

### PUBLIC NOTICE OF APPLICATION

### Sale and Supply of Alcohol Act 2012 Section 127 & 101

QUINN CONSTRUCTION LIMITED, (THE LICENSEE, 15A London Street, Lyttelton 8082), has made application to the District Licensing Committee at Christchurch for the renewal of ON-LICENCE RENEWAL in respect of the premises situated at 15A London Street, Lyttelton known as THE LYTTELTON ARMS.

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 sold under the licence are: MONDAY TO SUNDAY 8.00 AM TO 2.00 AM THE FOLLOWING DAY

The application may be inspected during ordinary office hours at the office of the Christchurch District Licensing Committee, Civic Offices, 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 grant of the application 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 renewal of a licence may be made in relation to a matter other than a matter specified in section 131 of the Sale and Supply of Alcohol Act 2012.

Date of first publication on website: **28 March 2025** <u>www.ccc.govt.nz/alcohol</u> ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licence-public-notification

# Application for renewal of licence

For office use only:

Connect Ref: ALC/2025/895

Section 100, Sale and Supply of Alcohol Act 2012

### About this application:

Please complete this form and forward it with all required documents. You can submit the form (and documents) online through the webpage or in person, or post to Christchurch City Council, 53 Hereford Street, PO Box 73013, Christchurch 8154.

This application cannot be accepted if the form is incomplete and documents are missing. Filing is not complete unless your invoice is paid. Invoices are posted to you 2 months in advance of the due date to your last address provided to us.

Accepted methods of payment are: CASH - EFTPOS - Internet Banking.

Note: Application fees are non-refundable and are for the processing of your application and must be paid when you apply for your renewal.

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).

The original of this application should be filed with the District Licensing Committee no later than 20 working days before the expiry of the licence. After that time it may be filed only with the permission of the District Licensing Committee. In no case may the renewal application be filed after the licence has expired. You will be deemed unlicensed and a full new licence application will be required.

Any questions contact the Alcohol Licensing Team to discuss and for more information, ph 03 941 8999 or <u>alcohollicensing@ccc.govt.nz</u>

- Endorsements: (state by type every endorsement sought)
   Renewal with Variation: (changes to licence conditions)
- Renewal of Club-off licence

### 1. Renewal application for: (details as on current licence)

| a. | Trading nam   | e: The   | Lyttelton Arms  |  |
|----|---------------|----------|-----------------|--|
| b. | Licencee: C   | Quinn Co | onstruction Ltd |  |
| c. | Licence num   | ber: 60  | /ON/115/2022    |  |
| d. | Licence Expir | ry date: | 26 April 2025   |  |

If Renewal with Variation: Risk Weighting verification and fees recalculation for invoice (Office to complete)

(If variation, please make an appointment with an Inspector to discuss and have your fees and risk weighting confirmed before payment as we may have to make adjustments to your renewal invoice **before** you make payment.)

| Total Weighting:            |                             | Fe                  | e Category:          |                     |                   |  |  |
|-----------------------------|-----------------------------|---------------------|----------------------|---------------------|-------------------|--|--|
| Updated Premises Certifi    | icate of Compliance (alcoho | l) application need | ed? Yes I            | No                  |                   |  |  |
| If YES, Certificate already | applied for? Yes            | No OR Al            | lready issued and at | tached?             |                   |  |  |
| Inspector confirmed app     | lication vetted and complet | e for lodgement     | Yes No – re          | fer to lodgement no | otes on back page |  |  |
| Inspectors Signature:       |                             | Da                  | ate of verification: |                     | dd/mm/yyyy        |  |  |
|                             |                             |                     |                      |                     |                   |  |  |
|                             |                             |                     |                      |                     |                   |  |  |
| Council Use Only            |                             |                     |                      |                     |                   |  |  |
| Connect Invoice number:     | Rece                        | ipt No.:            |                      |                     |                   |  |  |
|                             | Date:                       | 4                   |                      |                     |                   |  |  |
|                             |                             |                     |                      |                     |                   |  |  |



