

Application for Managers Certificate



Section 219, Sale and Supply of Alcohol Act 2012

To: The Secretary
 Central Otago District Licensing Committee
 Central Otago District Council
 PO Box 122
 Alexandra 9340

1. DETAILS OF APPLICANT

Full Name _____

Residential address _____

Postal address for service of documents _____

Contact details: Phone: _____

Cell phone: _____

Email: _____

Date of birth: _____ Place of birth: _____

Female Male

Have you ever been convicted of any offence? Yes No

(State all criminal convictions other than convictions for offences against provision of the Land Transport Act 1998 not contained in Part 6, and offences to which the criminal records clean slate Act 2004 applies.)

If **yes**, give details below. (You may wish to explain the circumstances on another page)

Nature of Offence	Date of Penalty Suffered	Conviction

2. DETAILS OF PREVIOUS EXPERIENCE IN THE ALCOHOL INDUSTRY

Have you had any experience, in particular recent experience in managing any premises or conveyance in respect of which a licence was in force?

Yes No

If **yes**, what are the details and dates of that experience? (Attach proof of experience, such as letters from employers, or an affidavit.)

Premises Position	Duties Date

OFFICE USE ONLY	Date Sent	Deadline Date	Date Received	Application No.
Police Report				
Licensing Inspectors Report				Debtor No.

3. DETAILS OF QUALIFICATIONS AND TRAINING

Do you hold the Licence Controller Qualification?

Yes No

If **yes**, attach a copy of the certificate.

If **no**, when do you intend to complete this qualification? _____

State the details of any other relevant training you have undertaken _____

4. DETAILS OF CURRENT PLACE OF EMPLOYMENT IN THE ALCOHOL INDUSTRY

Do you intend at this time to be the Manager (including Duty Manager) of any particular licensed premises?

Yes No

If **yes**, name of premises _____

Position and duties _____

5. NEW ZEALAND POLICE REPORT

Assessing the suitability of a person applying for a manager’s certificate is a requirement under the Sale and Supply of Alcohol Act 2012. The Police are required to report on this application. That report may include the release of any previous convictions you may have which will be a public record. You will receive a copy of that report

Please complete the attached Police Disclosure Authority

6. DETAILS FOR APPLICANTS WHO ARE NOT NEW ZEALAND RESIDENTS OR CITIZENS

Persons who are not New Zealand residents or citizens are required to provide the following additional information:

Details of current work or visitor’s visa _____

Your last permanent address _____

Country _____

Copy of current passport or certificate identity number _____

Country where passport or certificate issued _____

Please provide copies of the above documents

Applicant’s signature *(not solicitor or agent)*

Date

PLEASE ATTACH THE FOLLOWING TO YOUR APPLICATION:

- A written, signed reference from your current employer confirming your position and duties.
- Supporting evidence detailing managerial experience within the hospitality and alcohol industries. A minimum of 6 months experience is required by this District Licensing Committee before an application will be considered. (eg. attach references from previous employers or character references)
- Copy of your Licence Controller Qualification (LCQ) and any other relevant training certificates.
- The prescribed fee (\$316.25). Payment can be made by internet banking to: 02-0916-0081744-00. Please state your customer number and your surname as the reference information when entering your banking details.

TRAINING: LICENCE CONTROLLER QUALIFICATION

The Sale and Supply of Alcohol Act 2012 (s.218 of the Act and s.23 of the Regulations) requires a 'prescribed qualification' which must be obtained before a manager's certificate can be granted.

Service IQ, has developed two unit standards (NZQA), which need to be completed to gain a Licence Controller Qualification.

