



# FORM 16 – APPLICATION FOR TEMPORARY AUTHORITY

## Section 136, Sale and Supply of Alcohol Act 2012

### Send or deliver your application to:

The Secretary, Manawatu District Licensing Committee  
Manawatu District Council  
Private Bag 10 001, Feilding 4743  
135 Manchester Street, Feilding 4702

### For enquiries:

phone 06 323 0000  
email [alcohol@mdc.govt.nz](mailto:alcohol@mdc.govt.nz)

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

### APPLICANT DETAILS

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Full legal name

Usual residential address

Occupation

Postal address for service

Daytime contact name

Telephone number(s)

Email address

### DETAILS OF LICENCE

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Type of licence (tick appropriate box)

- On-Licence                       Off-Licence

Existing licence number

**DETAILS OF PREMISES**

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

Address

Proposed trading or other name (if any)

Previously trading as

**DETAILS OF CONVEYANCE**

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

Type of conveyance

Address of home base (if any)

Proposed trading or other name (if any)

Previously trading as

**FURTHER DETAILS**

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What right, title, estate, or interest does the applicant have:

in the premises (or conveyance) to which the application relates?

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

Does the applicant intend to carry on the sale and supply (or delivery) of alcohol personally?

Yes  No

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?

Name

Date of birth

Address

Occupation

What are the reasons for the application?

### APPLICANTS SIGNATURE

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Signature of Applicant/s

Dated at \_\_\_\_\_ (place)

This (day) \_\_\_\_\_ of (month) \_\_\_\_\_ 20 (year) \_\_\_\_\_

### FOR YOUR INFORMATION

- 1 This form 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.

## APPLICANT CHECKLIST

### THE FOLLOWING MUST BE INCLUDED WITH YOUR APPLICATION:

- Completed, *signed* and dated application form
- Letter from the owner of the building giving consent for liquor to be sold
- Copy of the Managers Certificate for nominated managers
- The date you intend to commence trading from the premises  
\_\_\_\_\_
- Certificate of Incorporation (if the applicant is a company)
- Copy of your Lease Agreement or;
- Copy of Sale and Purchase Agreement

**Please telephone 06 323 0000 to arrange, with a Licensing Inspector, a pre-lodgement check of your application. Your application will not be accepted without an appointment with an inspector.**