**LLD/14**

**CERTIFICATE OF LOCAL GOVERNMENT**

LIQUOR CONTROL ACT 1988

Section 39 / Occupancy Permit

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| ***THIS SECTION TO BE COMPLETED BY THE LOCAL GOVERNMENT*** |
| I, *(full name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  being the *(title) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  for the *(name of Local Government) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  with respect to an application by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Name of applicant)  hereby certify that the premises known as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  and situated at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |  |  | | --- | --- | |  | comply with all relevant requirements under the *Health Act 1911,* under the *Food Act 2008,* under any written law relating to the sewerage or drainage of those premises and under the *Local Government Act 1995* and the *Building Act 2011;* | | OR |  | |  | do not comply with the requirements set out above and could not reasonably be made to comply; | | OR |  | |  | Do not comply with the requirements set out above but could be made to conform if the following requirements were carried out:- | |  |  | |  |  | |  |  |   Dated the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Authorised Officer |

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| ***THIS SECTION TO BE COMPLETED BY THE APPLICANT***  ***BEFORE SUBMISSION TO THE LOCAL GOVERNMENT*** |
| **Type of Licence:**   |  |  |  |  | | --- | --- | --- | --- | | Casino  Club  Club Restricted  Hotel | Hotel (Restricted)  Hotel (Tavern)  Hotel (Tavern Restricted)  Hotel (Small Bar) | Liquor Store  Nightclub  Producer’s  Restaurant | Special Facility  Wholesaler’s |   **Nature of application and an outline of proposed use of the premises**   |  |  |  | | --- | --- | --- | | Works Canteen  Transport  Education & Training Course  Catering  Amusement Venue | Theatre/Cinema  Tourism  Sports Arena  Bed & Breakfast Facility  Auction | Reception/Function Centre  Education & Training Institution  Food Hall  Room Service Restaurant  Online Wine Sales |   In the case of a **Special Facility Licence** application:   1. What category is sought? *Pursuant to Regulation 9A of the Liquor Control Regulations 1989)* 2. What trading hours are sought?  |  |  |  |  | | --- | --- | --- | --- | | Monday: | am/pm | to | am/pm | | Tuesday: | am/pm | to | am/pm | | Wednesday: | am/pm | to | am/pm | | Thursday: | am/pm | to | am/pm | | Friday: | am/pm | to | am/pm |  1. Is approval sought to sell and supply liquor on:   Christmas Day: YES  NO  ; Good Friday: YES  NO ; ANZAC Day: YES  NO   1. Is approval sought to sell liquor for consumption off the licensed premises: YES  NO 2. Please detail the trading conditions sought and provide an outline on how it is proposed the premises will operate (attach separate submission if necessary): |