These units are:

NZQA ID: 4646 Demonstrate knowledge of the Sale and Supply of Alcohol Act 2012 and its implications for licensed premises

NZQA ID: 16705 Demonstrate knowledge of Host Responsibility requirements as a duty manager of licensed premises

Once you have completed the unit standards you need to apply to the Service IQ to obtain the LCQ certificate. If you have any questions regarding the Licence Controller Qualification please contact Service IQ on 0800 275 4474 or via their website www.serviceiq.org.nz

Courses available in the Central Otago area include:

1. Otago Polytechnic – One day course available in Cromwell. Please contact the Cromwell campus on 0800 765 9276.
2. Southern Institute of Technology - Various course options available, taught at the SIT Queenstown campus at Remarkables Park Town Centre in Queenstown. Contact 03 442 5375
3. The Training Bureau – One-Day Classroom Course in Queenstown and Correspondence Course available anywhere. Private courses available on demand (minimum numbers apply). Contact details: 0800 227 872 or Nik Horn on 027 457 0282. Course dates and registration at www.trainingbureau.co.nz.

APPLICATION PROCESSING TIMEFRAME

Lodge your complete application with the Central Otago District Licensing Committee. Incomplete applications will not be accepted. (An exception maybe considered if the applicant is appointed as an Acting or Temporary Manager under s.231 of the Act and then we may hold the application pending receipt of the training qualification)

Your application will be forwarded to the Police and Council's Licensing Inspector for review and comment.

If there is no opposition to the application, your application will be determined by the District Licensing Committee. This usually takes between 6 and 8 weeks.

A manager's certificate is issued initially for one year and application for renewal must be made prior to the expiry date on your certificate.

Central Otago District Licensing Committee
Phone: 03 440 0056
PO Box 122
Alexandra 9320

Applicant (if a natural person) to complete and submit with application

- **All directors of the applicant company**
- **Secretary of applicant club**
- **For a special licence the duty manager and applicant for the event**

Personal Information

Full name :

Gender: (M) (F) (Other) Date of birth:
(dd/mm/yyyy)

NZ Driver Licence number:
Or Passport number:

Previous names: If applicable, please include other alias or alternate names; married name if not your primary name; previous/maiden/name changed by deed poll or statutory declaration.

Family name	First name	Middle names
<input type="text"/>	<input type="text"/>	<input type="text"/>

Consent to release information

1. The New Zealand Police may release **any** information they hold relevant to the purpose of enabling the District Licencing Committee (DLC) to decide on my suitability to hold a licence or managers certificate
 - Conviction histories and infringement/demerit reports
 - Active charges and warrants to arrest
 - Charges that did not result in a conviction including those that were acquitted, discharged without conviction, diverted or withdrawn
 - **Any** interaction I have had with New Zealand Police considered relevant to the role being vetted, including investigations that did not result in prosecution
 - Information subject to name suppression where that information is necessary to the purpose of the vet
2. NZ Police may release the information listed in Section 1 to reporting agencies for the reason listed above
3. If I am eligible under the Criminal Records (Clean Slate) Act 2004, my conviction history will not be released
4. The Police may disclose new relevant information to the DLC after the completion of the Police Vet in the following circumstances:
 - The disclosure of the newly-obtained information is considered to be justified under the Privacy Act 1993 (if it had existed or been available at the time of the Police vet, it would have been disclosed); and
 - The Police has ascertained that the purpose of the Police vet still exists.
5. Information provided in this consent form may be used to update New Zealand Police records.
6. I am entitled to a copy of the vetting result released to the DLC and can seek a correction by contacting Police.
7. I may withdraw this consent, prior to Police's disclosure of the vetting result.

Applicant's Authorisation:

- ✓ I confirm that the information I have provided in this form relates to me and is correct.
- ✓ I have read and understood the information above.
- ✓ I authorise New Zealand Police to disclose any personal information it considers relevant to my application (as described above) to the DLC making this request for the purpose of assessing my suitability at any time.
- ✓ I authorise New Zealand Police to disclose any personal information it considers relevant to my application (as described above) to the reporting agency for the purpose of assessing my suitability at any time.

Name: _____ Date: _____

Signature: _____ Electronic Signature