

## Application for Liquor Planning Certificate

To: RMA Consents  
 Whangarei District Council  
 Private Bag 9023  
 Te Mai  
 Whangārei 0148

[consentsadmin@wdc.govt.nz](mailto:consentsadmin@wdc.govt.nz)

Office Use Only	
Date Received:	
Time received:	
Payment Received:	
Tech 1 App #:	
Property #:	
Land #:	
Planner:	

**This application form should be used when applying for the necessary planning certificate to accompany an application for a liquor licence, as required by Section 100(f) of the Sale and Supply of Alcohol Act 2012. If you are making an application for a licence, please use the alcohol licensing forms as detailed on our website: [www.wdc.govt.nz/Alcohol](http://www.wdc.govt.nz/Alcohol)**

*This form is designed to provide us with your contact information and details about your proposal that are required for us to process your application. If you fail to complete this form and provide the necessary information, including the deposit fee, your application may not be accepted for processing. Prior to paying your deposit fee you may request an invoice from us.*

### 1 Application details

Full name of applicant(s): \_\_\_\_\_

Postal address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**I hereby apply to Whangarei District Council for (please tick all relevant):**

- On-licence - sale of liquor for consumption on the premises
- Off-licence - sale of liquor for consumption off the premises
- Club-licence - sale of liquor for consumption of club members

**Please indicate the reason for this application (please tick all relevant):**

- Brand-new premises (whether built or not)
- Already licensed (new owner seeking new licence)
- Existing premises either not previously licensed or licensed for different type (i.e.: change of use)
- Variation of condition of existing licence (i.e.: hours)
- Redefinition of licensed premises (i.e.: area)

**Is there an existing licence for the premises?**     Yes /  No

*If yes:*

What is the existing planning certificate and/or liquor licence number? \_\_\_\_\_

What are the approved hours of operation of the premises? \_\_\_\_\_

What area (m<sup>2</sup>) of the building does this license cover? \_\_\_\_\_

**Is the activity legally operating as a permitted activity under the Whangarei District Plan, under an approved resource consent or under existing use rights in accordance with section 10 of the Resource Management Act 1991?**     Yes /  No

If there is an existing resource consent, certificate of compliance or certificate of existing use, for the activity or building to which your premises relates please provide reference: \_\_\_\_\_

**2 The site**

Physical address: \_\_\_\_\_  
 Legal description(s): \_\_\_\_\_  
 Name of premises: \_\_\_\_\_

**3 The activity**

**The nature of the business being applied for is (please tick all relevant):**

- |   |  |                                      |                                       |
|---|--|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Tavern or bar                | <input type="checkbox"/> Entertainment venue | <input type="checkbox"/> Mail order  | <input type="checkbox"/> Hotel        |
| <input type="checkbox"/> Sports Club                  | <input type="checkbox"/> Restaurant or cafe  | <input type="checkbox"/> Supermarket | <input type="checkbox"/> Bottle store |
| <input type="checkbox"/> Grocery Store                |  |                                      |                                       |
| <input type="checkbox"/> Other (please specify) _____ |  |                                      |                                       |

**Is a change proposed to approved hours of operation?**  Yes /  No

**The proposed hours of business operation are:** \_\_\_\_\_

**The area (m2) of the building to be licensed is:** \_\_\_\_\_

**Are alterations to existing buildings on the application site proposed?**  Yes /  No

*If yes, please describe these alterations and attach a plan(s) that clearly show the alterations*

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**Are there any existing signs on the application site?**  Yes /  No

*If yes, please list the size, type and location of each existing sign (e.g. one new 1.5m wide x 1.5m high wall-mounted sign attached to the northern elevation of the building) and / or attach plans providing these details.*

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**Are any changes proposed to existing signs and/or any new signs proposed on the application site?**  Yes /  No

*If yes, please list the size, type and location of each sign (e.g., one 0.2m high x 1.5m wide sign attached to the veranda of the building) and / or attach plans providing these details.*

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**4 Owner / Occupier details (if different from applicant)**

**Owner(s):**

Full name: \_\_\_\_\_

Postal address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Occupier(s):**

Full name: \_\_\_\_\_

Postal address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## 5 Information requirements

**I attach:**

- Certificate of title and relevant interests

*Search copy must be dated within the last 3 months*

- Site plan detailing the location of the building tenancy within the site

- Floor plan showing the layout and use of the building/ tenancy including any outdoor areas.

