

2. For a new licence only - continued

- ☐ NZ Police questionnaire - completed and returned with the application.
- ☐ ☐ Design drawings of advertising.
- ☐ ☐ **Where the applicant is not the owner of the premises.** A written statement from the owner to the effect that the owner has no objection to the grant of the licence.
- ☐ ☐ Certificates issued by the local authority that the proposed use of the premises meets the requirements of the Resource Management Act 1991 (RMA) and the Building Code.

3. The following associated fees are to be paid at the time of submitting your application:

- ☒ ☐ Off-licence application fee.
- ☐ RMA Certificate, together with the required fee payment.
- ☐ Building certificate, together with the required fee payment.

Date received

Received and checked by



1. Applicant details

Full name of applicant

JOSEPH EMANS

Proposed trading name

THREE SISTERS BLENDERY

Premises address

71 WAIRAU ROAD, OAKURA, 4314

Application type

☐

New

☒

Renewal

☐

Variation

Licence type

☐

On-licence

☒

Off-licence

☐

Club licence

2. Statement details



The owner of the building in which the premises are situated provides and maintains an evacuation scheme as required by section 21B of the Fire Service Act 1975.

☒

Because of the building's current use, its owner is not required to provide and maintain such a scheme.

☐

Because of the nature of the building, its owner is exempt from the requirement to provide and maintain such a scheme.

3. Applicant's Declaration

I DECLARE that to the best of my knowledge and belief the information provided in this application form and in any supporting documentation is true and correct.

JOSEPH EMANS

Name (print clearly)

MR

Title

JOSEPH EMANS

Signature

6/4/20

Date

OAKURA

Place where dated and signed, e.g. New Plymouth

Please note - your application, including personal information, will be available to the public and media as part of Council's decision-making process.

OFFICE USE ONLY

Date received

File reference

RG-06-10-02

Applicant ID

Application #

/

Received by

Document #

Scanned by

Receipt #

Property ID

Land ID

Amount paid \$

Section 1: Applicant to complete and submit with application

Personal Information

Full name :

JOSEPH EMANS

Gender:

(M) ☒ (F) ☐ (Other) ☐

Date of birth:
(dd/mm/yyyy)

30/11/76

NZ Driver Licence number:
Or Passport number:

DE198179

Previous names: If applicable, please include other alias or alternate names; married name if not your primary name; previous/maiden/name changed by deed poll or statutory declaration.

Family name

~~EMANS~~

First name

~~JOSEPH~~

Middle names

Consent to release information

- The New Zealand Police may release **any** information they hold relevant to the purpose of enabling the District Licensing Committee (DLC) to decide on my suitability to hold a licence or managers certificate
 - Conviction histories and infringement/demerit reports
 - Active charges and warrants to arrest
 - Charges that did not result in a conviction including those that were acquitted, discharged without conviction, diverted or withdrawn
 - Any** interaction I have had with New Zealand Police considered relevant to the role being vetted, including investigations that did not result in prosecution
 - Information subject to name suppression where that information is necessary to the purpose of the vet
- NZ Police may release the information listed in Section 1 to reporting agencies for the reason listed above
- If I am eligible under the Criminal Records (Clean Slate) Act 2004, my conviction history will not be released
- The Police may disclose new relevant information to the DLC after the completion of the Police Vet in the following circumstances:
 - The disclosure of the newly-obtained information is considered to be justified under the Privacy Act 1993 (if it had existed or been available at the time of the Police vet, it would have been disclosed); and
 - The Police has ascertained that the purpose of the Police vet still exists.
- Information provided in this consent form may be used to update New Zealand Police records.
- I am entitled to a copy of the vetting result released to the DLC and can seek a correction by contacting Police.
- I may withdraw this consent, prior to Police's disclosure of the vetting result.

Applicant's Authorisation:

- ☒ I confirm that the information I have provided in this form relates to me and is correct.
- ☒ I have read and understood the information above.
- ☒ I authorise New Zealand Police to disclose any personal information it considers relevant to my application (as described above) to the DLC making this request for the purpose of assessing my suitability at any time.
- ☒ I authorise New Zealand Police to disclose any personal information it considers relevant to my application (as described above) to the reporting agency for the purpose of assessing my suitability at any time.

