

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: () Email

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

New Certificate Holding Manager OR **Termination/Cancellation of Manager Appointment**

Full name: Effective from: / /20

Certificate number: Certificate expiry date:

Temporary Manager (see s.229, Sale and Supply of Alcohol Act) OR **Acting Manager** (see s.230, Sale and Supply of Alcohol Act)

Effective from: / /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.

Signature of licensee: Date:

Name: Position (director, partner etc):

Forward a copy of this completed form, within two working days of the appointment (or termination), to the Secretary of the District Licensing Committee as shown below AND a copy to your nearest Police Station (addresses shown below):

<p>The Secretary District Licensing Committee Waikato District Council Private Bag 544 Ngaruawahia 3742</p> <p>Fax: 07 8248091 Email: RegulatoryAdministrationTeam@waicd.govt.nz</p>	<p>District Licensing Unit Counties-Manukau Police Private Bag 76920 Manukau City Auckland 2241</p> <p>Fax: 09 261 1313 Email: dlu.counties.manukau@police.govt.nz</p>	<p>The Officer in Charge New Zealand Police Attention: Liquor Licensing- Private Bag 3078 Hamilton 3240</p> <p>Fax: 07 8389454</p>	<p>The Officer in Charge New Zealand Police Attention: Liquor Licensing- PO Box 10 Ngaruawahia 3742</p> <p>Fax: 07 8245145</p>
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