

Form 4 – Off-Licence: New, Renewal, and/or Variation Application

An off-licence allows the licensee to sell and supply alcohol to the public for consumption away from the premises.

Notes:

- Use this form for new off-licence applications, renewals, variations, and renewal with variation applications.
- **From 1 July 2026:** The public notification of alcohol licence applications will incur a charge of \$150.00 per notice to cover publication costs.
- Applications for new licences should be lodged at least six weeks prior to the anticipated opening/takeover date.
- Applications for renewal should be lodged at least 20 working days prior to the expiry of the current licence.
- Variation applications can be made at any time, however only one application fee is incurred if combined with a renewal.

Sections [100](#), [120](#) and [127\(2\)](#), Sale and Supply of Alcohol Act 2012

To the Secretary, Queenstown Lakes District Licensing Committee.

Application for an off-licence is made in accordance with the particulars set out below.

1 APPLICATION TYPE <i>What would you like to do?</i>				
1.a	Application for <i>(Tick all that apply)</i>	New Licence	Renewal	Variation
1.b	If applying for a variation, describe change(s) required and reasons for change(s) <i>E.g. Change to licensed hours, area, designation</i>			
1.c	Expected opening / takeover date <i>(New licences only)</i>			
1.d	Current premises off-licence number <i>(If held)</i>			
1.e	Expiry date			
1.f	Temporary Authority number and expiry date <i>(If applicable - new licences only)</i>			

2 PREMISES DETAILS <i>From where do you want to sell alcohol?</i>	
2.a	Trading name <i>If changing, state both new and previous names</i>
2.b	Physical address <i>Location of premises</i>

<p>2.c</p>	<p>Nature of Business <i>(Select one only)</i></p> <p><i>Please see sections 32-36 of the Sale and Supply of Alcohol Act 2012 for the kinds of premises which may hold an off-licence.</i></p> <p><i>If premises is a grocery or bottle store, a statement of annual sales revenue (or predicted revenue) will be required. See supporting documents checklist for more information.</i></p>	<p>Bottle Store Grocery Store Hotel</p> <p>Remote Sales Supermarket Tavern</p> <p>Other <i>(state below)</i></p>
<p>2.d</p>	<p>What right does the applicant have to occupy the premises?</p> <p><i>E.g. Property owner / leaseholder / tenant</i></p>	
<p>2.e</p> <p>2.f</p> <p>2.g</p> <p>2.h</p>	<p>Full name of property owner</p> <p>Address of property owner</p> <p>Phone number of property owner</p> <p>Email of property owner</p>	
<p>2.i</p> <p>2.j</p>	<p>Is the premises undergoing any building work related to this application?</p> <p>If yes, please give details</p>	<p>Yes No</p>

3 CONTACT PERSON FOR APPLICATION

The nominated first point of contact for any queries or requests relating to this application, e.g. an alcohol licensing agent or company representative.

<p>3.a</p>	<p>Full name</p>	
<p>3.b</p>	<p>Phone number</p>	
<p>3.c</p>	<p>Email</p>	
<p>3.d</p>	<p>Position / role</p>	
<p>3.e</p>	<p>Postal address for service</p>	

4 APPLICANT DETAILS

The applicant is the private company, limited partnership, or other entity that receives (or will be receiving) the proceeds from the sale of alcohol in the first instance.

4.a	Status of applicant <i>Use 'Other' for Territorial Authority, Trust, Natural Person, etc</i>	Private Company Limited Partnership (LP) Other (state)
4.b	Full legal name of applicant to be on the licence <i>E.g. Wines R Us Limited</i>	
4.c	Business Phone number	
4.d	Email	
4.e	Postal address for service	
4.f	Business website address	
4.g	Experience of applicant in regard to the sale and supply of alcohol <i>E.g. Years licence held, or other licensed premises owned</i>	
4.h	Has the applicant ever appeared before the Alcohol Regulatory and Licensing Authority (ARLA)?	Yes No
4.i	If yes, please give details including dates and outcome	

