

APPLICATION FOR CLUB LICENCE OR RENEWAL OF CLUB LICENCE



Form 5, Sections 100 and 127(2), Sale and Supply of Alcohol Act 2012

Send or deliver your application to:
 The Secretary
 District Licensing Committee
 Kāpiti Coast District Council
 Private Bag 60601, Paraparaumu 5254
 175 Rimu Road, Paraparaumu 5032
 Telephone (04) 296 4700 Toll Free: 0800 486 486

For Council use
File #

Once this application is complete it is recommended that you make an appointment for a pre-lodgement meeting with a Licensing Inspector at the numbers given above.

Application forms cannot be accepted by the District Licensing Committee (DLC) over the counter until they have been signed off as complete by the Inspector and a fee category has been calculated. Instructions on how to complete this application are attached at the back of the form.

This application is made in accordance with the particulars set out below:		
1. Application Type		
<input type="checkbox"/> New Club Licence	<input checked="" type="checkbox"/> Renewal of Club Licence Licence number: 45/CERT/111/2022	<input type="checkbox"/> Renewal of Club Licence with variation of conditions Licence number:
2. Details of Applicant		
Full legal name or names to be on licence: Otaki and District Memorial RSA Incorporated.		
Whether licence already held for premises concerned: <input type="checkbox"/> Yes <input type="checkbox"/> No, and if 'Yes', state kind of licence		
3. Applicant Status by reference to section 28 of Sale and Supply of Alcohol Act 2012		
<input type="checkbox"/> Natural person(s)	<input type="checkbox"/> Private Company	
<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Public Company	
<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Incorporated Society	
<input type="checkbox"/> Other (please specify).....		
4. For Applicant that is a Natural Person(s)		
Full legal name:		
Any aliases (and/or maiden name):		
Usual residential address: Number	Street:	
Suburb:	City:	Postcode:

Sex:		Occupation:	
Date of birth:		Place of birth:	
Telephone:	Mobile:	Fax:	
Email:	Website:	Preferred mode of contact:	
5. For Applicant that is a Body Corporate, Authority under which Incorporated			
6. For Applicant that is <u>Not</u> a Natural Person(s), Details of Contact Person			
Name: <u>SHERYLL RIDLEY</u>			
Telephone: <u>06 3646221</u>	Mobile: <u>027-6801122</u>	Fax:	
Email: <u>otakirsa@xtra.co.nz</u>	Website:	Preferred mode of contact: <u>E mail.</u>	
7. Postal Address for Service			
Number/Street/PO Box: <u>84</u>		Suburb: <u>Otaki.</u>	
City:		Postcode: <u>5542</u>	
8. Business Details			
<i>Describe principal business, any other businesses</i>			
<u>CLUB RSA RESTAURANT/Entertainment CENTRE</u> <u>SALE OF ALCOHOL</u>			
9. Criminal Convictions			
<i>Does the applicant(s) have any criminal convictions (other than convictions for offences against provisions of the Land Transport Act 1998 not contained in Part 6, and offences to which the Criminal Records (Clean Slate) Act 2004 applies). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, and if "Yes", then please provide nature of the offence, details of conviction, and penalty imposed.</i>			
10. Details of Premises			
Address: Number <u>9</u>		Street: <u>Raukawa St</u>	
Suburb: <u>Otaki</u>		City:	Postcode: <u>5512</u>
Any name, trading name, or name of building:			
Trading Name:			
If not Owned by Applicant:			
Tenure: <i>(state whether to be held as leasehold, or under tenancy agreement or licence)</i>			
Full legal name of owner:			

