



ACT
Government

Justice and Community Safety

APPLICATION TO AMEND A LIQUOR LICENCE OR PERMIT

Liquor Act 2010

Liquor Regulations 2010

IMPORTANT

This form is to be used to apply for an amendment to a current liquor licence or permit under the *Liquor Act 2010* (the Act). You can access the legislation and its regulation at www.legislation.act.gov.au. You may also obtain further information and forms at www.ors.act.gov.au.

PRIVACY

The Act authorises the Commissioner for Fair Trading (the Commissioner) to collect the personal information required by this form for the purposes of amending a liquor licence or permit issued under the Act. The Commissioner prevents any unreasonable intrusion into a person's privacy in accordance with the *Privacy Act 1988* (C'wlth). The Commissioner provides identifiable information to law enforcement organisations and authorised organisations that have legal authority to request information under prescribed circumstances.

CONTACT

Office of Regulatory Services

Office Hours
General enquiries
Fax number
Email
Website

GPO Box 158, Canberra ACT 2601
255 Canberra Avenue, Fyshwick ACT 2609
9:00am to 4:30pm Monday to Friday
(02) 6207 3000
(02) 6207 0424
ors.bil@act.gov.au
www.ors.act.gov.au

INSTRUCTIONS FOR COMPLETION

- Read the Further Information on the next page prior to completing the application form.
- Only complete and return the parts of the form relevant to your requested amendment. Identify on the checklist the attached supporting documentation for the appropriate amendment.
- Payment of the fee is to accompany the application form. All methods of payment will be accepted at the Office of Regulatory Services (ORS) shopfront. A cheque or money order made out to the "Office of Regulatory Services" or credit card payment authority will be accepted by post. If you fax the application form and do not complete the credit card payment authority, please post a cheque or money order to the below address attached to the payment details page. The amendment will not be authorised until payment of the application fee has been received.

Return completed forms

In Person:	By Post:	Fax to*:	Email to*:
Office of Regulatory Services 255 Canberra Avenue Fyshwick ACT 2609 Hours: 9.00am – 4.30pm	Office of Regulatory Services Business and Industry Licensing GPO Box 158 Canberra, ACT 2601	(02) 6207 0424 *Only credit card payment can be accepted via fax.	ors.bil@act.gov.au * payment can only be accepted via email if the form and the payment details page of the application form have been signed and the whole form scanned and emailed.

TRANSLATING AND INTERPRETING SERVICE

If you require further information or require advice, a language assistance service is available by phoning the Translating and Interpreting Service (TIS) on 13 14 50.

FURTHER INFORMATION ABOUT APPLYING FOR AMENDMENT TO A LIQUOR LICENCE OR PERMIT

Types of applications

Change to Suitable Persons – A licence **must** be amended if someone new is to be a close associate, influential person, or person with day-to-day control. A permit **must** be amended if someone else is to be a close associate or influential person.

If a current close associate or influential person is no longer so for the licensee, you may remove them from the licence.

Amendment of a Partnership - if a partnership is to be dissolved, but one partner is to retain the licence/permit and all other details remain the same then this form can be used to amend the licensee/permit-holder details. Alternatively if another person/s are to join the partnership, and the licensee/permit-holder name will remain the same, this form can be used to amend the licensee/permit-holder details.

If the licensee is to change, other than by the dissolution of a partnership where one partner retains the licence, an application to transfer the liquor licence must be submitted. The form is available on the ORS website. Permits **cannot** be transferred.

Change to Trading Times – request to extend or reduce trading times for the licensed or permitted premises. Where an increase in trading times is requested, you may be required to pay the difference between the paid renewal fee and the renewal fee for the amended trading times.

Change to On Licence Class – request to alter the sub-class of an on licence. The **30 day public notification period** must be complied with. For changes to the licence class (other than on licence sub-class), a new licence application must be submitted.

Alteration to Premises – request to alter the public areas of the licensed or permitted premises.

Amendment to Licence/Permit – request to amend the licence or permit in a way other than as described above (including occupancy loading, adults-only areas and conditions).

Only complete the Parts of the application form relevant to the requested amendment to your licence or permit.

