

# Application for Class 4 Gambling or TAB Venue Consent



Applies to all new (and those licensed after 17 October 2001) Class 4 Venues

<b>Section 1: Applicant's details:</b>	<p><b>Full name of Society/Trust:</b> .....</p> <p><b>Postal address:</b> ..... ..... <b>Postcode:</b> .....</p> <p><b>Contact person:</b> .....</p> <p><b>Telephone No. (Mon to Fri - 8am to 5pm):</b> .....</p> <p><b>Email:</b> .....</p>
<b>Section 2: Gaming venue details:</b>	<p><b>Name of Venue:</b> .....</p> <p><b>Street address:</b> <i>(please state the address on the existing gambling venue licence or if there is no existing licence, the same address as on the liquor licence)</i> ..... ..... <b>Postcode:</b> .....</p> <p><b>Contact person:</b> .....</p> <p><b>Telephone No. (Mon to Fri - 8am to 5pm):</b> .....</p> <p><b>Current number of gaming machines in the venue:</b> .....</p> <p><b>Proposed number of gaming machines for the venue: (if applicable):</b> .....</p> <p><b>Details of liquor license(s) applying to the premises and/or being applied for:</b> ..... .....</p>
<b>Section 3: Further information required</b>	<p><b>Full name of manager(s) of premises:</b> .....</p> <p>.....</p> <p><i>Please attach a copy of the following with your application form:</i></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Police approval for owners and manager</li> <li><input type="checkbox"/> Gambling Harm Minimisation Policy</li> <li><input type="checkbox"/> Staff Training Programme</li> <li><input type="checkbox"/> Host Responsibility Programme</li> <li><input type="checkbox"/> Locality map showing distances as required by the Hauraki District Council's Gambling Policy 2020.</li> </ul>

Please continue over the page.

<p><b>Section 4: Merging club venues</b></p>	<p><b>Is this a proposal for the merger to two existing club venues currently with class 4 venue licenses?</b></p> <p>£ Yes (If Yes, complete section 5)                      £ No (If No, proceed to Section 6)</p>
<p><b>Section 5: Details for merging venues</b></p>	<p>Please fill in details relating to second merging premise below.</p> <p><b>Name of Venue:</b> .....</p> <p><b>Street address:</b> (please state the address on the existing gambling venue licence or if there is no existing licence, the same address as on the liquor licence)</p> <p>.....</p> <p>.....    <i>Postcode:</i> .....</p> <p><b>Contact person:</b> .....</p> <p><b>Telephone No.</b> (Mon to Fri - 8am to 5pm): .....</p> <p><b>Current number of gaming machines in the venue:</b> .....</p> <p><b>Proposed number of gaming machines for the venue:</b> (if applicable): .....</p> <p><b>Details of liquor license(s) applying to the premises and/or being applied for:</b></p> <p>.....</p> <p>.....</p>
<p><b>Section 6: Application fee</b></p>	<p>Please the application fee:</p> <p>£ \$150.00 Hauraki District</p>
<p><b>Section 7: Declaration</b></p>	<p>I agree declare that:</p> <ul style="list-style-type: none"> <li>• I have read and understood the Hauraki District Council Gambling Policy 2020, and</li> <li>• The information contained in this application is correct.</li> </ul> <p><b>Name</b> (in full) .....</p> <p><b>Signature:</b> .....                      <b>Date:</b> ...../...../.....</p>

Office use only	
<p>Completed by: .....</p> <p>Checked by: .....</p>	<p>Notes:</p>