Address: Number		Street:	
Suburb:		City:	Postcode:
Is the licence conditional on completion of building work: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, and if "Yes", state details:			
Extra ATTACHED AS PAGE 1			
11. Details of Duty Manager(s)/Proposed Manager(s) <i>If more than two certified managers please attach details separately</i>			
Full legal name: SHERYLL FRANCIS RIDLEY			
Number of manager's certificate: 32/CERT/3784/2015		Expiry Date: 19 JULY 2027	
Full legal name: JANICE SMITH			
Number of manager's certificate: 46/CERT/00090/217		Expiry Date: 28 SEPTEMBER.	
12. Club Details			
State authority under which the club is incorporated: INCORPORATED SOCIETY.			
Membership: total membership.....864....., number of members under 18 years of age.....1.....			
Contact details of club secretary - Name: SHERYLL RIDLEY			
Address: Number/PO Box 55c		Street: KIRK STREET	
Suburb: OTAKI		City:	Postcode: 5512
Telephone:	Mobile: 027 6801122	Fax:	
Email: sheryllfridley@gmail.com	Website:	Preferred mode of contact: Phone	
Is the sale of alcohol intended to be the principal purpose of the club? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, and if "No", advise the intended principal purpose of the club.			
Is the applicant engaged, or intending to be engaged, in the sale or supply of any goods other than alcohol, non-alcoholic refreshments and food, or in the provision of any services other than those directly related to the sale or supply of alcohol and non-alcoholic refreshments, and food: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, and if "Yes", advise the nature of other goods or services. This is to assess whether other goods and services provided are compatible with the sale of alcohol.			

State the days and hours proposed for sale of alcohol (this is your current licensed hours not trading hours):

MONDAY TO SUNDAY 8am - 12 MIDNIGHT
ANZAC DAY 6am TO 12 MIDNIGHT
NEW YEARS EVE 8am TO 1am THE FOLLOWING
DAY.

Do you have an encroachment licence to consume alcohol on footpath: Yes No If 'Yes', please attach and number #.....

13. Conditions

Doc attached?
Number.

- Write answer below or attach relevant documents that demonstrate compliance.
- When including attachments please number the hard copies, and in the first column circle 'Yes' box and write the document number on '#.....'

Describe experience and training of applicant:

Yes / No
#.....
2
3
4

Describe the type and range of food intended to be available for purchase:

RESTUARANT OPEN MOST NIGHTS FROM
5pm WITH A FULL MENU AND SPECIALS
OUT OF THESE TIMES WE HAVE A
BAR MENU

Yes / No
#.....
10
11
12

...Conditions contd-	Doc attached? Number.
Describe the type and range of non-alcoholic beverages intended to be available for purchase:	Yes / No #..... <u>5</u>
Describe the type and range of low-alcohol beverages intended to be available for purchase:	Yes / No <u>0</u> / <u>6</u> #.....
Describe to what extent, and where, drinking water is intended to be freely available to members (if no access to mains water supply, also advise the potability of water intended to be available): <u>AT THE TABLE IN THE MAIN CLUB ROOMS ON THE BAR NEAR THE GLASS RETURNS AND COFFEE MACHINE</u>	Yes / No #.....

...Conditions contd-	Doc attached? Number.
<p>Describe the steps intended to be taken to provide help with and information about transport options from the premises:</p> <p>WE HAVE THE COURTESY Van Running Every TUESDAY, FRIDAY AND SATURDAY Nights. We Have a Free Phone that people can use to ring a taxi or friend to take them Home.</p>	<p>Yes / No #.....</p>
<p>Describe the steps proposed to be taken to prevent the sale and supply of alcohol to prohibited people:</p> <p>People are checked to make sure they are members or affiliated members who then sign in. Anyone who looks under 25 years of age is asked for I.D.</p>	<p>Yes / No #.....</p>
<p>Describe any other steps the applicant proposes to promote the responsible consumption of alcohol (for instance host responsibility practices):</p>	<p>Yes / No #.....7</p>