5 CONDITIONS SOUGHT *What would you like on the licence?*

5.a	Licensed days and hours <i>E.g. Monday to Sunday, 8.00am to 10.00pm</i>	
5.b	Will a 'Supervised' or 'Restricted' designation be applied to all or any part of the premises?	No designation Supervised Restricted
5.c	If so, describe the relevant area(s) <i>Minors must not be permitted to enter 'Restricted' areas, and are only allowed in 'Supervised' areas if accompanied by their parent or legally-appointed guardian.</i>	

6 PREMISES OPERATIONS		<i>How will the business operate?</i>	
6.a	Is sale of alcohol the principal purpose of the business?	Yes	No
6.b	If no, state principal purpose		
6.c	Other goods and/or services offered by the premises <i>E.g. Grocery items, tobacco products, glassware</i>		
6.d	Normal operating days and hours <i>These may be different to the licensed hours sought</i>		
6.e	Will free tastings of alcohol be offered?	Yes	No
6.f	If so, describe the frequency and nature of the tastings		
6.g	During tastings, where will drinking water be available to guests?		
6.h	Does the premises have mains water supply?	Yes	No
6.i	If no, what is the potability of water available?		
6.j	Will single sales be offered?	Yes	No
6.k	If so, describe range of drinks sold as singles		

7 SYSTEMS AND STAFF TRAINING		<i>How will the staff know what to do?</i>	
7.a	What staff training is provided in regards to sale of alcohol compliance and host responsibility practices? <i>E.g. Online courses, shadow shifts, HPA publications, tests and/or sign-off sheets.</i> <i>Explain content, duration and how often it is provided. Include copies of any alcohol-related in-house training material as supporting documents. Copies of HPA publications are not required.</i>		

7.b	What till prompts do you have regarding age checks?	
7.c	What other steps will be taken to prevent the sale and supply of alcohol to prohibited persons? <i>E.g. In-house mystery shopper / pseudo Controlled Purchase Operation (CPO) programs, intoxication assessments</i>	
7.d	Has the premises ever been subject to a Police CPO?	Yes No Unsure
7.e	If yes, what were the results? (If known)	
7.f	Is there good visibility over the entire premises from the point of sale?	Yes No
7.g	If no, how are any blind spots monitored?	
7.h	What security systems are in place? <i>E.g. Outdoor lighting, number of CCTV cameras, alarm, guards</i>	
7.i	What promotions and advertising involving alcohol will the premises be doing? <i>Both within the premises, and externally (e.g. Social Media). Please write "None" if no promotions are offered.</i>	

8 AMENITY AND GOOD ORDER OF THE LOCALITY *Do you know your neighbourhood?*

The DLC must consider the effects the issue (or renewal) of the licence will have on the local area.

8.a	List number and type of all 'sensitive sites' within 500m of the premises <i>Sensitive sites include schools, childcare centres, places of worship, etc</i>	
8.b	List number and type of all licensed premises within 50m of the premises	

8.c	State number of residential neighbours within 50m	
8.d	Has the premises ever received any noise or nuisance complaints from neighbours?	

9 CERTIFIED MANAGERS *Who will be responsible for overseeing the supply of alcohol?*

9.a	Manager 1 <i>Full legal name, certificate number and expiry date</i>	
9.b	Manager 2 <i>Full legal name, certificate number and expiry date</i>	
9.c	Manager 3 <i>Full legal name, certificate number and expiry date</i>	
9.d	Manager 4 <i>Full legal name, certificate number and expiry date</i>	
9.e	Manager 5 <i>Full legal name, certificate number and expiry date</i>	
9.f	Manager 6 <i>Full legal name, certificate number and expiry date</i>	
9.g	Any additional certified managers <i>Full legal name(s) with certificate number and expiry date. Include an additional sheet if necessary.</i>	

10 DIRECTORS *Who runs the company?*

List the full names of all directors (if company) or the applicant (if natural person) with their date(s) of birth. Use a separate sheet for any additional directors.

10.a	Director 1 <i>Full legal name and date of birth</i>	
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10.b	Director 2 <i>Full legal name and date of birth</i>	
10.c	Director 3 <i>Full legal name and date of birth</i>	
10.d	Director 4 <i>Full legal name and date of birth</i>	
10.e	Any additional directors <i>Full legal name(s) with date of birth</i>	

11 CONVICTIONS

11.a	<p>State all criminal convictions* of the applicant, or of the directors of the applicant company</p> <p><i>Please write "None" if no convictions are held.</i></p> <p><i>*Other than 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. Use a separate sheet if necessary.</i></p>	
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12 SHAREHOLDERS *Who owns the company?*

List the full names of all shareholders (if company), along with the allocation of shares held.

