

# Application for Renewal of Managers Certificate Checklist – Form 19

## Checklist for Renewal Managers Certificate (please tick)

- Application form (Includes police supplement form)
- Prescribed fee of \$316.25
- A reference from your current place of employment – stating dates of employment and duties. All references must be on letter head, signed and dated.
- You have successfully completed the Licence Controller Qualification. Please provide a copy, with your application.
- A copy of your prescribed qualification (LCQ bridging course) in order for your certificate to be renewed.
- A copy of your work permit (if applicable) – This should be a copy of your current visa in your passport.
- Copy of your Manager's Certificate (only required if you previously held a managers certificate and has it expired or was issued by another territorial authority).

Your application will not be formally accepted or processed until all the information is lodged.

## For further information please contact

Queenstown Lakes District Council  
10 Gorge Road  
Private Bag 50072  
Queenstown

Phone: (03) 441 0499  
Fax: (03) 450 2223  
Email: [services@qldc.govt.nz](mailto:services@qldc.govt.nz)

Please be advised if you're on a working holiday visa or work permit the following conditions will be imposed on your managers certificate:

- 1) This Manager's Certificate is only valid with a current New Zealand work permit.
- 2) The District Licensing Committee will review these conditions upon renewal.

# Application for Renewal of Managers Certificate – Form 19

Section 224, Sale and Supply of Alcohol Act 2012  
To the Secretary  
District Licensing Committee at Queenstown Lakes District Council

## Details of applicant

Full legal name \_\_\_\_\_

Aliases \_\_\_\_\_ Email \_\_\_\_\_

Residential address \_\_\_\_\_

Sex \_\_\_\_\_ Occupation \_\_\_\_\_

Date and place of birth \_\_\_\_\_

Postal address for service of documents \_\_\_\_\_

Mobile Number (\_\_\_\_) \_\_\_\_\_ Work Number (\_\_\_\_) \_\_\_\_\_

Current place of employment \_\_\_\_\_

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)]

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What steps has the applicant taken to manage the sale and supply of alcohol pursuant to the licence with the aim of contributing to the reduction of alcohol-related harm?

\_\_\_\_\_  
\_\_\_\_\_

Does the applicant hold the Licence Controller Qualification (or a prescribed qualification within the meaning of section 218 of the Sale and Supply of Alcohol Act 2012)? (please tick)

Yes  No

If Yes, on what date was that qualification obtained?

\_\_\_\_/\_\_\_\_/\_\_\_\_

## Details of certificate

Number \_\_\_\_\_

Date of expiry \_\_\_\_/\_\_\_\_/\_\_\_\_

Dated at (date and place) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \_\_\_\_\_  
Location

Signature of applicant \_\_\_\_\_

\*\* If this form is being completed on-line you will not be able, or required, to sign this form and the on-line lodgement will be treated as confirmation of your acknowledgement and acceptance of the above responsibilities and liabilities and that you have made the above representations, warranties and certification.

The deposit fee must be paid prior to or at the time of the application and proof of payment must be submitted with the application.

I confirm payment method as follows:

Payment Type \_\_\_\_\_

Amount Paid \$316.25

Date of Payment \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Cheque payable to Queenstown Lakes District Council

Bank transfer to account 020948 000-2000-00 please use the first 5 letters of the applicant's name. (If paying from overseas swiftcode - BKNZLN22)

Visa/Mastercard on the website – [www.qldc.govt.nz](http://www.qldc.govt.nz)

Visa/Mastercard on the phone – please call 03 441 0499

### Notes

- 1 This application must be accompanied by the prescribed fee.
- 2 This application must be filed with the District Licensing Committee before the certificate expires.
- 3 Where the applicant is presently employed as a manager, it should be filed with the District Licensing Committee for the district in which the applicant is employed. In all other cases, it should be filed with the District Licensing Committee for the district in which the applicant is residing.

# NEW ZEALAND POLICE REPORT

**The Police are required to report on this application. That report may include the release of any previous convictions you may have which will be a public record. You will receive a copy of that report.**

Full Name of Applicant: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Male/Female: \_\_\_\_\_

Maiden (or other) names: \_\_\_\_\_

Driver's Licence: Identity Number: \_\_\_\_\_ Country of Origin: \_\_\_\_\_

**Persons who are not New Zealand residents or citizens are requested to provide the following additional information:**

Details of current work or visitors permit: \_\_\_\_\_

Your last permanent address: \_\_\_\_\_

Country: \_\_\_\_\_

Current Passport or certificate identity number: \_\_\_\_\_

Country where passport or certificate issued: \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_