Suitability Information

If there have been changes to the persons involved with the supply of liquor under the licence or permit, suitability information for the new persons must be provided with the application. If there are proposed changes to the licensed/permitted premises, these must be approved prior to the works commencing.

A **close associate** is a person who: holds or will hold an executive position in the proposed licensee/permit-holder's business; is able to exercise significant influence over the conduct of the proposed licensee/permit-holder's business because they hold or will hold a financial interest in the business; or is entitled to exercise a relevant power in the business.

An **influential person** for a corporation is: an executive officer; a person who may exercise a power in relation to the corporation's management, decision making, elections or appointments, and conduct; a related corporation; or an executive officer in a related corporation.

A person with **day-to-day control** is a person, beside the licensee, who has control of the business operated under the licence on a day-to-day basis.

Risk Assessment Management Plan

For all licences where alcohol is sold to be consumed on the premises (general, on, club or special licences) a Risk-Assessment Management Plan (RAMP) must be provided with the Application for a Liquor Licence form. A RAMP is also required for commercial permits. If the amendment/s applied for will alter the risks (e.g. longer trading hours) and/or the methods for dealing with them, an amendment to an approved RAMP form must be submitted with this application for approval by the Commissioner. The pro forma to assist the licensee/permit-holder in amending an approved RAMP can be found on the ORS website.

Licence / Permit Amendment Fee

The fee to amend a current licence or permit can be found on the ACT Legislation Register or by contacting the ORS on (02) 6207 3000.

Payment can be made by credit card, cheque or money order made payable to the "Office of Regulatory Services". EFTPOS and cash will be accepted only at the ORS shopfront at 255 Canberra Avenue, Fyshwick ACT 2609.

Personal information

Details of all licence applications, including personal information such as your name and date of birth, are collected and held by ORS with specific details made available to the public via the public register. You can ask ORS to remove or not place personal information on the public register. However, for this to occur ORS must be satisfied that the safety or well being of any person would be affected by not suppressing the information and that suppression would, on balance, be in the public interest.

You can forward reasons why your personal information should not be included on the public register to the Commissioner for Fair Trading, Office of Regulatory Services, GPO Box 158, Canberra ACT 2601.

You can also access the personal information ORS is holding about you. You can ask ORS to make appropriate amendments to ensure that the personal information is accurate, relevant, up-to-date, complete and not misleading. Contact Compliance, Office of Regulatory Services, GPO Box 158, Canberra ACT 2601, or on (02) 6207 3000 for assistance.

THE APPLICANT MUST PROVIDE THE FOLLOWING DOCUMENTS AS PART OF THE APPLICATION FOR AMENDMENT

Application Type		Attached? (✓ / ✗ / N/A)	Evidence required
Change to Suitable Person/s	The following must be provided for each new: - close associate - influential person - person with day-to-day control of the premises	<input type="checkbox"/>	Application Details (Part A)
		<input type="checkbox"/>	Personal Particulars (Part B)
		<input type="checkbox"/>	Evidence of Citizenship or Resident status (if born outside Australia)
		<input type="checkbox"/>	Two forms of identification (one to be current photographic ID)
		<input type="checkbox"/>	Police certificate issued within the previous three (3) months (use the consent form available from http://www.afp.gov.au/what-we-do/police-checks/national-police-checks.aspx - fees apply)
		<input type="checkbox"/>	Suitability Statutory Declaration (Part C)
Amendment of Partnership – Remove or add new partner as Licensee /Permit-holder	- Remaining licensee/permit-holder	<input type="checkbox"/>	Application Details (Part A)
		<input type="checkbox"/>	Dissolution of a partnership (Part D)
	- Outgoing licensee/permit-holder	<input type="checkbox"/>	Dissolution of a partnership (Part D)
	- Incoming licensee/permit-holer	<input type="checkbox"/>	Personal Particulars (Part B)
		<input type="checkbox"/>	Evidence of Citizenship or Resident Status (if born outside Australia)
		<input type="checkbox"/>	Two forms of identification (one to be current photographic ID)
		<input type="checkbox"/>	Police certificate issued within the previous three (3) months (use the consent form available from http://www.afp.gov.au/what-we-do/police-checks/national-police-checks.aspx - fees apply)
<input type="checkbox"/>	Suitability Statutory Declaration (Part C)		
Change to Trading Hours	Licensee / Permit-holder	<input type="checkbox"/>	Application Details (Part A)
		<input type="checkbox"/>	Change to Current Trading Hours (Part E)
		<input type="checkbox"/>	The Approved Risk-Assessment Management Plan (RAMP) for the premises must be amended when the trading times for a premises changes. Submit the RAMP pro forma with the relevant section amended
Change to On Licence Class	Licensee	<input type="checkbox"/>	Application Details (Part A)
		<input type="checkbox"/>	Statement of Public Notification (Part F) and copy of newspaper notice upon completion of the 30 day public notification period

