

## FORM 16 Application for temporary authority

Sections 136, Sale and Supply of Alcohol Act 2012

To: The Secretary District Licensing Committee Horowhenua C/- Horowhenua District Council Private Bag 4002 Levin 5540

Application for temporary authority to carry out on the sale and supply (or delivery) of alcohol is made in accordance with the details set out below.

**Details of applicant** 

a.Full legal name: _	
b. Postal Address:	
<b>.</b>	

c.Occupation:

d.Daytime contact name and telephone number:

### **Details of licence**

a.**Type of licence**: (*tick appropriate box*)

On-licence Off-licence

b. Number:

#### **Details of premises**

(To be included only where the licence applied to any premises that are not a conveyance)

b.Trading or other name (if any): \_\_\_\_\_

#### **Details of conveyance**

(To be included only where the licence applies to any conveyance)

a.Type of conveyance:

b.Address of home base (if any):

c.Trading or other name (if any): \_\_\_\_\_

Further details - What right, title, estate or interest does the applicant have -

a. In the premises (or conveyance) to which the application relates? [state]

b.In any business conducted in the premises (or conveyance) to which the application relates?

\_\_\_\_\_

[state]\_\_\_\_\_

Does the applicant intend to carry on the sale and supply (or delivery) of alcohol personally? Yes / No a.If no, what is the full legal name, address, and occupation of the person through whom the applicant intends to carry on the sale and supply (or delivery) of alcohol? Full name:
What are the reasons for the application?
Dated at: (place and date)
Signature of applicant:

# NOTES

- 1. This application must be accompanied by the prescribed fee.
- 2. The District Licensing Committee may require notice of this application to be given to any person or persons it may state.