

Notice of Management Change

Section 231, Sale and Supply of Alcohol Act 2012

Name of Licensed Premises
Licensee Licence Number
Address of Licensed Premises
Email Phone Number

What are you notifying? *(Please tick and complete the applicable section below)*

New Certificate Holding Manager

Effective from to
Full Name Date of Birth
Certificate Number Expiry Date

Temporary Manager *(see s.229, Sale and Supply of Alcohol Act)*

(NB – a Temporary Manager must apply for a Manager’s Certificate within two working days of their appointment)

Effective from to
Full Name Date of Birth
Residential Address
Who they are replacing Certificate Number
Reason

Acting Manager *(see s.230, Sale and Supply of Alcohol Act)*

Effective from to
Full Name Date of Birth
Residential Address
Who they are replacing Certificate Number
Reason

Termination/Cancellation of Manager Appointment

Effective from
Full Name Date of Birth
Certificate Number Expiry Date

Forward a copy of this completed form, within two working days of the appointment (or termination), to:

The Secretary
District Licensing Committee
Private Bag 9023
Whangarei 0148

mailroom@wdc.govt.nz

New Zealand Police
Private Bag 9016
Whangarei 0148
Attention: Liquor Licensing

AHRO.WhangareiKaipara@police.govt.nz

Signature of Licensee Date
Name Position