

# Council Approvals - Liquor Licence Application

## Section 1: Applicant to complete

Premises name	
Premises address	
Licence number (existing only)	
Category of liquor licence	

**Liquor Application** – please tick all applicable

Grant of new liquor licence	<input type="checkbox"/>	Alterations to licensed premises	<input type="checkbox"/>
Increase trading hours	<input type="checkbox"/>	Redefinition of licensed premises	<input type="checkbox"/>
Increase venue capacity	<input type="checkbox"/>	Remove licence to new address	<input type="checkbox"/>
Significant variation to trading rights	<input type="checkbox"/>	Adding Retail, Wholesale or Production Outlet	<input type="checkbox"/>

**Liquor Licence Information** – please complete as applicable

### Hours of operation

Monday		Friday	
Tuesday		Saturday	
Wednesday		Sunday	
Thursday		Public holidays	

### Capacity and plan of licensed premises

Indoor venue capacity	
Outdoor capacity (excluding outdoor dining permit)	
Attach plan of licensed premises	<b>Attached?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**Plan** – Please attach a copy of the plan if applicable

**Optional** – Please provide additional comments, or attach additional documents, if this may assist council to understand your liquor application

Comments:

## Section 2: Council to complete

I confirm all relevant planning and development approvals, consents and exemptions required in connection with this liquor licence application have been obtained – ☐ **Yes** ☐ **No** ☐ **N/A**

I confirm any relevant building works are complete and the premises is ready for occupancy and trade – ☐ **Yes** ☐ **No** ☐ **N/A**

**If yes is selected** – I confirm a certificate of occupancy has been issued - ☐ **Yes** ☐ **No** ☐ **N/A**

I confirm the proposed trading hours, venue capacity and premises plan are suitable – ☐ **Yes** ☐ **No** ☐ **N/A**

If all relevant approvals have not been obtained, what documents (e.g. certificate of occupancy), or steps or processes (e.g. variation to development approval), remain outstanding?

**Optional** – Please attach additional documents, e.g. support letters with conditions, decision notification forms, if this may assist the applicant or the Licensing Authority

Name	
Position	
Council	
Signature	
Date	