Name:

JOSEPH EMANS

Date:

6/4/20

Signature:

JOSEPH EMANS

Electronic Signature





TO: THE APPLICANT

The Police are just one of the agencies tasked with promoting the principals of the Sale and Supply of Alcohol Act. It is well known that alcohol is a key aggravator in crime and in particular family violence, street disorder, anti-social behaviour and the road toll. Strategies have been put in place by the Police to reduce the numbers of such incidents and crimes occurring.

Police enquiries will be made to establish whether you are a fit and proper person to be granted the licence or certificate applied for, and whether you are considered capable of exercising proper control over the premises or the sale and supply of alcohol to patrons.

The Police may object to the granting of the licence or certificate if you have previous court convictions or if enquiries reveal that you have not operated the licence or certificate in such a way so as to contribute to the reduction of alcohol abuse in accordance with the objects of the Act. Previous convictions need not stop you getting an 'On' or 'Off' Licence or a Manager's Certificate, but they may be a factor in any decision made to object to the granting of your application.

Please complete the attached questionnaire to enable the Police to prepare a report to the District Licensing Committee in accordance with the provisions of the Act. Police Officers may visit your premises or check with you on the validity of answers given in the questionnaire.

If you have any queries please contact New Plymouth Police on 06-759 5500.



New Zealand
POLICE
Nga Pirihimana O Aotearoa

QUESTIONNAIRE FOR ALL NEW APPLICANTS

- ☐ Manager's Certificate ☐ On-Licence ☒ Off-Licence ☐ Club Licence
(Please tick appropriate box or boxes)

1. Applicant's full name: JOSEPH EMANUS
☒ Male ☐ Female
Date of birth: 30 / 11 / 76
2. Driver's licence number: DR 198179
3. Applicant's maiden or former name: N/A
4. Applicant's address (physical location): 71 WAIRUNA ROAD,
OKURUA, 4314
5. Applicant's postal address: AS ABOVE
6. Telephone number(s): Home: _____ Business: _____ Mobile: 0277774119
7. Applicant's previous address: 19 ARDEN PLACE, OKURUA
8. Previous licensed premises - Managed or Employed:
71 WAIRUNA RD, REMOTE SALES
9. Previous alcohol licenses or certificates held (date held and location):
033/OFF/467/2019, 9/4/19 OKURUA
10. Details of previous applicable courses attended:
MANAGERS CERTIFICATE COURSE APRIL 2019
11. Previous Court convictions (if in doubt, list):

OFFENCE	DATE	COURT LOCATION

New Zealand Police Questionnaire for all new applicants - continued

12. Are you a New Zealand citizen?: ☐ Yes ☒ No
(If you answered no, please answer questions 13-18.)

13. Passport number : 511 33 62 61

14. What country are you from? UK

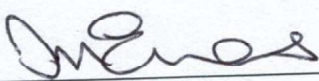
15. How long have you been in New Zealand? 7 yrs

16. What type of Visa do you hold? (i.e. Visitors Visa/Working Visa) PERM RESIDENT

17. When does your Visa expire? N/A

18. List of previous convictions from your own country:

OFFENCE	DATE	COURT LOCATION

Signature: 

Date: 6 / 4 / 20

Note: If the applicant is a company, details of principals and proposed duty managers will also be required.



Date posted on building 6/4/20

NOTICE ON BUILDING

1. Applicant details

Full legal name

THREE SISTERS BREWERY

Residential address

71 WAIRAU RD, OAKHURST, 4314

Postal address
(if different from above,
please provide postcode)

Occupation

Brewer

Has made application to the District Licensing Committee at New Plymouth for (tick one):

1a. Application type

☐ New

☒ Renewal

☐ Variation of conditions

1b. Licence type

☐ On-licence

☒ Off-licence

☐ Club licence

In respect of:

i) Premises - state the address of the premises

71 WAIRAU RD, OAKHURST, 4314

ii) Conveyance - specify the kind of conveyance, e.g. bus, boat, train

Known as (trading name):

THREE SISTERS BREWERY

The general nature of the business conducted (or to be conducted) under the licence is (type of business, e.g. BYO restaurant, hotel, tavern, restaurant, remote sales):

REMOTE SALES

The days on which and the hours during which alcohol is (or is intended to be) sold under the licence are (specify days and hours):

Days

Hours

EVERY DAY

from 0000 to 23 59

from to

from to

The application may be inspected during ordinary office hours at the office of the New Plymouth District Licensing Committee at New Plymouth District Council, Liardet Street, New Plymouth.

