

# Order Barring Person from entering or remaining on a Licensed Premises

For assistance with completing this application form please contact CBS by phone on 8226 8655 or by email at liquorandgaming@sa.gov.au Further information is also available from the CBS website at [www.cbs.sa.gov.au](http://www.cbs.sa.gov.au)

**In Person at:**  
 Consumer and Business Services  
 Customer Service Centre  
 91 Grenfell Street  
 Adelaide SA 5000

**By Mail to:**  
 Consumer and Business Services  
 Customer Service Centre  
 GPO Box 2169  
 Adelaide SA 5001

**By Email at:**  
 liquorandgaming@sa.gov.au

## Part A – Barred Person Details

<b>1. Name of Person to be Barred</b>	
<b>2. Address of Barred Person (if known)</b>	Street Number _____ Street _____ Suburb/Town _____ Postcode _____

## Part B – Licensed Premise Details

Under Section 125 of the *Liquor Licensing Act 1997*, you are barred from the following premises

<b>3. Premises</b>									
<b>4. Licence Number</b>	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 30px; height: 30px; text-align: center;">5</td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> <td style="width: 30px; height: 30px;"></td> </tr> </table>	5							
5									
<b>5. Premises Address</b>	Street Number _____ Street _____ Suburb/Town _____ Postcode _____								

## Part C – Barring Details

<b>6. Period of Barring (Please tick one box)</b>	<input type="checkbox"/> 3 Months (1st Barring) <input type="checkbox"/> 6 Months (2nd Barring) <input type="checkbox"/> Indefinite	<input type="checkbox"/> Other (Please specify) _____ _____
<b>7. Dates of the Baring Period</b>	From: Date / / To: Date / / (Inclusive)	

**It is an offence if you enter or remain on the specified premise during the specified period (maximum fine \$1250)**

If you are barred from a premises for a period exceeding 1 month, or for periods exceeding 1month in total during a 3 month period, you may apply to the Liquor and Gambling Commissioner for a review of the order. The Commissioner on review may confirm, vary or revoke the barring order.

<b>8. Reason(s) for the order</b> (A Brief description of the offence committed by the person or the offensive or disorderly behaviour of the person or the reasonable grounds and the date, time and place of the relevant incidents)	
<b>Licensee/ Responsible Persons Signature</b>	_____ Date / /
<b>Print Name</b>	



**Part D – Proof of Service**

**Proof of Service to be completed on the copy of the order that is kept on the licensed premises to which it relates**

**Note**

This order does not operate until it is served on the person to barred;

- personally; or
- if the person has nominated an address for service then by leaving it or posting it to that address in an envelope addressed to the person; or
- by posting it to the person's usual place of business or residence in an envelope addressed to the person; or
- by leaving it at or posting it to the address of the person's solicitor in an envelope addressed to that solicitor

A copy of this order must be kept at the licensed premises to which it relates.

If a person is barred for an indefinite period or a period exceeding 6 months, Consumer and Business Services must within 7 days of service receive a copy and details of this order (in accordance with Section 125 of the Liquor Licensing Act 1997) from the licensee/responsible person, or the order will cease to have affect.

In addition to this order all previous orders relating to the individual should be sent at that time to satisfy the Commissioner that the requirements of s125(5) of the *Liquor Licensing Act 1997* have been met.

<b>9. Name of Person to be barred</b>	
<b>10. Barring Order was served</b>	<b>Tick one box</b>
	<input type="checkbox"/> Personally <b>OR</b> <input type="checkbox"/> Posting it to the address below <b>OR</b> <input type="checkbox"/> Leaving it at the address below
<b>11. Address Barring Order was posted or left</b>	Street Number _____ Street _____  Suburb/Town _____ Postcode _____
<b>12. Date and Time Barring Order issued</b>	Date     /     /                     at _____ : _____ am / pm
<b>Signature of person effecting the service</b>	_____ Date     /     /

Please note that your responses will be checked by law enforcement agencies. If it is found that you have failed to disclose information required, or have provided false or misleading information in your application, you may be subject to criminal prosecution, disciplinary action and/or licence cancellation.