Alteration to Licensed / Permitted Premises	A copy must be provided for the premises before approval will be granted to commence alterations	<input type="checkbox"/>	Application Details (<u>Part A</u>)
		<input type="checkbox"/>	Alteration to Premises Details (<u>Part G</u>)
		<input type="checkbox"/>	A copy of the approved proposed alterations plans (or concept plans if not yet approved)
		<input type="checkbox"/>	Plans of the entire premises, as they will be after alterations completed
	A copy must be provided before a final inspection and clearance by ORS	<input type="checkbox"/>	Certificate of Occupancy (for building and fit-out) following completion of the alterations
		<input type="checkbox"/>	ACTPLA certificate issued within the previous three (3) months for the proposed premises (A <i>Provision of Lease Advice – Liquor Licensing</i> form can be obtained from http://www.actpla.act.gov.au/publications_forms/forms)
		<input type="checkbox"/>	The approved RAMP for the premises must be amended (pro forma and application form on ORS website)
To be arranged before the altered premises may be used	<input type="checkbox"/>	Satisfactory inspection by ORS inspector	
Amendment to Licence or Permit	Licensee / Permit-holder	<input type="checkbox"/>	Application Details (<u>Part A</u>)
		<input type="checkbox"/>	Amendment to Licence or Permit (<u>Part H</u>)



ACT
Government

Justice and Community Safety

PART A - APPLICATION TO AMEND A LIQUOR LICENCE OR PERMIT

Liquor Act 2010

Liquor Regulations 2010

APPLICATION DETAILS – MUST BE COMPLETED

CURRENT LICENCE / PERMIT DETAILS

<input type="checkbox"/> Licence		<input type="checkbox"/> Permit		Number:	
If a Licence, select class	<input type="checkbox"/> General	<input type="checkbox"/> On	<input type="checkbox"/> Off	<input type="checkbox"/> Club	<input type="checkbox"/> Special
If you hold an on licence , please identify sub-class	<input type="checkbox"/> Bar	<input type="checkbox"/> Nightclub	<input type="checkbox"/> Café and Restaurant		
If a Permit, select type	<input type="checkbox"/> Commercial		<input type="checkbox"/> Non-commercial		

LICENSEE / PERMIT HOLDER (APPLICANT'S) NAME

REGISTERED BUSINESS NAME OF PREMISES / TRADING NAME

LICENSED / PERMITTED PREMISES ADDRESS

SUBURB

STATE

POSTCODE

ACT

CONTACT PERSON FOR LICENSED / PERMITTED PREMISES

PHONE NUMBER

()

AMENDMENT APPLICATION TYPE

- Change to Suitable Persons (complete Part B and Part C)
- Amendment of Partnership - dissolution of licensee/permit-holder (complete Part D) OR
- additional partner to be licensee/permit-holder (complete Part B and Part C)
- Change to Trading Hours (complete Part E)
- | | | | |
|---|------------------------------|------------------------------------|--|
| <input type="checkbox"/> Change of On Licence sub-class; to:
(complete Part F) | <input type="checkbox"/> Bar | <input type="checkbox"/> Nightclub | <input type="checkbox"/> Café and Restaurant |
|---|------------------------------|------------------------------------|--|
- Alteration to licensed / permitted premises (complete Part G)
- Amendment to licence /permit (complete Part H)

OFFICE USE ONLY

Received via:	Received by	Date:	Time
Counter / Fax / Email / Post		/ /	: Hrs
Entered into IBS by	Date Entered into IBS	/ /	



