

# Manager's Certificate Application



**MARLBOROUGH  
DISTRICT COUNCIL**

Form 17 - Section 219, Sale and Supply of Alcohol Act 2012

To: The Secretary  
Marlborough District Licensing Committee  
15 Seymour Street  
PO Box 443  
Blenheim 7240

Date Stamp:

Office Use Only:

CERT/ \_\_\_\_\_ / \_\_\_\_\_

Receipt #

## Checklist

Please provide the following with your application:

- Completed application and documentation (***incomplete applications will not be processed***)
- APPLICATION FEE - \$316.25 (*inclusive of GST*) - This is an application fee and is therefore non-refundable after the application is received by Marlborough District Council
  - Cash / Eftpos
  - Credit Card (counter only - 2.3% fee applies)
  - Internet Banking - Pay to Account No. 020600-0202861-02 Use the Applicant's Name as a reference Date Paid
- A copy of the Licence Controller Qualification (LCQ) under the Sale & Supply of Alcohol Act 2012.
- A reference from your employer at the licensed premises at which you are currently working. This should confirm your employment on licensed premises, your role, how long you have been working there and your experience in the sale and supply of alcohol.
- A copy of your photo identification e.g. passport or driver's licence

Application for a Manager's Certificate is made in accordance with the details set out below.

## Details of Applicant

Full Legal Name (*any aliases*)

Residential Address

Postal Address (*if different from residential address*)

Email Address

Daytime Contact Name  
(if different from above)

Telephone Number

Sex  
(*male/female*)

Occupation

Date of Birth

Place of Birth

Criminal Convictions (*State all criminal convictions other than convictions for offences against provisions of the Land Transport Act 1998 not contained in Part 6, and offences to which the Criminal Records (Clean Slate) Act 2004 applies*) This doesn't include speeding offence/parking tickets but does include drivers licence disqualification

Has the applicant had any experience (in particular recent experience) in controlling any premises or conveyance in respect of which a licence was in force:

Yes

No

If yes, what are the details and dates of that experience:

Has the applicant had any relevant training, in particular, recent training (e.g. onsite):

Yes

No

If yes, what are the details of that training and on what dates was it taken:

Does the applicant hold the Licence Controller Qualification?

Yes

No

If yes, on what date was that qualification obtained?

Does the applicant intend at this time to be the Duty Manager of any particular licensed premises?

Yes

No

If yes, what are the identifying particulars of those licensed premises? i.e. name and type of premises

If it is a club, what is the extent of the applicant's involvement in its management and activities?

Date

I confirm that the above information is true and correct

Signature of Applicant  
(type your name if submitting online)

Dated at Blenheim

**Notes**

1. This application must be accompanied by the prescribed fee.
2. If the applicant intends to be the manager of any particular licensed premises, the application must be filed with the Secretary of the District Licensing Committee with which the application for the licence was filed.
3. In all other cases, the application should be filed with the Secretary of the District Licensing Committee for the district in which the applicant is residing.

Once you have completed and signed this form, either save it and send via email to [mdc@marlborough.govt.nz](mailto:mdc@marlborough.govt.nz) or you can print it out and drop it into the offices on Seymour Street or post to Marlborough District Council, PO Box 443, Blenheim 7240.

Marlborough District Council  
PO Box 443  
Blenheim 7240

Ph: +64 3 520 7400  
Fax: +64 3 520 7496  
Email: [mdc@marlborough.govt.nz](mailto:mdc@marlborough.govt.nz)  
[www.marlborough.govt.nz](http://www.marlborough.govt.nz)

