

Notice of MANAGEMENT CHANGE

Section 231, Sale and Supply of Alcohol Act 2012



NAPIER
CITY COUNCIL
Te Kaunihera o Ahuriri

Name of Licensed Premises:			
Licensee:		Licence Number:	
Address of Licensed Premises:			
Phone:		Fax:	
What are you notifying? Please tick and complete the applicable box below.			

<input type="radio"/> New Manager			
Full Name:		Effective From:	
Certificate Number:		Certificate Expiry Date:	

<input type="radio"/> Temporary Manager (see section 229 of the Act)			
Full Name:		Effective From:	
Residential Address:		Certificate Expiry Date:	
Who are they replacing:		Certificate Number:	
Reason for Appointment:			
Note: A temporary manager must file an application for a manager's certificate within 48 hours of this appointment.			

<input type="radio"/> Acting Manager (see section 230 of the Act)			
Full Name:		Effective From:	
Residential Address:		Certificate Expiry Date:	
Who they are replacing:		Certificate Number:	
Reason for appointment:			

<input type="radio"/> Termination/Cancellation of Manager Appointment			
Full Name:		Effective From:	
Certificate Number:		Certificate Expiry Date:	

Email or fax a copy of this completed form, within two working days of the appointment (or termination), to each of the following agencies:

The Secretary
Napier District Licensing Committee
Email - info@napier.govt.nz
Fax: (06) 835 7579

Liquor Licensing Team
New Zealand Police
Email - hb.liquorlicensing@police.govt.nz
Phone: (06) 873 0534

Name:		Signature:		Date:	
Position: (please select an option) Licensee <input type="radio"/> Partner in Partnership <input type="radio"/> Company Director <input type="radio"/> Authorised Agent <input type="radio"/>					