ACT
Government

Justice and Community Safety

PART B - APPLICATION TO AMEND A LIQUOR LICENCE OR PERMIT

Liquor Act 2010
Liquor Regulations 2010

PERSONAL PARTICULARS

(A copy of this part must be completed by each new or outgoing: partner, close associate, influential person and person with day-to-day control)

TYPE OF AMENDMENT

Add new person

Remove existing person

PERSON COMPLETING THIS PART

Close associate

Influential person

Day-to-day control (N/A
for permit)

Partner

HAVE YOU BEEN DEEMED TO BE A SUITABLE PERSON BY THE COMMISSIONER FOR AN EXISTING LIQUOR LICENCE / PERMIT?

Yes

No

Not known

TITLE (Ms, Mr, Dr)

FIRST GIVEN NAME

SECOND GIVEN NAME

FAMILY NAME / SURNAME

DATE OF BIRTH

CITY / TOWN OF BIRTH

COUNTRY OF BIRTH

NATIONALITY

AUSTRALIAN BUSINESS NUMBER (A.B.N)

RESIDENTIAL STATUS (Evidence required if not born in Australia)

Australian Citizen

Permanent Resident

HOME ADDRESS (Property Name, Unit, Flat No, Street Number, Street Name)

CITY / SUBURB / TOWN

STATE

POSTCODE

COUNTRY

POSTAL ADDRESS DETAILS (If different to home address)

CITY/ SUBURB/ TOWN

STATE / TERRITORY

POSTCODE

COUNTRY

HOME PHONE NUMBER

MOBILE NUMBER

()

WORK PHONE NUMBER

EMAIL ADDRESS

()

PREFERRED METHOD OF CONTACT Post Email Mobile Other: _____**DECLARATION**

I, _____, being licensee/permit-holder/a close associate / an influential person / person with day-to-day control as defined in the *Liquor Act 2010*:

- a) declare that I have read and understood the information provided in this form, that the details shown are true and correct;
 b) agree to abide by any conditions that form part of the licence or permit issued by the Commissioner;
 c) consent to ORS having access to the records relating to my history, only for the purposes of this application; or in relation to a liquor licence or permit subsequently granted by the Commissioner; and
 d) understand that it is an offence to provide false or misleading information.

Signed: _____ Date: / /

ACCEPTABLE FORMS OF IDENTIFICATION

You must provide at least one form of **current** photo identification, and one other document from the below list.

<u>Photo Identification</u>	Bank passbook
Driver's licence	Birth certificate/extract (certified copy)
Learner driver's licence/permit	Certificate of Australian citizenship
Proof of age or identity card issued by a State/Territory	Credit card
Passport	Credit union passbook
Firearms licence	Health benefits card
Shooter's licence	Marriage certificate
Security licence	Medicare card
Boat licence	Naturalisation certificate
Defence force ID	Public utility account
Government department ID	Rates notice
	Taxation assessment notice

FORMS OF IDENTIFICATION PROVIDED

	Type	Number	Expiry Date	Copy Attached
Primary Identification				<input type="checkbox"/>
Secondary Identification				<input type="checkbox"/>
Evidence of Citizenship				<input type="checkbox"/>

OFFICE USE ONLY

Entered into IBS by		Date Entered into IBS	
---------------------	--	-----------------------	--



ACT
Government

Justice and Community Safety

PART C - APPLICATION TO AMEND A LIQUOR LICENCE OR PERMIT

Liquor Act 2010
Liquor Regulations 2010

SUITABILITY INFORMATION – PERSON

(This part must be completed for each new: partner, close associate, influential person for a corporation, and person/s that are to have day-to-day control of the business)

STATUTORY DECLARATION

Statutory Declarations Act 1959 (Cwlth)

I, Name in full

of Full residential address

whose current occupation is

make the following declaration under the *Statutory Declarations Act 1959*;

- That I will give true answers to all questions in this statutory declaration by selecting the corresponding YES or NO box beside the questions; and
- That for each question I answer YES, I will provide full and accurate details of the facts or matters specified or associated with the question, attaching additional details on an annexure form.

