Liquor Licence Application

Instructions

Lodgement

- For details of the lodgement process including the prerequisites and FAQs please see the lodgement guide for the specific application you are lodging.
- For help with the portal please click on the Help link in the top right corner.

Navigation

- DO NOT use the web browser buttons to move between pages or sections as this will cancel the form.
- Use the section heading links on the left or the Next button below each page to navigate to the next section.
- All fields with a red * are mandatory.
- All mandatory or invalid values will be shown in red with a message.
- New sections might appear/disappear based on how you answer certain questions.

Saving the form

- If at any time you would like to stop filling in this form you can save it by clicking the Save button below the form.
- If the form is left idle on a page for longer than 30 minutes the application will close and will not be saved.

Cancelling the form

• To Cancel the lodgement of the form, navigate away from it by closing the browser window or following a different link on the menu.

Progress

• The sections bar on the left give an indication of your progress.

Applicant Details

Details of the applicant applyi	ng for the grant of a liquor licence.				
Applicant Ref	Category	Туре			
339719	Organisation	Body Corporate			
Name					
Yeats Pty Ltd					
Address					
173 Oxford Street LEEDERV	/ILLE WA 6007				
Please specify the contact p	person for this application, including a co	ntact number and email.			
		Email	Email		
Ciara Bone		robertsonoxford@outlook.com	robertsonoxford@outlook.com		
Telephone		Mobile			
+61414109266					
Existing Liquor Licence	e				
	irrently attached to the premises?				
Yes 🕏 No					
Licence Type					

Where is the proposed premises situated?

Liquor Licence Application

Premises address		
88 Rokeby Road, Subiaco, WA 6008		
Is the premises owned by the applicant?	Please attach a Certificate of Title or Certificate of Su	ırvey.
☐ Yes ⓒ No	Certificate of Title 88 Rokeby Road.pdf	304 KB
Please confirm the applicant will have exclusive possess ✓ Yes O No	sion of the proposed premises to be licensed (Extended Trading P	ermit area excluded).
Are there any payments made to any other entity in relat	tion to the turnover of the business?	
☐ Yes No		
Please note that should the licence be granted and the li pursuant to s37(5) of the Act.	icensee no longer has exclusive tenure of the licensed premises al	Il rights to the licence will terminate
Section 40 (Certificate of Local Planning Aut	thority)	
A section 40 Certificate of Local Planning Authority or D determination of the application, unless the licensing au	evelopment Approval specifying the type of liquor licence sought thority otherwise determines.	is required to be lodged prior to the
Are you able to provide a section 40 certificate or Develo	opment Approval now as part of this application?	
ⓒ Yes □ No		
Please attach a section 40 certificate and / or Developme	ent Annroval	
	The Approval.	

Freehold Owner Details

Please specify the type of the freehold owner you would like to enter.				
Is the owner a				
✓ Individual (natural persor◯ Body Corporate (a registe○ Partnership (jointly, two comment Department	ered company - i.e. Pty Ltd, Ind or more of the above)	c, Ltd)		
Please specify below the d	letails of the freehold owner.			
Title		Given name(s)	Surname
Mr		Ken		Chan
Gender				
✓ Male○ Female○ Indeterminate / Intersex /	Unspecified	fied		
Is this address outside of A	Australia?			
Postal Address				
Unit 2909, 545 Station Stre	et			
Postcode	Suburb		State	
3128	BOX HILL		VIC	
Contact Details				
Phone			Email	
0468860952		Ken.chan@internode.on.net		
		Preferred method of correspondence		
			Email	
Please specify the type of	the freehold owner you wou	ld like to enter	r.	
Is the owner a				
 ✔ Individual (natural person) ☐ Body Corporate (a registered company - i.e. Pty Ltd, Inc, Ltd) ☐ Partnership (jointly, two or more of the above) ☐ Government Department 				
Please specify below the details of the freehold owner.				
Title		Given name(s)		Surname
Mr		Chris		Chan
Gender				
Male Female Indeterminate / Intersex /				
Is this address outside of Australia?				
O Yes & No				
Postal Address				
Unit 2909, 545 Station Stre	et			