...Conditions contd-	Doc attached? Number.
<p>Describe any other systems (including training systems), and staff in place (or to be in place) for compliance with the Act:</p> <p>We do training on a regular basis after each staff meeting. We also take up Clubs New Zealand Training whenever possible</p>	<p>Yes / No #.....</p>
<p>Describe any actions that have been taken to ensure the good order and amenity of the locality would not be likely to be:</p> <ul style="list-style-type: none"> reduced, by more than a minimal extent, by granting the licence; or increased, by more than a minimal extent, by the refusal to renew the licence. <p><i>This includes issues such as noise (including amplified music, people in outdoor areas or arriving or leaving premises), the effects on sensitive users within locality such as pre-schools, schools and medical centres:</i></p> <p>We always keep our noise level at a reasonable level, most times we have finished by 9:30pm. We are not close to schools or medical centre</p>	<p>Yes / No #.....</p>
<p>For Licence Renewal Only: Describe any conditions of the licence the applicant seeks to vary or cancel: <i>To be filled in for each condition the applicant seeks to vary or cancel – attach additional pages as necessary</i></p> <p>Terms of condition at present:</p> <p>Action sought: <input type="checkbox"/> Variation <input type="checkbox"/> Cancellation. If Variation, in what respect does the applicant seek to vary the condition?</p> <p>Full reasons for variation or cancellation:</p>	<p>Yes / <input checked="" type="radio"/> No #..... #..... #..... #.....</p>

14. Attachments <ul style="list-style-type: none"> When including attachments please number the hard copies, and in the first column circle 'Yes box and write the document number on '#.....' 		Doc attached? Number.
A statement, or signed declaration, regarding the premises need for an evacuation scheme, as set out in section 100(d) of the Act for new applications, or section 127(e) of the Act for renewals. A copy of the Evacuation of Declaration Scheme is available on the website.		Yes / No #...8...
Copy of planning consent – Please attach certificate to show that the proposed use meets the requirements of the Resource Management Act 1991. Not required for renewal unless the business activity or type has changed since the last version.		Yes / No #.....
Copies of all relevant building certificates consents: Please attach certificates to show that the premise meets the requirements of Building Code 2004. Not required for renewal unless structural changes have been undertaken since the last issue or renewal.		Yes / No #.....
A scale floor plan showing each area to be designated as a supervised area or restricted area, and indicating whether supervised or restricted area; and the principal entrance. Not required for renewal unless changes have been made since the last issue or renewal.		Yes / No #...9...
Copy of any certificate of incorporation (or equivalent document). Not required for renewal unless changes have occurred since the last issue or renewal.		Yes / No #.....
Names of other clubs with which club has reciprocal visiting rights for members:		Yes / No #.....
Please attach a photograph or artist's impression of the exterior of the premises or proposed premises. Not required for renewal unless major changes have been undertaken since the last issue or renewal.		Yes / No #.....
Please attach a map showing the location of the premises. Not required for renewal.		Yes / No #.....
For the following documents, if they are already attached in response to a previous section you do not need to provide twice. Just circle the Yes and repeat the document number you have given it.		
Please attach a copy of your Host Responsibility Policy. Not required for a renewal unless there have been significant changes since the last issue or renewal.		Yes / No #.....
Please attach a copy of a sample menu. Not required for a renewal unless there has been a significant change in the range and nature of the food offered since the last issue or renewal.		Yes / No #.....
If premises are owned by another party, please attach an owner's statement or copy of lease to show there is no objection from the owner to the issue of licence to this premise. Not required for a renewal unless the lease or ownership arrangements have changed.		Yes / No #.....

15. Signature of Applicant (this must be signed by applicant not their agent)

I authorise New Zealand Police to disclose any personal information it considers relevant to my application to the Medical Officer of Health and/or the Licensing Inspector for the purpose of assessing my suitability.

Name: Sheryll Ridley

Date: 8th January 2025

Signature: Sheryll

Dated at location: 9 Raukawa St Otaki

Privacy Statement

Information contained in your application and any supporting information will be held by Kapiti Coast District Council to enable your application to be processed under the Sale and Supply of Alcohol Act 2012. This information will be made available to the public on request. The information will be provided to the Kapiti Coast District Licensing Committee, the NZ Police, the Medical Officer of Health and Council's Licensing Inspectors. This information may form part of a public hearing of your application before the Kapiti Coast District Licensing Committee and may be used in the Committee's decision for your application. Decisions will be made publically available.

