FORM 17

r 19(1)

CARTERTON DISTRICT LICENSING AGENCY

Telephone (06) 379 6626

P. O. Box 9, Carterton. Fax No. (06) 379 7832

APPLICATION FOR TEMPORARY AUTHORITY

Section 24 and 47, Sale of Liquor Act 1989

То:	The O	Application No ne Secretary ne Carterton District Licensing Agency O Box 9 ARTERTON					
			porary authority to with the details set of	carry on the sale and supply (or delivery) of liquor is out below.	S		
1.	DETAILS OF APPLICANT(S)						
		(a)	Full name, address	ss and occupation			
		(b)	Postal address for	r service of documents			
		(c)	Daytime contact n	name & telephone No.			
2.	DETAILS OF LICENCE						
	(a)	Type of licence (tick appropriate box)					
	On L	icence		Off Licence			
	(b)	Numl	ber:				
3.	DET prem (a)	nise) Addro	ess	o be included only where the licence applies to any	y		
	(b)	Trading or other name (if any)					
3.	DETAILS OF CONVEYANCE (To be included only where the licence applies to any conveyance)						
	(a)	Type of conveyance					
	(b)	Addre	ess of home base (if	f any)			
	(c)	Tradi	ng or other name (if	f any)			

4.	FUR	THER DETAILS
		(a) What right, title, estate, or interest does the applicant have:(i) in the premises (or conveyance) to which the application relates?
		(ii) in any business conducted in the premises (or conveyance) to which the application relates?
		(b) 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
	(c)	What are the reasons for the application?
Dated	at	this day of
		Applicant

NOTES

- 1. The District Licensing Agency may require notice of this application to be given to any person or persons it may specify.
- 2. For the matters that are to accompany this application, see regulation 19(2) of the Sale of Liquor Regulations 1990.