| 2. | 2. Details of Applicant   |                              |               |  |  |  |  |  |
|----|---|------------------------------|---------------|--|--|--|--|--|
| a. | Company or Club or Society name or full legal name(s) if individual to be on licence:<br>Quinn Construction Ltd   |                              |               |  |  |  |  |  |
| b. | Other names/aliases known by: T/A The Lyttelton Arms  |                              |               |  |  |  |  |  |
| c. | Date of Birth:  | Sex:                         | Male          | Female                                       |  |  |  |  |
| d. | Occupation/Current employment (including for all Directors)   | : Builder & Pub              | lican         |  |  |  |  |  |
| e. | Residential address:  |                              |               |  |  |  |  |  |
| f. | Website:  |                              |               |  |  |  |  |  |
| g. | Convictions of Company Directors, Partners, or individual   | s:                           |               |  |  |  |  |  |
|    | Have you ever been convicted of any offence (including traffi<br>2004, if you have no convictions in the last 7 years, you need<br>relating to imprisonment or indefinite disqualified from drivi | not declare any co           |               |  |  |  |  |  |
|    | If YES, give details below. (You may wish to explain the circum NB: Information on how to check your criminal record history details of   |                              |               | ninal-records)                               |  |  |  |  |
|    | Name of offence: Date of con  | viction:                     | Penalty       | v suffered:                                  |  |  |  |  |
|    |   |                              |               |  |  |  |  |  |
|    |   |                              |               |  |  |  |  |  |
|    |   |                              |               |  |  |  |  |  |
|    |   |                              | _             |  |  |  |  |  |
|    |   |                              |               |  |  |  |  |  |
| h. | Postal address for service of documents: 15A London Stre  | et                           |               |  |  |  |  |  |
|    | Suburb: Lyttelton   | City:                        |               | Post Code: 8082                              |  |  |  |  |
| i. | Is this address used for any other business with Council? e.g.  | Rates; dog registr           | ration.       | Yes No                                       |  |  |  |  |
|    | If Yes and this address has changed recently please go to the "Contact<br>Council business.   | us" link at <u>ccc.govt.</u> | nz/contact-us | to update your address details for all other |  |  |  |  |
| j. | Daytime Contact Name: Lisa Quinn  |                              |               |  |  |  |  |  |
|    | Phone:  | Mobile:                      |               |  |  |  |  |  |
|    | Email: lytteltonarmspub@outlook.com   |                              |               |  |  |  |  |  |
| k. | Preferred mode of contact: Email  |                              |               |  |  |  |  |  |
| l. | Status of applicant: (tick appropriate box)   |                              |               |  |  |  |  |  |
|    | ✓ Natural Person Private Co   |                              |               | ustee  |  |  |  |  |
|    | Licensing Trust Partnersh<br>Government Department Local Aut  | •                            | Pt            | ublic Company                                |  |  |  |  |
|    | Manager under the protection of Personal and Property   | -                            |               |  |  |  |  |  |
|    | Body Corporate to which section 28(1)(b) of the Act app<br>Board, organisation, or other body to which section 28(  |                              | orporated u   | nder:  |  |  |  |  |
|    | Incorporated Society Other:   | -/(~/                        |               |  |  |  |  |  |
|    |   |                              |               |  |  |  |  |  |



### 3. Details of all Managers appointed for the premises

Full list of all current manager(s) employed and Certificate Numbers of Manager's Certificate(s): (*Please attach separate sheet if required*)

| Name:                                | Known as: | Address: | Certificate number, or if no<br>certificate held confirm if<br>they have applied for one | Expiry Date |
|--------------------------------------|-----------|----------|--|-------------|
| John Quinn                           |           |          | 60/CERT/71/2019  | 23.01.26    |
| Angelia Leigh Ronan                  | Ange      |          | 60/CERT/670/2017   | 04.12.2027  |
| Lisa Margaret Maria<br>Wilson-Corles |           |          | 60/CERT/198/2016   | 10.03.2026  |

Note: please remember to complete a separate Notice of Duty Manager Appointment or Change form for all new Duty Manager appointments or termination of duty managers.