Council is required to keep a statutory register of all applications and the District Licensing Committee's decisions on them. Council is required to report statistics about applications to the Alcohol Regulatory and Licensing Authority. Any member of the public may request access to this information under the Local Government Official Information and Meetings Act 1987. This information may also be used under the Privacy Act 1993. You have the right to see and correct personal information that Council holds about you.

Notes

- 1 This form must be accompanied by the prescribed fee.
- 2 Within 20 working days after filing this application with the District Licensing Committee (or 10 working days if it is an application for renewal), the applicant must give public notice of it in form 7. The notice must be given in compliance with regulation 36, 37, or 38 of the Sale and Supply of Alcohol Regulations 2013 (whichever applies to this application).
- 3 Except in the case of a conveyance, within 10 working days after filing this application with the District Licensing Committee, the applicant must ensure that notice of this application in form 7 is attached in a conspicuous place on or adjacent to the site to which this application relates (unless the Secretary of the District Licensing Committee agrees that it is impracticable or unreasonable to do so).

ONCE YOUR APPLICATION IS COMPLETE, MAKE AN APPOINTMENT FOR A PRE-LODGE MEETING WITH THE LICENSING INSPECTOR.

PLEASE TELEPHONE (04) 296 4700 OR TOLL FREE: 0800 486 486.

Before lodging Application

Once this application is complete then ring and make an appointment for a pre-lodgement meeting with the Licensing Inspector. Please Telephone (04) 296 4700 or Toll Free: 0800 486 486. The application form cannot be accepted by the DLC over the counter until it has been signed off as complete by the Inspector and a fee category has been calculated.

After your Application is Lodged

Public Notices:

You are responsible for giving notice in the Kapiti Observer or Kapiti News within 20 working days of the Council formally accepting your application (or 10 working days if it is an application for renewal). Unless notified otherwise by a Licensing Inspector, the notice must be published once. The notice must be worded according to Form 7 (and in compliance with regulations 36, 37 and 38 of the Sale and Supply of Alcohol Regulations 2013). A Form 7 notice must also be displayed in a conspicuous place on the premises or conveyance to which this application relates for 10 days from the first newspaper notification.

For Office Use: Application Fee Risk Categories

- Very Low
- Low
- Medium
- High
- Very High

Application Fee Payable: \$ _____ Signature of Licensing Inspector _____

Name of Licensing Inspector _____ Date: _____

For Office Use: Customer Service Desk Checklist:

- Applicant has met with a Licensing Inspector, and fee has been calculated (as per above).
 - Fee has been paid
- Attachments checked?
- CSO has checked that all identified (Yes/No Ref#) attachments are attached OR
 - CSO has NOT checked that all identified documents are attached

Signature of CSO _____ Date: _____

Details of Duty managers

ATTACH
Page 1

Name ELIZABETH Ann PRICE

Number of manager cert 45/CERT/597/2017
Expiry Date 25th June 2027

Name VICTORIA Jane LIVINGSTON

manager cert 45/CERT/1114/2023
Expiry Date 27th June 2027

Name Kim LINDA HUGHES

managers cert 45/CERT/1013/2022
Expiry Date 25th May 2026

Name Emma TE AO CUTLER.

managers CERT 45/CERT/1129/2023
Expiry Date 28 August 2027


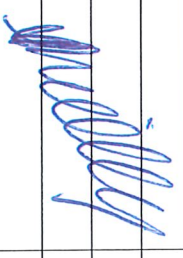
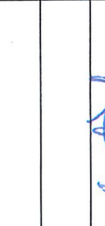
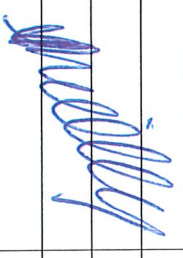
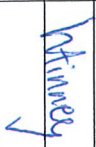

