



District Office
 15 Galileo Street
 Private Bag 544
 Ngaruawahia 3742

FEE DUE IS \$134.93 per licence

Huntly Area Office 142 Main Street 0800 492 452
Raglan Area Office 7 Bow Street 07 825 8129
Tuakau Area Office 2 Dominion Road 0800 492 452

Telephone (all hours) 07 824 8633
 Call Free 0800 492 452
 Fax 07 824 8091

Email: publicenquiries@waidc.govt.nz
www.waikatodistrict.govt.nz

Application for temporary authority

Sections 24 and 47, Sale of Liquor Act 1989

To: The Secretary
 District Licensing Agency
 Waikato District Council
 Private Bag 544
 NGARUAWAHIA 3742

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

APPLICANT		<i>*Postal address of applicant is where the documents will be sent.</i>	
Full name and postal address* of applicant:		.....
.....		
.....		
Contact person:	.....	Daytime telephone:	.....
Occupation:	.....	Date of birth:	.....

DETAILS OF LICENCE		<i>Tick appropriate box</i>	
On-licence	<input type="checkbox"/>	Off-licence	<input type="checkbox"/>
Number:	.....	Number:	.....

PREMISES DETAILS	<i>(to be included only where the licence applies to any premises)</i>
Address:	
Trading or other name, if any:	

CONVEYANCE DETAILS	<i>(to be included only where the licence applies to any conveyance)</i>
Type of conveyance:	
Address of home base, if any:	
Trading or other name, if any:	

continued overleaf

FURTHER DETAILS

What right, title, estate or interest does the applicant have in the premises (or conveyance), or in any business conducted in the premises (or conveyance), to which the application relates?

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.....
.....

Does the applicant intend to carry on the sale and supply (or delivery) of liquor personally? **YES / NO**

If **NO**, what is the name, address and occupation of the person through whom the applicant intends to carry on the sale and supply (or delivery) of liquor?

Name:

Address:

Occupation:

What are the reasons for the application?

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.....
.....
.....
.....

SIGNATURE

Applicant's signature:

Dated at **this** **day of** **20**.....

NOTES

- 1 *The District Licensing Agency may require notification of this application to be given to any person or persons it may specify.*
- 2 *Three copies of this application must be filed with the District Licensing Agency, together with the prescribed fee of \$134.93. If a temporary authority is required for both an on-licence and an off-licence, the fee is \$269.86.*