehold, or under tenancy agreement, or licence): | | | | | | | |
| NR | | | | | | | | |
| NB: Additional information and/or signed documents may be requested in some instances to confirm tenure. g. Details of premises area: | | | | | | | | |
| 9. | The proposed licensed areas to include: (Please attach plans annotated with proposed licensed area) | | | | | | | |
| | Internal areas include: Bar and Dining area and Upstairs launge | | | | | | | |
| | Outside areas include: Barbeque area autside bar | | | | | | | |
| | Any leased public space areas? Yes ✓ No If YES, please attach copy of the signed lease with plans. | | | | | | | |
| | NB: Please attach plan | s annotated with licensed area | | | | | | |
| h. | | the premises does the applic | | | | | | |
| - | Restricted designation: no person under 18 may be present on the premises. Supervised designation: persons under 18 may be present, but only if accompanied by a parent, or legal guardian, i.e. Court appointed. Those under 18 cannot be sold alcohol, but may be supplied by the parent or guardian. In-designated: Any person of any age may be present on the premises. Those under 18 cannot be served alcohol, but may be supplied by their parent, or legal guardian. | | | | | | | |
| NE | 3: Any designated ar | eas MUST be marked on the | plan for the premises | | | | | |
| | A restricted area: | D 0 | | | | | | |
| * | A supervised area: | Bar & Dining are | la | | | | | |



| | 가지를 보았다. 교육자들에 대한 이 사람이 되는 사람들은 사람들이 되었다. 그는 사람들이 적으로 보고 있는 것이 되었다. 그는 사람들이 되었다. 그는 사람들이 살아 없는 것이다. | | | | | |
|----|---|--|--|--|--|--|
| 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: Hoge Kouse (Village Manager) | | | | | |
| | Signature: 13/11/2024 dd/mm/yyyy | | | | | |
| | A registered Evacuation Scheme is required when. | | | | | |
| | The building can hold more than 100 people; | | | | | |
| | There are more than 10 employees in the entire building; or Overnight accommodation is provided for more than 5 people. | | | | | |
| | ase contact Fire and Emergency NZ (telephone 372 8600) for more information about evacuation schemes and fire safety requirements. | | | | | |
| | | | | | | |
| 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.) | | | | | |
| | Aged Care | | | | | |
| 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? | | | | | |
| | fraude alcohol for weekly happy hours, monthly luncheons and other special occasions | | | | | |
| | | | | | | |
| C. | 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-Sunday- middlay- 8.00pm | | | | | |
| e. | BYO Restaurants only: Does the applicant wish to have the licence endorsed under Section 37 of the Act? Yes | | | | | |
| f. | Full On-licence: Are you also intending to permit BYO? / Yes No | | | | | |



| 9. | Conditions Please attach separate sheet if required |
|----|--|
| | e following questions relate to Host Responsibility. In conjunction with completing the questions, you should provide with this olication a copy of your Host Responsibility Policy' by using the guidelines on our website at ccc.govt.nz/alcohol |
| 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 depends on event - Hoppy hour - platters Monthly lunchegn - hot meal Non-alcoholic refreshments: Soft drinks, Juice, water, tea and coffee Low-alcoholic beverages (Between 1.1% and 2.5%ALC): |
| | Alcohol range available (attach full drinks menu) |
| | Beer, wine-white red |
| 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? |
| | Some residents live ansite. Balance within walking distance to and from |
| c. | What other steps does the applicant propose to take aimed at promoting the responsible consumption of alcohol? |
| | Drinks are limited. Non alcoholic drinks provided Food pravided |
| 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? Staff uill be trained and have the apprepriate licence |
| | ONLY BERTHERED CERTIFIED STAFF WILL BE ABLE TO SERVE BEHIND BARS |
| 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) |
| | Daynotairs the area has top water available and you of water placed on the bar water is available on the serving trailey |
| | |
| f. | What appropriate systems, staff and training does/will the applicant have in place to ensure compliance with the law? |
| | LIQUOR & BAR LICENCE TRAINING FOR FELECTED STAFF |
| g. | What are the current and possible future noise levels and how does the applicant intend to mitigate them? |
| | Currently entertainment is inside the building and very much background music. Staff ansite to monitor levels? |
| L | What are the current and assemble future levels from the first control of the current and assemble future levels from the current and assemble from the curr |
| n. | What are the current and possible future levels of nuisance and vandalism and how does the applicant intend to mitigate them? |

At present no nuisonce or wondalism from either cur visitors or tesidents. Kesidents have code of behaviour they are required to achieve to



| | that other licensed premises are there in the vicinity of this proposed premises? And, will the granting of this licence contribute to n increase in alcohol related problems in the area? (Explain) |
|------|--|
| H | No his restourant and bar is 900 metres away. Ilashol is not being provided to the public, but supplied to residents an on the occasion their families, as part of a special event. I travain the event not the alcohol. |
| j. W | that is the land near the proposed premises being used for? Will the granting of a licence for your premises impact on changing eighbouring land use? If so, in what way? |
| | The kind to all sides is residential, some are villas occupied by our residents. |
| 10 | Please attach the following documents: |
| 10. | rtease attach the following documents: |
| Y | ou 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) |
| | ou should also provide the following documents to assist with assessment of your application (if these are not provided this rill 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 |

- The Agencies may request to inspect a copy of your staff training plan/manuals.
- Tenure (Q7f) 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 ccc.govt.nz/consents-and-licences/business-licences-and-consents/ alcohol/managers-certificate/
 notification-of-management-change



Notes:

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.

| 12. Authorisation | You must complete this section in ful |
|-------------------|---------------------------------------|
|-------------------|---------------------------------------|

Have you completed ALL relevant sections of this form and attached ALL requested documents?

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.

I have read and understood the above privacy statement

Yes

day of

No

November

Applicant's Signature: (must not be signed by an Agent or Solicitor)

Dated at Christchurch this

Christchurch City Council

20

NF June 2024

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 cc.govt.nz/alcohol

| Lodgement notes - for office use only | | |
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