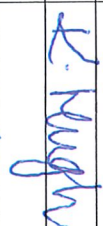
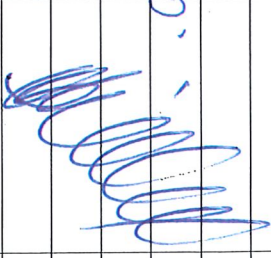

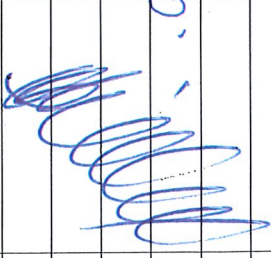

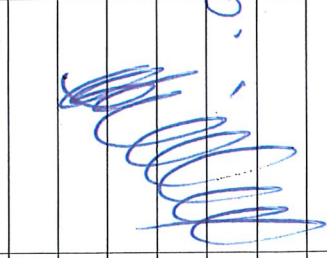
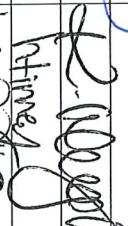
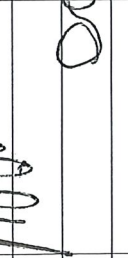
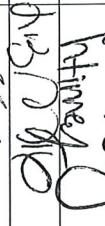
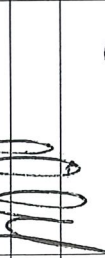

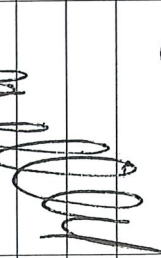

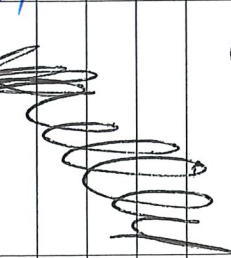
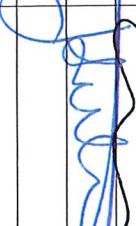
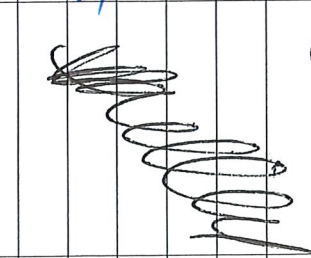
Name Leanne KAY Hutton.

managers CERT 45/CERT/182/2024
Expiry Date 12 August 2025

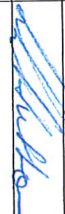
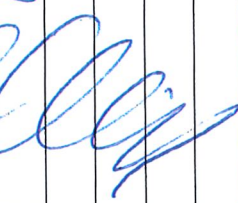
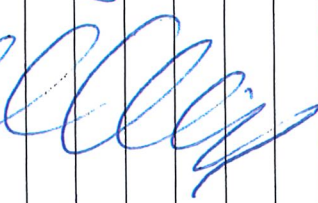

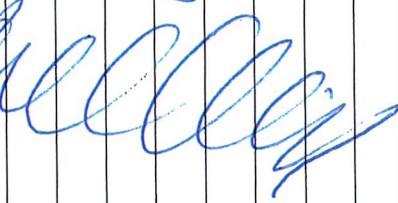
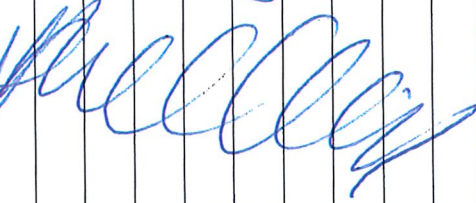
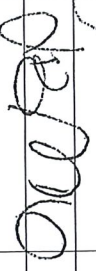
Name HAYLEE KATELYN TINNEY.

managers CERT 45/CERT/1222/2024
Expiry Date 2nd August 2025

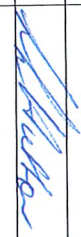

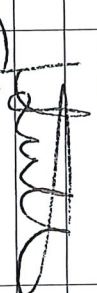
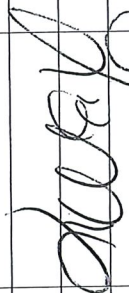
Staff training register