### 4. Further details of where applicant is a company

- a. Date of incorporation: 30 May 2002
- b. Place of incorporation:
- c. Full details of each director, and the secretary (if any), as follows:

|  | , |                      |                      |              |                            |  |  |  |
|--|---|----------------------|----------------------|--------------|----------------------------|--|--|--|
| Full name:   | Address:                                | Date of birth:       | Place of birth:      | Designation: | Face value of shares held: |  |  |  |
| John Clement Quinn   |   |                      |                      |              |                            |  |  |  |
|  |   |                      |                      |              |                            |  |  |  |
|  |   |                      |                      |              |                            |  |  |  |
| d. Private Company only:   | Authorised Capital:                     |                      |                      |              |                            |  |  |  |
| e. Private Company:  | Full details of each person w           | who holds any shares | s issued by the comp | bany:        |                            |  |  |  |
| Full name:   | Address:                                | Date of birth:       | Place of birth:      | Designation: | Face value of shares held: |  |  |  |
| The Quinn Trust  |   |                      |                      |              |                            |  |  |  |
| John Clement Quinn   |   |                      |                      |              |                            |  |  |  |
|  |   |                      |                      |              |                            |  |  |  |
| 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: |
|------------|----------|----------------|-----------------|--------------|----------------------------|
|            |          |                |                 |              |                            |
|            |          |                |                 |              |                            |
|            |          |                |                 |              |                            |



# 5. 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: |  |
|   |          |                |                 |              |                            |  |
|   |          |                |                 |              |                            |  |
|   |          |                |                 |              |                            |  |
| b. Signature of each partne                 | er:      |                |                 |              |                            |  |
|   |          |                |                 |              |                            |  |

# 6. Premises details

| 2      | Legal address of Club premises: (Note: for Remote Sales this is the office base)  |  |  |  |  |  |  |  |
|--------|---|--|--|--|--|--|--|--|
| d.     | 15A London Street, Lyttelton  |  |  |  |  |  |  |  |
|        | Is this premises location known by any other address? (Note: for Remotes Sales this could be your website address)  |  |  |  |  |  |  |  |
|        |   |  |  |  |  |  |  |  |
| b.     | Type of licence: Premises On Licence  |  |  |  |  |  |  |  |
| с.     | Existing licence number: 60/ON/115/2022   |  |  |  |  |  |  |  |
| d.     | Expiry date: 26.04.25   |  |  |  |  |  |  |  |
| e.     | Trading name: Lyttelton Arms  |  |  |  |  |  |  |  |
| f.     | Details of premises area. The current licence includes (please attach plans annotated with licenced area):  |  |  |  |  |  |  |  |
|        | Internal areas include: Please see attached plan  |  |  |  |  |  |  |  |
|        | Outside areas include:  |  |  |  |  |  |  |  |
|        | Any leased public space areas? If YES, please attach copy of the lease. 🛛 Yes 🖌 No  |  |  |  |  |  |  |  |
| g.     | Does the applicant own the proposed licensed premises? Yes 🖌 No   |  |  |  |  |  |  |  |
|        | If NO:<br>Owners full name: The Quernmore Trust   |  |  |  |  |  |  |  |
|        | Owners address: 180 Estuary Road, Christchurch  |  |  |  |  |  |  |  |
|        | Form and term of tenure (state whether to be held as leasehold, or under tenancy agreement, or licence):  |  |  |  |  |  |  |  |
|        | Lease   |  |  |  |  |  |  |  |
| NB.    | : Additional information and/or signed documents may be requested in some instances to confirm tenure.  |  |  |  |  |  |  |  |
| h.     | What part (if any) of the premises does the applicant intend should be designated as:   |  |  |  |  |  |  |  |
|        | <ul> <li>Restricted designation: no person under 18 may be present on the premises.</li> <li>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.</li> <li>Un-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.</li> <li>Any designated areas MUST be marked on the plan for the premises</li> </ul> |  |  |  |  |  |  |  |
|        | A restricted area:  |  |  |  |  |  |  |  |
|        | A supervised area: Whole area after 9pm   |  |  |  |  |  |  |  |
| i.     | Has the premises area or layout changed in any way since the last renewal, or are you planning to make any changes in the future? Yes Yes No  |  |  |  |  |  |  |  |
|        | If YES, how?  |  |  |  |  |  |  |  |
| 'age 4 | Christchurch<br>City Council  |  |  |  |  |  |  |  |

### j. FIRE SAFETY - Section 127(2):

does not require an Evacuation Scheme I certify that the Building Owner has confirmed with me that the building: A has does not require an Ex for public safety which meets the requirements of section 76 of the Fire and Emergency New Zealand Act 2017.