12.a	Shareholder 1 <i>Full legal name and percentage of shares held</i>	
12.b	Shareholder 2 <i>Full legal name and percentage of shares held</i>	
12.c	Shareholder 3 <i>Full legal name and percentage of shares held</i>	
12.d	Any additional shareholders <i>Full legal name(s) with percentage of shares held</i>	

13 SUPPORTING DOCUMENTS CHECKLIST *Have you got everything?*

Copies of the following documents must be included for all applications.

Current premises off-licence (if held)

Host Responsibility Policy

In-house training materials used at the premises, relating to the sale and supply of alcohol

Fire Evacuation Statement

Manager’s Certificate(s) for any manager listed, if not issued by QLDC

Map showing the location of the premises in relation to sensitive sites within 500m

Floor plan showing entire area to be licensed (with licensed area boundary marked in colour), principal entrance(s), bar/point of sale, and any area to be designated as ‘Supervised’ or ‘Restricted’.

If the application is signed by someone else on behalf of the applicant, a letter from the applicant stating that they give permission for that person to act on their behalf.

Note: Templates for the following revenue statements or projections can be found on the QLDC website, [here](#).

If premises is a **grocery store**, a statement verified by a chartered accountant of gross sales revenue exc. GST, for food, products, household items, alcohol, tobacco, and convenience foods, for a 12 month period ending within 90 days of this application being made. For new businesses, provide a projection for the upcoming 12 months.

If premises is a **bottle store**, a statement verified by a chartered accountant of annual sales revenue exc. GST, for alcohol, tobacco, food products, non-alcoholic beverages, convenience foods, and all other items, for a 12 month period ending within 90 days of this application being made. For new businesses, provide a projection for the upcoming 12 months.

Additional documents required for new or variation applications.

Application for Compliance Certificate form

Certificate of incorporation (if incorporated company)

Photograph of the exterior of the premises

Where the applicant does not own the property, a statement from the property owner consenting to the application

14 DECLARATION

I confirm that, at the time of writing, all information provided is true and correct to the best of my knowledge.

I have supplied all required supporting documentation listed above.

14.1	Full name	
14.2	Date	
14.3	Signature	

15 PRIVACY STATEMENT

The Queenstown Lakes District Council (QLDC) collects personal information on this form for the purposes of administering and assessing applications under the Sale and Supply of Alcohol Act 2012 and associated regulations, including enabling statutory reporting, decision-making, and compliance functions. This information may be shared with relevant agencies such as Police, the Medical Officer of Health, and the District Licensing Committee where required by legislation.

The collection, use, storage, and disclosure of your personal information is in accordance with the Privacy Act 2020 and QLDC's Privacy Policy, which explains how you can access and request correction of your information.

For further information please refer to the QLDC Privacy Policy, available under 'Policy' [here](#).

16 SUBMITTING THE APPLICATION

The application can be submitted over the counter at a QLDC office, or via email to alcoholinspectors@qldc.govt.nz.

Alternatively, to apply by post, please send the completed application together with all supporting documents to the following address:

The Secretary, Queenstown Lakes District Licensing Committee
c/o Queenstown Lakes District Council
Private Bag 50072
Queenstown 9348

17 PAYMENT

Alcohol licence fees can be found using the [Alcohol Licence Fee Calculator](#). Applications will not be processed until full payment is received.

Payment can be made as follows:

- **In person.** Visit a QLDC office to pay at the counter.
- **Over the phone.** Call our customer service team on 03 441 0499.
- **By bank transfer.** Account number for payment is 02 0948 0002000 00.
- **Via the [QLDC website](#).**

Following lodgement, you will be emailed an invoice with the Application ID to use as the payment reference.

Please note: Payments by credit card incur an additional 1.5% fee.

