Rangitikei District Council
Postal Address: Private Bag 1102, Marton **Street Address:** 46 High Street, Marton
Phone: 06 327 0099 **Freephone:** 0800 422 522 **Fax:** 06 327 6970
Email: info@rangitikei.govt.nz **Website:** www.rangitikei.govt.nz

APPLICATION FOR RENEWAL OF MANAGERS CERTIFICATE

Form 20, Section 123, Sale of Liquor Act 1989

To: The Secretary
The District Licensing Agency,
At Marton

DATE RECEIVED
____/_____/ 20____

Application for a Renewal of Manager's Certificate is made in accordance with the details set out below:

DETAILS OF APPLICANT

Full name_____

Address _____

_____

Occupation _____ Date of Birth _____

FULL postal address for service of documents

_____

_____

DAYTIME contact name and telephone number

_____

Current place of employment_____

Have you, the applicant (since you last applied), appeared before (or are awaiting a court date to appear before) the LLA (Liquor Licensing Authority)? ❑ Yes ❑ No

If yes, please provide details_____

_____

_____

Has the applicant been convicted of any offence, since the certificate was issued or last renewed?

❑ Yes ❑ No

If yes, what are the details of each offence?

Please provide details of all convictions to which the Criminal Records (Clean Slate) Act 2004 does not apply. All applications for Managers Certificates are reviewed by New Zealand Police.

Nature of Offence	Date of Conviction	Penalty Suffered
_____	_____	_____
_____	_____	_____
_____	_____	_____

What steps has the applicant taken to manage the sale and supply of liquor pursuant to the licence with the aim of contribution to the reduction of liquor abuse?

_____

_____

Does the applicant hold the Licence Controller Qualification?

❑ Yes ❑ No

If yes, on what date was the qualification obtained _____

DETAILS OF CERTIFICATE

Type of certificate (tick appropriate box) ❑ General Manager ❑ Club Manager

Certificate Number _____

Date of Expiry _____

Dated at_____ this_____ day of_____ 20 _____

Applicants Signature _____

FEES

Manager's Certificate $134.93 Receipt _____ Date _____

NOTES

1. This application must be filed with the District Licensing Agency before this certificate expires. Where the applicant is presently employed as a manager, it should be filed with District Licensing Agency for the district in which the applicant is employed. In all other cases, it should be filed with the District Licensing Agency for the district in which the applicant is residing.

2. For the matters that are to accompany this application, see regulations 21 (2) of the Sale of Liquor Regulations 1990. (See checklist below)

CHECKLIST

Application filled out correctly	❑ Yes	❑ No
Three copies of the application	❑ Yes	❑ No
The fee attached	❑ Yes	❑ No
Photo identification (sighted and photocopied)	❑ Yes	❑ No
Completed Questionnaire	❑ Yes	❑ No
Copy of Liquor Controller qualification	❑ Yes	❑ No