*The area(s) of the premises and/or the site where liquor is to be sold, supplied or consumed must be clearly shown.*

- Plan(s) showing any alterations to the existing building on application site

- Plan(s) detailing all existing and proposed signs as described in Section 3 of this application form

- Copy of any resource consent, certificate of compliance, existing use certificate, liquor planning certificate and liquor licence relating to the premises

- Assessment against the rules of the District Plan (where the activity is legally operating as a permitted activity under the Whangarei District Plan rather than under a resource consent)

## 6 Declaration of applicant or authorised agent

**Privacy:**

*We require the information you have provided on this form to process your application and to collect statistics. We will hold and store the information, including the form and all associated reports and attachments, on a public register. The details of your application may also be made available to the public on our website.*

*The details are collected and disclosed to inform the general public and community groups about all applications which have been processed or issued through us. If you would like to request access to, or correction of any details, please contact us.*

A link to Council's full Privacy Statement is as follows: [www.wdc.govt.nz/Privacy](http://www.wdc.govt.nz/Privacy)

**Fees and charges:**

*Subject to rights to object to, or appeal a decision on costs, in making an application you undertake to pay all costs associated with your application.*

*This includes:*

- *paying an advance fee deposit at time of lodgement*
- *paying any additional costs of processing the application, including any interim invoice or invoice issued at the time a decision is made on your application*
- *paying all fees associated with monitoring the conditions of an approved consent, including payment of an advance deposit fee for monitoring at the time that a decision on an application is issued*
- *paying all costs (including debt collection or legal fees) of recovering any unpaid costs.*

*All fees are payable in accordance with our 'Schedule of Fees and Charges':*

[www.wdc.govt.nz/FeesandCharges](http://www.wdc.govt.nz/FeesandCharges)

**Please note:** *Where the advance fee paid is a deposit fee, you will be invoiced for any outstanding costs associated with processing the application when a decision on your application is issued.*

*An advance fee for costs associated with monitoring the conditions of your consent is payable at the time of a decision on your application is issued.*

*In some cases, interim billing for processing costs may also occur. You will need to pay any such invoice to enable the application to continue to be processed.*

*Payment options: [www.wdc.govt.nz/PayApplication](http://www.wdc.govt.nz/PayApplication). Please quote the type of application and name of the applicant when making your payment.*

**Site visit:**

*By signing this form, you confirm that we are permitted to undertake a site inspection(s). In relation to any such site inspection, you are responsible for providing us with information as necessary to ensure we can undertake a safe and accessible site visit.*

*In the case that we visit the site and are unable to undertake the site visit because of safety or access issues that have not been disclosed, you will be responsible for any costs associated with re-visiting the site, in addition to those associated with the initial visit.*

**Applicant declaration:** (required where authorised agent is not acting on your behalf)

I / we confirm that I / we have read and understood the above.

I undertake to pay all costs associated with this application. I also agree to pay all the costs (including debt collection or legal fees) of recovering any unpaid costs.

Applicant name: \_\_\_\_\_

Applicant signature \_\_\_\_\_ Date: \_\_\_\_\_

Applicant name: \_\_\_\_\_

Applicant signature \_\_\_\_\_ Date: \_\_\_\_\_

**Authorised agent declaration:**

As authorised agent for the applicant, I confirm that I have read and understood the above information and have fully informed the applicant of their obligations in connection with this application, including obligations relating to payment of fees and other charges. I confirm that I have the applicant's authority to sign this application on their behalf.

Agent's signature \_\_\_\_\_ Date: \_\_\_\_\_

Name of agent: \_\_\_\_\_

Company name \_\_\_\_\_ Reference: \_\_\_\_\_

Postal address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**7 Address for service**

Please send all correspondence to (select one):

- The applicant
- The authorised agent
- Other (*please provide details*)

Full Name: \_\_\_\_\_

Postal address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_