18 FURTHER INFORMATION

For more information on applying for an alcohol licence, please visit the [QLDC website](#) or contact:

Phone: 03 441 0499 (Queenstown) or 03 443 0024 (Wānaka)

Email: alcoholinspectors@qldc.govt.nz

Alcohol Licence Public Notice – WEBSITE

Form 7a

Public notices of alcohol licence applications are published on the QLDC website and in local print publications (Mountain Scene and The Wānaka Sun). Please complete the form below and submit it with your application.

Notes:

- From 1 July 2026, the public notification of alcohol licence applications will incur a charge of \$150.00 per notice to cover publication costs.
- On- and off-licence applications for the same premises can be combined onto one notice if submitted together.
- Notice of the application also needs to be displayed at the premises.

[Section 101, Sale and Supply of Alcohol Act 2012](#)

The Queenstown Lakes District Licensing Committee has received the following application for an alcohol licence:

PUBLIC NOTICE DETAILS	
Application type <i>(New/renewal and/or variation)</i>	
Type(s) of licence <i>(On/Off/Club)</i>	
Applicant <i>E.g. Company name</i>	
Trading name	
Nature of business <i>E.g. Restaurant, bowls club, cellar door</i>	
Premises Address	
Proposed licensed days and hours (inside area) <i>E.g. Monday to Sunday, 8.00am to 4.00am</i>	
Proposed licensed days and hours (outside area) <i>If no outside area is to be licensed, enter "N/A"</i>	
Publication date <i>(To be completed by alcohol inspector)</i>	

Please email alcoholinspectors@qldc.govt.nz for a copy of the application to which this notice relates.

Any person who wishes to object to the application may, not later than 25 working days after the publication date of this notice, file a notice in writing of the objection with the Secretary of the District Licensing Committee at Private Bag 50072, Queenstown or via email to dlc@qldc.govt.nz.

No objection to the issue of a licence may be made in relation to a matter other than those specified in [s.105\(1\)](#) of the Act. No objection to the renewal of a licence may be made in relation to a matter other than those specified in [s.131](#) of the Act.

Office use only: This notice was displayed on the [QLDC website](#) from

to

Alcohol Licence Public Notice – PREMISES

Form 7b

Complete Part 1 and display in a conspicuous place on or adjacent to the site to which the application relates.

- The assigned alcohol licensing inspector will advise once public notice of the application has been published on the QLDC website. The notice below must be displayed at the premises for at least 10 days following this date.
- Once the display period has ended, please complete Part 2 and email the form to the inspector.

Section 101, Sale and Supply of Alcohol Act 2012

The Queenstown Lakes District Licensing Committee has received the following application for an alcohol licence:

PART 1 - PUBLIC NOTICE DETAILS	
Application type <i>(New/renewal and/or variation)</i>	
Type(s) of licence <i>(On/Off/Club)</i>	
Applicant <i>E.g. Company name</i>	
Trading name	
Nature of business <i>E.g. Restaurant, bowls club, cellar door</i>	
Premises Address	
Proposed licensed days and hours (inside area)	
Proposed licensed days and hours (outside area)	
Publication Date <i>(Leave blank until advised by inspector)</i>	

Please email ialcoholinspectors@qldc.govt.nz for a copy of the application to which this notice relates.

Any person who wishes to object to the application may, not later than 25 working days after the publication date of this notice, file a notice in writing of the objection with the Secretary of the District Licensing Committee at Private Bag 50072, Queenstown or via email to dlc@qldc.govt.nz.

No objection to the issue of a licence may be made in relation to a matter other than those specified in s.105(1) of the Act. No objection to the renewal of a licence may be made in relation to a matter other than those specified in s.131 of the Act.

PART 2 – DECLARATION

This notice was displayed at

from *(date)*

to

Signed

Name

Application for Compliance Certificate

Section 100(f), Sale and Supply of Alcohol Act 2012

IMPORTANT: This form is not required for renewal applications where no change is sought to the licence conditions.

Please complete and include this form in support of any **new** or **variation** licence application.

Select one of the following:

- New licence sought Variation to current alcohol licence conditions

1. APPLICANT'S DETAILS – The company or person who is receiving the money from the sale of alcohol

Company/ Entity/ Trust/ Natural person: _____

Contact person: _____

Postal address for service: _____

Business phone number: _____ Mobile phone number: _____

Email: _____

2. PREMISES DETAILS

Trading name of premises: _____

Address of premises: _____

Valuation number: _____

Lot no: _____ DP no: _____

Please select one of the following.