1.	Have you ever been convicted or found guilty of an offence under any of the laws in any State or Territory in Australia listed below? You may refer to your attached police certificate in the attached additional details.		
	ACT <i>Liquor Act 2010</i> or any corresponding* liquor laws	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	ACT <i>Crimes Act 1900</i> or the <i>Crimes Act 1914 (Cwlth)</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	ACT <i>Criminal Code 2002</i> or the <i>Criminal Code Act 1995 (Cwlth)</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	ACT <i>Unlawful Gambling Act 2009</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	<i>Trade Practices Act 1974 (Cwlth)</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	ACT <i>Fair Trading Act 1992</i> or corresponding* fair trading laws	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	A law of the ACT or elsewhere with a maximum penalty of imprisonment for 1 year or more	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2.	Have you ever been convicted or found guilty of an offence against a law in Australia or anywhere else relating to the supply or consumption of liquor?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
3.	Have you ever been proven to be non-compliant with any legal obligation in relation to the supply of liquor?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
4.	Have you ever been refused a licence, permit or other authority (however described) in relation to the supply of liquor?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
5.	In the last five (5) years have you been declared bankrupt, personally insolvent, or been involved in the management of a corporation when the corporation was insolvent?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
* Note: a corresponding law is any law that has been or is in effect in either the ACT or another State or Territory that had or has a purpose similar to the stated law.			

For the purpose of making a decision in relation to an application to amend a licence or permit, the relevant decision maker will consider a range of matters, including a person's understanding of their obligations. To enable the relevant decision maker to assess your understanding of the Act, you are required to state your understanding of the obligations you would assume under the Act in relation to the current licence or permit.

This declaration is compulsory and will form part of your application. Please detail below your knowledge and understanding of your obligations, including any training you may have attended in relation to the Act.

My understanding of my obligations under the *Liquor Act 2010* are:

I understand that a **person who intentionally makes a false statement** in a statutory declaration is **guilty of an offence** under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

✘

Signature of person making the declaration

Declared at

On the

Day of

20

Before me ✘

Signature of witness

Full name of witness

of Full residential address

whose qualification is

Note: A person who makes a false statement in a statutory declaration is guilty of an offence under the *Statutory Declarations Act 1959* (C'wlth) and the *Criminal Code 2002* (ACT). A Court can impose substantial fines and/or a term of imprisonment for these offences.

The list of persons before whom a statutory declaration may be made are in schedule 2 of the *Statutory Declarations Regulation 1993*, found at:

<http://www.comlaw.gov.au/comlaw/legislation/legislativeinstrumentcompilation1.nsf/current/bytitle/BAF4F2D92E09F45ACA256F71004C14F1?OpenDocument&mostrecent=1>



ACT
Government

Justice and Community Safety

PART D - APPLICATION TO AMEND A LIQUOR LICENCE OR PERMIT

Liquor Act 2010
Liquor Regulations 2010

DISSOLUTION OF A PARTNERSHIP

DECLARATION – FOR COMPLETION BY LICENSEE/PERMIT-HOLDER

I, name _____, being the proposed licensee/permit-holder for premises
address _____:

- a) declare that I have read and understood the information provided in this form, and that the details shown are true and correct;
- b) declare that this application is made due to the dissolution of the partnership that currently holds the licence for the above premises;
- c) understand that I will retain the licence for the premises;
- d) agree to abide by any conditions that form part of the licence issued by the Commissioner;
- e) consent to ORS having access to the records relating to my history, only for the purposes of this application; or in relation to a liquor licence subsequently granted by the Commissioner; and
- f) understand that it is an offence to provide false or misleading information.

Signed: _____ Date: / /

DECLARATION – FOR COMPLETION BY THE EXITING PARTNER

I, name _____, being a current licensee for premises
address _____:

- a) declare that I have read and understood the information provided in this form, and that the details shown are true and correct;
- b) confirm that I am no longer a partner in partnership name _____ and that I consent to licensee name _____ retaining the licence in their name; and
- c) understand that it is an offence to provide false or misleading information.