|      | Name of owner: Quernmore Trust   |  | 111 have                                    |  |  |  |  |
|------|--|--|---|--|--|--|--|
|      | Signature:   | Date: 26/03/2025   | dd/mm/yyyy                                  |  |  |  |  |
|      | A registered Evacuation Scheme is required when.   |  |   |  |  |  |  |
|      | • The building can hold more than 100 people;  |  |   |  |  |  |  |
|      | <ul> <li>There are more than 10 employees in the entire building; or</li> <li>Overnight accommodation is provided for more than 5 people.</li> </ul>   |  |   |  |  |  |  |
| Ple  | <ul> <li>Overnight accommodation is provided for more than 5 people.</li> <li>ase contact Fire and Emergency NZ (telephone 372 8600) for more information about evolutions.</li> </ul>   | vacuation schemes and fire safe                            | ety requirements.                           |  |  |  |  |
|      |  |  |   |  |  |  |  |
|      | Business details (Please attach separate sheet if required.)   |  |   |  |  |  |  |
| a.   | What is the general nature of the business? (e.g. hotel, tavern, restaurant, e   | entertainment/nightclub):                                  |   |  |  |  |  |
|      | Tavern/Restaurant  |  |   |  |  |  |  |
| b.   | Is the sale of alcohol intended to be the principal purpose of the business?   | Yes No   |   |  |  |  |  |
|      | (i) If NO, what is intended to be the principal purpose of the business?   |  |   |  |  |  |  |
|      | (ii) What part of Section 32 of the Act is applicable to this application?   |  |   |  |  |  |  |
|      | If section 32(1)(f) (grocery stores) applies you must complete the relevant s<br>govt.nz/consents-and-licences/business-licences-and-consents/alcohol/al   | Statement of Annual Sales F<br>cohol-licences/off-licence/ | Revenue available here ccc.                 |  |  |  |  |
|      | If section 32(1)(b) (Bottle store) applies:<br>What percentage of your annual sales is expected to be from sale of alcoho<br>NB: to assist you may wish to use the form found at the link above.   |  |   |  |  |  |  |
| c.   | s 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.   | Current licensed hours: Monday to Sunday 8.00am to 2.00am the fo   | llowing day  |   |  |  |  |  |
| e.   | Full On-licence: are you also intending to permit BYO? Yes 🖌 No  |  |   |  |  |  |  |
| f.   | Has any of the a-c questions above changed since the last renewal or are y No  | ou planning to make chan                                   | ges to these in the future?                 |  |  |  |  |
| g.   | If off-licence remote sales, state the address from where the alcohol will be  | e stored and dispatched fro                                | om.   |  |  |  |  |
|      | N/A  |  |   |  |  |  |  |
|      |  |  |   |  |  |  |  |
| 1000 | . Conditions (Please attach separate sheet if required.)   |  | the set of many sizes of                    |  |  |  |  |
|      | ne following questions relate to Variations - changes to licence condition   | ns. Please attach separate                                 | ase also refer to note at 11)               |  |  |  |  |
| a.   | Are there any changes sought to the present conditions of the licence?   |  |   |  |  |  |  |
|      | If YES, please detail what changes are sought (this includes hours, premise  | es area, nature of the busin                               | ess)  |  |  |  |  |
|      | If cooking changes:  |  |   |  |  |  |  |
|      | <ul><li>If seeking changes:</li><li>Please DO NOT publish Public Notices until further discussion with the A</li></ul>   | Alcohol Licensing Team on I                                | ohone (03) 941 8827.                        |  |  |  |  |
|      | <ul> <li>Please DO NOT publish Public Notices until further discussion that in the discussion that are applied without the discussion of the requesting changes cannot be accepted without this certificate. For mo www.ccc.govt.nz/consents-and-licences/business-licences-and-consent</li> </ul> | e changes sought may be r<br>re information refer to the ! | equired. Applications<br>Step-by-Step guide |  |  |  |  |

 b. For Club Licences only: Your Club Licence permits you to sell alcohol to authorised customers under s60(1)(a). Do you also want to be able to sell alcohol to guests of authorised visitors from other clubs? Yes No No



licences-changes-to-your-business/

#### 9. Host Responsibility (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 <u>ccc.govt.nz/alcohol</u>

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):

All day snack menu and meals menu attached

- Non-alcoholic refreshments:
- Juices, sodas, zero alchohol beer and 1 cider, tea/coffee and water
- Low-alcoholic beverages (Between 1.1% and 2.5%ALC):
- Speights Mid on Tap
- Alcohol range available (attach full drinks menu)
   Attached
- b. What steps does the applicant propose to take to provide assistance with or information about alternative forms of transport from the premises, for staff and patrons?