Date	Full name	Training type	Provided by	Employee signature	Licensee signature	Refresher due date
14/10/24	Emma Carter	ID.				
14/10/24	Lia Price	Repicrocal Rights Intoxication. Trading hours,	Sheryl Kridler			
17/10/24	Hughes Timmy	ID Repicrocal Rights Intoxication.				
17/10	Kim Hughes	Trading hours Coffee machine	John			
17/10	Keanna Hutton	Coffee machine	John			
17/10	Jace Smith		John			
11/11/24	Kim Hughes	Prob Calibration				
	Haley Timmy	Coffee machine	John			
	Keanna Hutton	Prob Calibration	John			
	Emma Carter	Coffee Machine	John			
	Jace Smith	Prob Calibration	John			

Staff training register

Date	Full name	Training type	Provided by	Employee signature	Licensee signature	Refresher due date
5/19/24		cleaning. Tem. Conf.				
✓	hearna tutton	✓				
✓	Kim Hughes	✓	Sheryll Ridley	K. Hughes		
✓	Haylee Timney	✓	Sheryll Ridley	HT		
✓	Emma Cutler	✓	Sheryll Ridley			
✓	Janice Smith	✓	Sheryll Ridley			
9/19/24	kia PRILL					

Staff training register

Date	Full name	Training type	Provided by	Employee signature	Licensee signature	Refresher due date
5/9/24	Kim Hughes	Special License Reciprocal Rights	Sheryll Ridley	K. Hughes	Ridley	
"	Hodge Timney			H		
	Leanne Tutton					
	Emma Cutler					
	Janice Smith					
9/9/24	Kira Price					

Zero Alcoholic Drinks

Gingerbeer	
Keri juice	
Red Bull	
Cans	
Coke	
L&P	
Sprite	
Gingerale	
Deep Spring	
Soda Water	
Coke Zero	
Sprite Zero	
Lemon Lime Bitters	
Cordial & Water	
Cordial & Lemonade	
Evenvale 0% wine	
Heineken Zero 330ml	
Steinlager 0% 330ml	
Free Water	



CLUB HOST RESPONSIBILITY POLICY

This Club believes that they have a responsibility to provide its members with a venue that is not only comfortable and entertaining but is safe and responsible. Our host responsibility policy reflects our commitment to providing our members with such an environment, where alcohol is served responsibly.

The Policy is written in accordance with the Sale and Supply of Alcohol Act 2012 and ensures that:

- ✓ We will make sure that our staff and management have food low alcohol and non-alcoholic drinks along with free water available at all times.
- ✓ We will make sure that there are transport options available to ensure that you get home safely.
- ✓ We will encourage people to have a designated sober driver. We will support this person by offering them a good range of non alcoholic drinks.
- ✓ All of these mentioned services will be displayed prominently with signs throughout the club service areas, in conjunction with all other signage required under the Sale and Supply of Alcohol Act 2012.
- ✓ The club cannot serve intoxicated persons. Not only is it against the law, but it is against our policy of providing you with a safe drinking environment. All of our staff and management are trained and supported to make sure this is followed.
- ✓ If you are under the age of 18 we cannot serve you either. This is also against the law. If we are in doubt about your age, we will ask for identification.
- ✓ Host Responsibility is about making sure that everyone has a good time and is able to get home safely. It could save our licence, and it could save your life.

Fire Evacuation Statement

This statement must be accompanied with all new or renewal applications for on-licence (including BYO licences), off-licence, special and club licences in accordance with section 100 and 127 of the Sale and Supply of Alcohol Act 2012.

1. Applicant details

Premises name: Otaki RSA

Applicants name: Otaki Memorial And Districts RSA INC
(Individual or Company)

Premises address: 9 Raukawa Street
Otaki 5512

Contact phone: Home 06 3858221 Mobile: 027 6801122

Contact email: otakirsa@xtra.co.nz

2. Fire evacuation scheme

Most commonly a building requires an evacuation scheme because it is used for the following purposes:

- The gathering together, for **any purpose of 100 or more persons:**
- Providing **employment facilities for 10 or more persons:**
- Providing **accommodation for more than 5 persons** (other than in 3 or fewer household units):
- **Storing or processing hazardous substances in quantities exceeding the minimum amounts** prescribed in Schedule 3 of the Fire and Emergency New Zealand (Fire Safety, Evacuation Procedures, and Evacuation Schemes) Regulations 2018.

