

*For office use only:*

Application No:		Date Received:	By:
Property File No:		Fees required / paid	\$225.00

**Application information**

Name of premises or part of premises for which the Planning Certificate is sought –  
(e.g. Name of Restaurant or Lounge Bar of Hotel)

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Street Address of premises: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Zone: \_\_\_\_\_

**Type of Licence**

This is an application for:

ON Licence

OFF Licence

CLUB Licence

**If more than one licence is being applied for, please use another application form.**

**Proposed Use of the Premises**

(e.g. Bar, Restaurant, Wholesale outlet, Retail outlet, Clubrooms, etc.)

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**Proposed Hours of Operation**

Please specify number of days a week, and the hours the Bar will be open.

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## Applicant Details

Application made in the name of: \_\_\_\_\_

Contact Address: \_\_\_\_\_  
\_\_\_\_\_

Contact telephone number: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_