

NOTICE OF MANAGEMENT CHANGE

Section 231, Sale and Supply of Alcohol Act 2012

Name of Licensed Premises: _____

Licensee: _____ Licence Number: _____

Address of Licensed Premises: _____

Contact Phone: (_____) _____ Contact Fax: (_____) _____

What are you notifying? (Please tick and complete the applicable box below)

New Certificate Holding Manager

Full Name: _____ Effective from: _____ / _____ / 20 _____

Certificate Number: _____ Certificate Expiry Date: _____

Temporary Manager

(see s.229, Sale and Supply of Alcohol Act)

Effective from: _____ / _____ / 20 _____ to _____ / _____ / 20 _____

Full Name: _____ Date of Birth: _____

Residential Address: _____

Who they are replacing: _____ Certificate Number: _____

Reason: _____

Note that a temporary manager must apply for a manager's certificate within two working days of their appointment

Acting Manager

(see s.230, Sale and Supply of Alcohol Act)

Effective from: _____ / _____ / 20 _____ to _____ / _____ / 20 _____

Full Name: _____ Date of Birth: _____

Residential Address: _____

Who they are replacing: _____ Certificate Number: _____

Reason: _____

Termination/Cancellation of Manager Appointment

Full Name: _____ Effective from: _____ / _____ / 20 _____

Certificate Number: _____ Certificate Expiry Date: _____

Forward a copy of this completed form, within two working days of the appointment (or termination), to:


The Secretary
Hauraki District Licensing Committee
c/o Hauraki District Council
PO Box 17
Paeroa

New Zealand Police
PO Box 54
Waihi 3641
Attention: Liquor Licensing

Fax: (07) 862 8607

Signature of licensee: _____ Date: _____

Name: _____ Position (director, partner etc): _____

	Hauraki District Licensing Agency		FRED 1150093
	<i>Responsibility: Peter Thom</i>	<i>Date issued: 18/12/2013</i>	<i>Version No: 1</i>
	<i>Location: Hauraki District</i>	<i>Review date: 10/01/2015</i>	<i>Page: 1 of 1</i>