Signed: _____ Date: / /



ACT
Government

Justice and Community Safety

PART E - APPLICATION TO AMEND A LIQUOR LICENCE OR PERMIT

Liquor Act 2010
Liquor Regulations 2010

CHANGE TO CURRENT TRADING HOURS

CURRENT TRADING HOURS ARE WITHIN THE FOLLOWING TIMEFRAMES:

Monday	<input type="checkbox"/> 7.00 am – Midnight	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Tuesday	<input type="checkbox"/> 7.00 am – Midnight	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Wednesday	<input type="checkbox"/> 7.00 am – Midnight	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Thursday	<input type="checkbox"/> 7.00 am – Midnight	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Friday	<input type="checkbox"/> 7.00 am – Midnight	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Saturday	<input type="checkbox"/> 7.00 am – Midnight	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Sunday	<input type="checkbox"/> 7.00 am – Midnight	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading

AMENDED TRADING HOURS WILL BE WITHIN THE FOLLOWING TIMEFRAMES:

Monday*	<input type="checkbox"/> 7.00 am – Midnight**	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am [^]	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Tuesday*	<input type="checkbox"/> 7.00 am – Midnight**	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am [^]	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Wednesday*	<input type="checkbox"/> 7.00 am – Midnight**	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am [^]	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Thursday*	<input type="checkbox"/> 7.00 am – Midnight**	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am [^]	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Friday*	<input type="checkbox"/> 7.00 am – Midnight**	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am [^]	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Saturday*	<input type="checkbox"/> 7.00 am – Midnight**	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am [^]	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading
Sunday*	<input type="checkbox"/> 7.00 am – Midnight**	<input type="checkbox"/> 12.01 am – 2.00 am	<input type="checkbox"/> 2.01am – 4.00 am [^]	<input type="checkbox"/> 4.01 am – 5.00 am	<input type="checkbox"/> Non-trading

* Note – On 25 April, 24 December and 31 December, standard licensed times are 7.00 am – 1.00am the following day.

** Note – Premises that sell liquor for consumption off the premises are permitted to trade until 11pm only.

[^] Note – Permitted trading hours can only be until 4.00 am.

AMENDED TRADING HOURS TO COMMENCE

/ /

If the commercial permit or licence authorises the sale of liquor to be consumed on the premises, you must amend the trading hours nominated on your approved RAMP and submit it to the Commissioner for re-approval. The pro-forma and application form can be found on the ORS website.

OFFICE USE ONLY

Entered into IBS by		Date Entered into IBS	
---------------------	--	-----------------------	--



ACT
Government

Justice and Community Safety

PART F - APPLICATION TO AMEND A LIQUOR LICENCE OR PERMIT

Liquor Act 2010

Liquor Regulations 2010

If you have applied to change an "on licence" sub-class you must comply with the public notification requirements of the *Liquor Act 2010*. Following the submission of this application to ORS a sign must be displayed on the premises for 30 days, and a notice placed in an ACT daily newspaper in accordance with the specifications outlined in the *Liquor Regulation 2010*. The sign and notice templates can be found on the ORS website.

STATEMENT OF PUBLIC NOTIFICATION

Upon completion of the 30 day public notification period, sign and return this part to the Office of Regulatory Services. You must also provide a copy of the Notice placed in a daily newspaper.

LICENSEE/S	NEW LICENCE SUB-CLASS	
	On -	
PREMISES ADDRESS		POSTCODE
DATE APPLICATION LODGED WITH ORS		DATE PUBLIC SIGN FIRST DISPLAYED AT PREMISES
/ /		/ /

CERTIFICATION

I, being the licensee, or on behalf of the licensee certify that:

- An application to amend an on licence was lodged with the Commissioner for Fair Trading on the date specified in this part; and
- From the date specified in this part, a Public Sign of the size and format required by the Commissioner and containing all the relevant details of the application was displayed on the premises or site to which the application relates;
- The Public Sign was continuously and conspicuously displayed for 30 days in accordance with the *Liquor Regulation 2010*; and
- A notice about the application was published in a daily newspaper in accordance with the *Liquor Regulation 2010*.

I understand that it is an offence under the *Criminal Code* to make a false or misleading statement.