- A new build (not built yet or in the process of being built)
Building consent number: _____
- An existing building with alterations being made and/or the use is being changed
Building consent number: _____
- An existing building - alterations are being made but are not subject to a building consent.
- An existing building - no alterations or change in use.

Maximum number of permitted occupants in YOUR tenancy? _____

3. ALCOHOL LICENCE DETAILS

Is the premises currently licensed? NO YES – Licence number(s): _____

Do you (or the premises) have a valid resource consent? NO YES

Consent number(s) _____

Type of licence sought / varying. Please select below:

- On licence**
- Restaurant Tavern Hotel
- Other (specify)

- Off licence**
- Bottle store Grocery store Supermarket Cellar door
- Remote seller Tavern Hotel

Club Type of club (e.g. sports club, RSA etc.)

4. VARIATION

If this application is in support of a variation, please state which condition(s) you wish to change:

- Licensed area
- Licensed hours
- Designation
- Class of licence
- Other: _____

5. LICENSED DAYS AND HOURS SOUGHT

New licensed days and hours sought:

(E.g. Monday to Sunday, 8.00am to 10.00pm)

Inside areas:

Outside areas:

If varying, state current licensed days and hours:

Inside areas:

Outside areas:

6. SUPPORTING DOCUMENTS TO BE INCLUDED WITH APPLICATION

- Copy of floor plan including carparks, storage areas **and indicating** principal entrance, bar, toilets, CCTV camera locations. Highlight the entire area to be licensed (including outside areas in a different colour if applicable). If this application is in support of a tavern or hotel licence, highlight the supervised designation on the floor plan.
- Photograph of the principal entry of the premises or for a proposed building copies of architectural drawings.
- Map indicating the location of premises.

7. SUPPLEMENTARY FEE OF \$285

Please note this fee is payable **in addition to** the main application fee, and any annual fees due.

Payment options:

Bank transfer to account number **02 0948 0002000 00**.

Credit card payments can be made through our customer services team over the counter or by phoning 03 441 0499.

Please note: a credit card fee of 1.5% applies.

I declare that all information provided within this form is correct, to the best of my knowledge.

Print name: _____

Signed: _____ Date: _____

This template may be used for applications where the property owner's consent is required.

Notes:

- The property owner's consent is required for all new and variation applications where the applicant does not own the property to be licensed.
- The applicant is responsible for ensuring that the property owner is fully and accurately briefed on the application.

STATEMENT OF CONSENT

To the Secretary, Queenstown Lakes District Licensing Committee,

As the owner, or representative of the owner, of the property situated at _____

_____ I have no objection to
_____ (the applicant) obtaining an alcohol licence.

The applicant has advised me that they intend to sell and supply alcohol to be consumed:

On the premises *Off the premises*

I agree to the applicant obtaining the following licensed hours:

Inside Areas: _____

Outside Areas (if applicable): _____

I confirm that the applicant has provided me with a copy of the proposed licensed area.

Signature	
Date	
Name	
On behalf of (if applicable)	
Role/position	

EVACUATION SCHEME STATEMENT

To accompany all new and renewal applications for On, Off & Club Licences

Section 100(d) of the Sale and Supply of Alcohol Act 2012 requires one of the statements below to be signed by the applicant:

The relevant building by reason of its current use, does not require such a scheme, or the relevant building is exempt from having to meet the requirements of such a scheme.

Signed by the applicant _____

OR

The relevant building in which the premises are situated has an evacuation scheme for public safety which meets the requirements of Section 76 of the Fire and Emergency Act 2017.

Signed by the applicant _____

Evacuation Scheme

An evacuation scheme is typically required for a building used for 1 or more of the following purposes:

- The gathering together, for any purpose, of 100 or more persons:
- Providing employment facilities for 10 or more persons:
- Providing accommodation for 6 or more persons (other than in 3 or fewer household units):
- Storing or processing hazardous substances in quantities exceeding the prescribed minimum amounts.

Please direct enquiries to:

Risk Reduction Department
Fire & Emergency NZ
PO Box 2360
Wakatipu
Phone: (03) 441 4550