Postcode Suburb		State		
3128	BOX HILL		VIC	
Contact Details				
Phone			Email	
0468860952			chris_and_mary@outlook.com	
			Preferred method of correspondence	
			Email	
Please specify the type of	the freehold owner you wou	ld like to ente	r.	
Partnership (jointly, two of Government Department	ered company - i.e. Pty Ltd, Indor or more of the above)			
Title	etails of the freehold owner.	Given name(s)	Surname
Mrs		Mary		Chan
		,		
Gender Male Female Indeterminate / Intersex / Unspecified				
Is this address outside of	Australia?			
O Yes No				
Postal Address				
Unit 2909, 545 Station Stre	et			
Postcode	Suburb		State	
3128	BOX HILL		VIC	
Contact Details				
Phone			Email	
0468860952			chris_and_mary@outlook.com	
			Preferred method of correspondence	
			Email	
Please specify the type of the freehold owner you would like to enter.				
Is the owner a Individual (natural person) Body Corporate (a registered company - i.e. Pty Ltd, Inc, Ltd) Partnership (jointly, two or more of the above) Government Department				
Please specify below the d	letails of the freehold owner.			
Title Given name(s		s)	Surname	
Ms		Ming		Chan

Gender				
■ Male				
☑ Female				
☐ Indeterminate / Intersex / Unspecified				
Is this address outside	of Australia?			
O Yes 🕑 No				
Postal Address				
Unit 2909, 545 Station Street				
Postcode	Suburb		State	
3128	BOX HILL		VIC	
Contact Details				
Phone		Email		
0468860952		Ken.chan@internode.on.net		
			Preferred method of correspondence	
		Email		

Public Interest Assessment (PIA)

Based on the licence type selected, you are required to lodge public interest submissions. Whilst not mandatory, the applicant is also encouraged to lodge evidence such as letters of support and surveys demonstrating the liquor licence will cater for the requirements of consumers for liquor and related services, with regard to the proper development of the liquor industry, the tourism industry and other hospitality industries in the State. Any evidence you wish to lodge must be attached as part of your public interest submissions.

Attach Public Interest Assessment submissions (including any supporting evidence) below

Certificate of Title 88 Rokeby Road.pdf

Category

Certificate of Title 88 Rokeby Road.pdf

Category

Certificate of Title/Evidence of Ownership

Address where the Application, Public Interest Assessment including Submissions and Evidence lodged, can be viewed during the advertised period.

88 Rokeby Road, Subiaco, WA 6008

Mandatory Training Requirement

An applicant must provide evidence of training as detailed in the <u>Director's policy on Mandatory Training.</u>

Please attach training certificate.

Approved Manager MLPLCA401A - Robert McNally.pdf

184 KB

Harm Minimisation

Please attach a harm minimisation document as per the Director's policy on Harm Minimisation.

Attach harm minimisation document below

Harm Minimisation Plan - Roberts on Rokeby 2025.pdf

142 KB

Plans

Plans of the proposed premises are required to be lodged with the application in order for the licensing authority to define the area in which the sale, supply and in some cases, the consumption of liquor will occur if the licence is granted (section 66). Please refer to Standards of Licensed Premises

Please click on the Select File button below to select the file you wish to upload.

The acceptable formats for uploading documents are:

- Portable Network Graphics (.png)
- Joint Photographic Experts Group (.jpg)
- Graphics Interchange Format (.gif)
- Portable Document Format (.pdf)

Attach Plans and Specifications below

Plans 88 Rokeby Rd - Proposed Red Line.pdf

258 KB

Document Submissions

Below is a list of documents that need to be lodged with your application (including documents already attached). In order to progress your application as efficiently as possible you are strongly encouraged to attach all required documents shown below.

Save this form if you need to obtain electronic copies of any documents not yet attached. If you are unable to obtain electronic copies you will need to submit the required documents by mail or in person however, this may cause a delay to the processing of your application.

	Number of Files	Size in bytes
Section 40 Certificate	1 files	105918 bytes
୯		
Training Certificate	1 files	188451 bytes
ଓ		
PIA Submissions	1 files	311898 bytes
ଓ		
Harm Minimisation Submissions	1 files	146286 bytes
ଓ		
Plans	1 files	264296 bytes
€		

Declaration

Is there any other information you wish to provide in support of this application?

O Yes & No

Is there any other supporting documents you would like to attach?

O Yes & No

The applicant:

1. declares that all the information in this form, Public Interest Assessment and in any supporting documentation is true and correct and no relevant information has been omitted; and

2. consents to the Public Interest Assessment being displayed on the licensing authority's website during the advertising period.

Signatory full name		Position of Signatory	
Ciara Bone		Operations Manager	
No work will be undertaken on the application fee is paid.	on until payment has been received. If the fe	e is paid after the application is lodged, the lodgen	nent period is counted from the day the
In addition, it is recommended to save your	application before submitting it to ensure that	it you don't lose any of your information in an unfo	rtunate event.
Once saved, click Submit below to prod	ceed to the Payment section.		
Submitted By		Sub	omitted On
yeatsptyltd		14	1/8/2025