SIGNATURE	PRINTED NAME	DATE
x		/ /
ADDRESS		POSTCODE
DAYTIME PHONE NUMBER	EMAIL	
()		

OFFICE USE ONLY

Entered into IBS by		Date Entered into IBS	
---------------------	--	-----------------------	--



ACT
Government

Justice and Community Safety

PART G - APPLICATION TO AMEND A LIQUOR LICENCE OR PERMIT

*Liquor Act 2010
Liquor Regulations 2010*

ALTERATION TO PREMISES DETAILS
(This part is to be submitted prior to commencing the alterations to the premises)

CONTACT PERSON FOR THE ALTERATIONS	CONTACT PHONE NUMBER
------------------------------------	----------------------

	()
--	-------

MOBILE	EMAIL ADDRESS
--------	---------------

--	--

EXPECTED COMMENCEMENT DATE	EXPECTED COMPLETION DATE	ESTIMATED COST
----------------------------	--------------------------	----------------

/ /	/ /	\$
-----	-----	----

DETAILS OF THE PROPOSED ALTERATIONS
(Briefly describe the nature of the proposed alterations. May refer to attached plans)

OFFICE USE ONLY

Entered into IBS by		Date Entered into IBS	
---------------------	--	-----------------------	--



ACT
Government

Justice and Community Safety

APPLICATION TO AMEND A LIQUOR LICENCE OR PERMIT

Liquor Act 2010

Liquor Regulations 2010

AMENDMENT TO A LICENCE OR PERMIT

Complete this part if you wish to amend a licence or permit in a way not already described, e.g. occupancy loading, adults-only area or a condition. Attach any supporting documentation to the application.

Provide a brief description of what you wish to have amended on your licence or permit:

Provide a rationale for why you require this amendment:

The Commissioner may only amend the licence or permit if satisfied that the following continue to be suitable persons:

- a) the licensee or permit-holder;
- b) close associates;
- c) influential persons;
- d) the premises; and
- e) for licences, the persons with day-to-day control.

It is an offence for a person to fail to inform the Commissioner about changes to their suitability information within seven (7) days of the change occurring. The maximum penalty is 20 penalty units.

I, name, being the licensee / permit-holder for premises address/business name confirm that the suitability information for persons and the permitted premises, provided in the application for a general licence/on licence/off licence/club licence/special licence/commercial permit/non-commercial permit, is still true and correct.

Signature *

Date / /

OFFICE USE ONLY

Entered into IBS by

Date Entered into IBS



ACT
Government

Justice and Community Safety

APPLICATION TO AMEND A LIQUOR LICENCE OR PERMIT

Liquor Act 2010
Liquor Regulations 2010

APPLICANT DETAILS

This page is to be completed and attached if payment is not provided with the submitted application form.

Name/Corporation:

Provide a mailing address for the tax invoice:

APPLICATION FEE QUERIES

For queries regarding the relevant application fee, please contact ORS Business and Industry Licensing during business hours quoting 'Amendment to Liquor Licence/Permit Fee'.

Office of Regulatory Services
255 Canberra Avenue,
FYSHWICK, ACT 2609

Telephone: (02) 6207 0562

Email: ors.bil@act.gov.au

The fee for this application is \$ **.00** (GST exempt)

The JACS ABN is: 41 562 230 918

APPLICATION SUBMISSION

Option 1: In Person

Office of Regulatory Services
255 Canberra Avenue
FYSHWICK ACT 2609

Option 2: Mail

Office of Regulatory Services
Business and Industry
Licensing
GPO Box 158
CANBERRA CITY ACT 2601

Option 3: Fax*

(02) 6207 0424
*Only credit card
payment can be
accepted via fax.

Option 4: Email*

ors.bil@act.gov.au

* payment can only be accepted via email if the form and the payment details page of the application form have been signed and the whole form scanned and emailed.

CREDIT CARD PAYMENT AUTHORITY

Please charge payment of the application fee to my:

VISA card

MasterCard

Credit Card Number

Expiry date

/

CARD HOLDER'S AUTHORISATION: I consent to the Office of Regulatory Services debiting the following amount from my credit card to the value of \$, **.00.**

Card holder's full name

Card holder's signature

Date

/ /