Any person who is entitled to object and who wishes to object to the issue of the licence may, not later than 15 working days after the date of the publication of this notice, file a notice in writing of the objection with the Secretary of the District Licensing Committee at Private Bag 2025, New Plymouth 4342.

No objection to the issue of a licence may be made in relation to a matter other than a matter specified in section 105(1) of the Sale and Supply of Alcohol Act 2012.

No objection to the renewal of a licence may be made in relation to a matter other than a matter specified in section 131 of the Sale and Supply of Alcohol Act 2012.

2. Applicant's declaration

PRIVACY STATEMENT:

Information on this form is to be provided under the Sale and Supply of Alcohol Act 2012 and is required to process your application. This information, including your personal information, has to be made available to the members of the public and media, including business organisations, upon request. In appropriate circumstances, it may also be made available to other units of the Council, the Council's approved contractors and other government agencies. Under the Privacy Act 1993, you have the right to access the personal information held about you by the Council and you can also request that the Council corrects any personal information it holds about you.

I confirm that I have read and understood the privacy statement above and that the information provided in the application form is true and correct.

JOSEPH

First name(s)

GMANS

Surname

Signature

Date

6/4/20



Te Kaunihera-ā-Rohe o Ngāmotu
NEW PLYMOUTH
DISTRICT COUNCIL
newplymouthnz.com



FORM 7

Public notice of application for on, off, or club licence or variation of conditions

Section 101, Sale and Supply of Alcohol Act 2012

1. Manner of advertising

NEWSPAPER OR INTERNET

1a. ☒ NPDC Website ☐ Taranaki Daily News ☐ North Taranaki Midweek ☐ Opunake & Coastal News

1b. Date of advertisement

6/4/20

2. Applicant details

Full legal name

THREE SISTERS BREWERY

Residential address

71 WAIRARA RD

Postal address
(if different from above,
please provide postcode)

Occupation

Brewer

Has made application to the District Licensing Committee at New Plymouth for (tick one):

2a. Application type

☐ New

☒ Renewal

☐ Variation of conditions

2b. Licence type

☐ On-licence

☒ Off-licence

☐ Club licence

In respect of:

i) Premises - state the address of the premises

71 WAIRARA RD, OAKHURST, 4314

ii) Conveyance - specify the kind of conveyance, e.g. bus, boat, train

Known as (trading name):

THREE SISTERS BREWERY

The general nature of the business conducted (or to be conducted) under the licence is (type of business, e.g. BYO restaurant, hotel, tavern, restaurant, remote sales):

REMOTE SALES

The days on which and the hours during which alcohol is (or is intended to be) sold under the licence are (specify days and hours):

Days	Hours
Every Day	from 0000 to 2359
	from to
	from to
	from to

The application may be inspected during ordinary office hours at the office of the New Plymouth District Licensing Committee at New Plymouth District Council, Lizardet Street, New Plymouth.

Any person who is entitled to object and who wishes to object to the issue of the licence may, not later than 15 working days after the date of the publication of this notice, file a notice in writing of the objection with the Secretary of the District Licensing Committee at Private Bag 2025, New Plymouth 4342.

No objection to the issue of a licence may be made in relation to a matter other than a matter specified in section 105(1) of the Sale and Supply of Alcohol Act 2012.

No objection to the renewal of a licence may be made in relation to a matter other than a matter specified in section 131 of the Sale and Supply of Alcohol Act 2012.

- Please turn over

OFFICE USE ONLY

Date received

Document #

Receipt #

Received by

Applicant ID #

Amount paid

Property ID

3. Notification

In the case of newspaper(s) publication, this is the (tick one):

☐

First

☐

Second

☐

Only - publication of this notice.

In the case of a second newspaper publication, this notice was first published on (date):

4. Applicant's declaration

PRIVACY STATEMENT:

Information on this form is to be provided under the Sale and Supply of Alcohol Act 2012 and is required to process your application. This information, including your personal information, has to be made available to the members of the public and media, including business organisations, upon request. In appropriate circumstances, it may also be made available to other units of the Council, the Council's approved contractors and other government agencies. Under the Privacy Act 1993, you have the right to access the personal information held about you by the Council and you can also request that the Council corrects any personal information it holds about you.

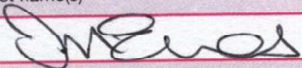
I confirm that I have read and understood the privacy statement above and that the information provided in the application form is true and correct.

JOSEPH

First name(s)

SMANS

Surname



Signature

6/4/20

Date

ODKNEA

Place where dated and signed, e.g. New Plymouth