We have signage for taxis, we will call the tax for the patron or dial a driver

- c. What other steps does the applicant propose to take aimed at promoting the responsible consumption of alcohol?
   Food available at all times and we refuse service to any intoxicated patrons
- 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?

Signage for non service to intoxicated patrons, ID required check. Duty Manager on duty at all times

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)
 There are several water jugs and glasses on the bar in various places

f. What appropriate systems, staff and training does/will the applicant have in place to ensure compliance with the law?
 All staff hold LCQ & Duty Managers licences. All staff have gone through our host responsibility policy and management keep them updated regularly.

- g. What are the current and possible future noise levels and how does the applicant intend to mitigate them?We have a Juke box and TVs. We have never had any complaints about noise.
- h. What are the current and possible future levels of nuisance and vandalism and how does the applicant intend to mitigate them?
   No change
- 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)
   Civil & Naval across the road, Eruption Brewery a few doors away and the Wunderbar. All businesses have been there several years and there has been no increase
- 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?
   Car Park



### 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 details of directors and shareholders)
- Premises Certificate of Compliance (Alcohol) (may be required when seeking a Variation of the licence)
- All Grocery Stores must complete a Statement of Annual Sales Revenue if applicable. Template statement available here <a href="https://ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences/off-licence/">ccc.govt.nz/consents-and-licences/business-licences-and-consents/alcohol/alcohol-licences/off-licence/</a>

# 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)

- J Duty Manager appointment forms for all your duty managers or any additional duty managers
- Host Responsibility Policy
- ✓ Food Menu
- ✓ Drinks/ beverage menus
- Any other information you wish to include to support your application, e.g. business plan, promotional materials etc
- **Bottle Stores:** To assist with confirmation of percentage annual income expected from alcohol you may wish to complete a Statement of Annual Sales Revenue if applicable. Template statement available here <u>ccc.govt.nz/consents-and-licences/</u> <u>business-licences-and-consents/alcohol/alcohol-licences/off-licence</u>
  - Clubs:
  - 1. Provide an updated copy of Club charter and membership rules (including details of any Affiliated memberships)
  - 2. A list of names of clubs with which the club has reciprocal visiting rights for members; and
- 3. A Club Alcohol Management Plan and Club Alcohol Policy (desirable)

#### Notes:

- The Agencies may request to inspect a copy of your staff training plan/manuals.
- 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="https://creativecommons.org">ccc.govt.nz/consents-and-licences/business-licences-and-consents/ alcohol/managers-certificate/</a> notification-of-management-change

### 11. Payment and submitting the application

Please complete this form and forward it with all required documents. You can submit the form (and documents) online through the webpage or in person, or post to Alcohol Licensing, Christchurch City Council, 53 Hereford Street, PO Box 73013, Christchurch 8154.

# This application cannot be accepted if the form is incomplete and documents are missing. Filing is not complete unless your invoice is paid. Invoices are posted to you 2 months in advance of the due date to your last address provided to us.

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.

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

### 12. 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 in form 7 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).



#### 13. Authorisation You must complete this section in full

## 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 understoo  | d the above privacy statement | ✓ Yes  | No    |              |  |
|--|-------------------------------|--------|-------|--------------|--|
| Dated at Christchurch this   | 26                            | day of | March | 20 <b>25</b> |  |
| Applicant's Signature:<br>(must not be signed<br>by an Agent or Solicitor) |                               |        |       |              |  |

# 14. Important to note — Renewal with Variation Lodgement and Invoicing

Please make an appointment with an Alcohol Licensing Inspector to lodge your new renewal with variation before you make payment. The inspector will confirm your risk rating and fees and if required re-issue your invoice for payment of fees.

Renewal with Variations will not be accepted without an Inspector Verification being completed.

### Lodgement notes - for office use only