See Fire and Emergency New Zealand Act 2017 section 75 and 76 for further information.

*If you are unsure that the building has or requires an approved evacuation scheme, check with the **building owner**. For the requirements of an evacuation scheme or to apply for an evacuation scheme, refer to Fire and Emergency New Zealand web site. **www.fireandemergency.nz** or Contact Fire and Emergency New Zealand, wellingtondistrict-rteams@fireandemergency.nz.*

Statement

I hereby state that (tick one):

the **owner** of the building in which the premises are situated provides and maintains an evacuation scheme as required by section 76 of the Fire and Emergency New Zealand Act 2017;

OR

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

OR

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

NOTE:


If an approved evacuation scheme is not required, the building must have evacuation procedures that meet Part 1 of the Fire and Emergency New Zealand (Fire Safety, Evacuation Procedures, and Evacuation Schemes) Regulations 2018 – this does not require approval by Fire and Emergency New Zealand.

Name:

Sheryll Ridley Manager/Secretary

Signature:

Add



Date:

Add

Submitting applications

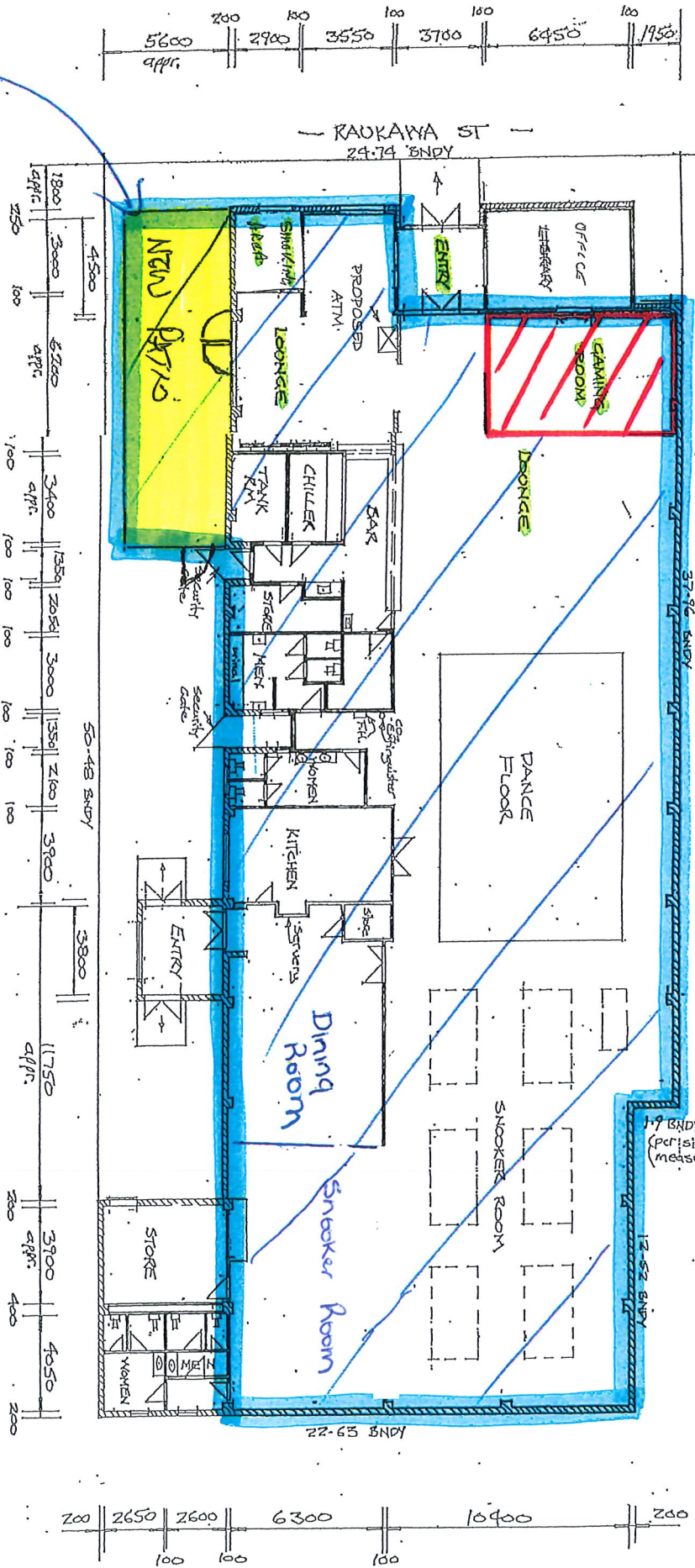
Email completed forms to: licence.application@kapiticoast.govt.nz

