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Approval of a person

Liquor (responsible person)

Information for applicants

A completed Personal Information Declaration (PID) is also required if: the person has not previously been approved by the Liquor and Gambling Commissioner; or if they have a previous approval that ceased more than six months ago; or if their circumstances have changed since they last lodged a completed PID.

Where to lodge this form

Email Scan and email to liquorandgaming@sa.gov.au	Post Licensing GPO Box 2169 ADELAIDE SA 5001	In person Customer Service Centre 91 Grenfell Street ADELAIDE SA 5000
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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.

Contact details (must be the applicant or an authorised representative)

Person authorised to complete and file this application form on behalf of the applicant	
Contact name	_____
Postal address*	_____
Daytime phone	_____ Email _____

Person to be approved

Provide details of person to be approved	
Surname	_____
First name	_____
Middle name/s	_____
	<input type="checkbox"/> Male <input type="checkbox"/> Female Date of birth / /
Have you previously been approved by the Liquor and Gambling Commissioner?	<input type="checkbox"/> No <input type="checkbox"/> Yes ID number _____

Current residential address

Provide details of person to be approved	
Street No	Street
Suburb/town	Postcode
Daytime phone	
Mobile	
Email	

Electronic details to be registered for future communications regarding this approval

Email for all contact	
Mobile phone for SMS	

Electronic contact consent

<input type="checkbox"/>	I agree to receive licensing information including all licence renewals, reminders and penalties by email
<input type="checkbox"/>	I also agree to receive reminders by SMS (only available when choosing to receive information by email)
<input type="checkbox"/>	I agree to update CBS of any change to my email address and mobile phone number

Representative's signature (if applicable)

Authorised representative	
Signature	Date

Declaration for approval as sought above (if PID is not required)

My current/previous approval (which does not have a lapsed date of greater than six months), was based on a Personal Information Declaration completed and signed by me prior to the date of approval. I declare that since making that declaration and obtaining approval				
I have been charged or reported for any offence in any jurisdiction, which was proven (in any State or Territory in Australia or another country), whether or not a conviction was recorded	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes
There are disciplinary proceedings against me pending in any court, tribunal or other authority	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes
There has been a change in my circumstances as detailed in that declaration	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes

If you answered yes to any of these questions a completed Personal Information Declaration (PID) is also required

Signature of person seeking approval	
Signature	Date

Witness contact details (licensee, authorised representative or person over the age of 18 years)

Provide witness contact details	
Surname
First name
Street No	Street
Suburb/town	Postcode
Daytime phone
Mobile
Email

Signature of witness	
Signature	Date