Post to:

Alcohol Licensing Team
Kāpiti Coast District Council
Private Bag 60601
Paraparaumu 5254

or deliver to:

Kāpiti Coast District Council
175 Rimu Road
Paraparaumu



2m fence access from bus stop driveway

OTAKI R.S.A.

FLOOR PLAN

1:200



licensed Area

Restricted

Unauthorized

23/05/2012

PTA

Avelo So Cuisine

Culinary Artist Fabrice Solvet
Restaurant & Catering

PHONE

06 364 0093 / 022 054 3752

FOR BOOKINGS

Kid's/light meals
\$15.90 menu... * ALL MEALS SERVED WITH FRIES & SAUCE *

- Macaroni & Cheese
- Hoki Bites w/ tartare sauce
- Chicken Tenders w/ tomato sauce
- Hamburger w/ cheese

* HOT FRIES BOWL \$9.00

* GARLIC BREAD \$7.50

* PLAIN WEDGES \$13.00

* LOADED WEDGES \$11.90
(w/ bacon cheese, sour cream & sweet chilli sauce)

SIDES

- FRIES \$6.50
- GARDEN SALAD \$6.50

main meals

- BANGERS ON MASH \$19.00
served w/ peas & gravy
- SALT & PEPPER CALAMARI \$23.00
served w/ fries, salad & tartare sauce
- BBQ PORK RIBS \$25.00
served w/ fries, coleslaw & bbq sauce
- GOURMET BEEF BURGER \$25.50
meat patty, cheese, bacon, lettuce, caramelized onion, mayo served w/ fries & bbq sauce
- SIRLOIN STEAK \$26.90
served w/ fries, a fried egg, onion rings, garden salad, garlic butter or mushroom sauce
- FISH OF THE DAY (please enquire) \$34.90
served w/ spring onion mashed potato, steamed broccoli and tarragon hollandaise sauce

ABEL SO SPECIALS

WEEKLY SPECIALS

TUESDAY - \$20 ROAST BUFFET
(PORK OR CHICKEN, ROAST VEGETABLES, STEAMED VEGES,
PLUS COMPLIMENTARY DESSERT)

WEDNESDAY - \$20 STEAK NIGHT
(SIRLOIN STEAK, FRIES, FRIED EGG, ONION RINGS,
GARLIC BUTTER OR MUSHROOM SAUCE)

THURSDAY - \$20 RIB NIGHT
(BIG PORK RIBS, FRIES, COLESLAW & BBQ SAUCE)

FRIDAY - \$20 PORK BELLY BURGER
(CARAMELISED PORK BELLY, MASHED POTATO, FRIED CABBAGE,
GRUYERE)

SATURDAY - \$20 NIGHT
(PULLED PORK BURGER, COLESLAW, FRIES, BBQ SAUCE)



AFTER HOURS BAR MEALS

Cottage pie

Butter chicken

Macaroni cheese

\$6.00

Steak & cheese pie

\$3.50

Soup & garlic bread

\$8.00



Food is available at all times
Just ask our friendly bar staff