APPLICATION FOR ON-LICENCE OR RENEWAL OF ON-LICENCE

Telephone (04) 296 4700 Toll Free: 0800 486 486



Form 3, Sections 100 and 127(2), Sale and Supply of Alcohol Act 2012

Send or deliver your application to:	For Council use
The Secretary District Licensing Committee	File #
Kāpiti Coast District Council	
Private Bag 60601, Paraparaumu 5254	
175 Rimu Road, Paraparaumu 5032	

Once this application is complete you may 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 particular set out below:			
1. Application Type			
□ New On-Licence	Renewal of On-Licence Licence number:ON911	☐ Renewal of On-Licence with variation of conditions Licence number:	
2. Endorsements			
Tick the appropriate box if y	ou want an endorsed licence only		
X Allow BYO	□ On-Licenc	e plus Caterer's On-Licence	
☐ BYO Licence only	□ Caterer's	On-Licence only (no restaurant)	
3. Details of Applicant			
Full legal name or names to be on licence (if a company, must be company name): Metlifecare Retirement Villages Limited			
Whether licence already held for premises or conveyance concerned: XYes No, and if 'Yes' state kind of licence			
4. Applicant Status: by reference to section 28 of Sale and Supply of Alcohol Act 2012			
☐ Natural person(s)	***************************************	Private Company	
☐ Body Corporate		Public Company	
☐ Partnership	С	Other (please specify)	

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5. For Applicant that is a Natural Person(s):			
Full-legal name: N/A			
Any aliases (and/or maiden name):			
Usual residential address: Number	Street:		
Suburb:	City:		Postcode:
Sex:	Occupation:		
Date of birth:	Place of birth:		
Telephone:	Mobile:		
Email:		Preferred mo	ode of contact:
6. For Applicant that is a Body Corporate, Auth	nority under which Incorporated:		
N/A			
7. For Applicant that is <u>Not</u> a Natural Person(s)			
Name:	Designation/Position:		
Telephone:	Email:	Email:	
Mobile:	Preferred mode of contact:		
8. Postal Address for Service:			
Number/Street/PO Box:1 Henley Way	Suburb:		
City: Paraparaumu	Postcode: 5032		
9. Business Details:			
Retirement Village			
10. Criminal Convictions:			
Does the applicant(s) have any criminal convictions not contained in Part 6, and offences to which the 0 please provide nature of the offence, details of conv	Criminal Records (Clean Slate) Act 2		
11. For a Company: whether Incorporated under	the Companies Act 1993 or Equivale	ent Foreign Legislation	
Full Legal Names of Directors:			

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12. For a Private Company Incorporated under the Companies Act 1993:			
Authorised capital: N/A Paid up capital:			
Name:		Address: Street number	
Street:		Suburb:	
City:		Postcode:	
Date of birth:		Place of birth:	
Designation:		Face value of shares held:	
13. For a Partnership:			
Full legal name of partner: N/A			
Usual residential address: Number	Str	eet:	
Suburb:	City	y:	Postcode:
Full legal name of partner:			
Usual residential address: Number	Str	eet:	
Suburb:	City	y:	Postcode:
14. Details of Premises (if not a Conveyance)			
Address: Number N/A	Str	eet:	
Suburb:	City	y:	Postcode:
Trading Name:			
If not Owned by Applicant:			
Tenure: (state whether to be held as leasehold, or under tenancy agreement or licence)			
Full legal name of owner:			
Address: Number	Address: Number Street:		\
Suburb:	City	y:	Postcode:
Is the licence conditional on completion of building work: Yes No, and if "Yes", state details:			
15. Details of Conveyance			
Kind: (eg, ship, railway carriage, bus, etc)N/A			
Tenure: (state whether owned by applicant, or to be open	Tenure: (state whether owned by applicant, or to be operated under charter, lease, or licence)		

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If not Owned by Applicant:			
Full legal name of owner:			
Address: Number	Street:		
Suburb:	City:		Postcode:
Any registration number:			
Any home base address:			
Any name used or proposed for conveyance:			
Is the licence conditional on completion of construction w	/ork: □ Yes □ No , and if "Yes", s	tate details:	
16. Details of Duty Manager(s)/Proposed Manager(s) If more than two certified manage	ers please attach details	separately
Full legal name: Peter Meredith Keedwell			
Number of manager's certificate:45/CERT905/2021		Expiry Date:16/02/2025	5
Full legal name: Carolynne Mae Parsons		T	
Number of manager's certificate:45/CERT970/2021 Expiry Date:22/03/2026		3	
17. Business Details			
Social Club at Retirement Village			
Is the sale of alcohol intended to be the principal purpose of business: XYes \square No , and advise the intended principal purpose of business (for example: sale of alcohol, sale of food; entertainment; accommodation). Resident Functions and get togethers for the use of residents in the village.			
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: Yes 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.			

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State the days and hours proposed for sale of alcohol (this is your current licensed hours not trading hours):		
Monday – Sunday 9am to 12 midnight		
Do you have an encroachment licence to consume alcohol on footpath: Yes No If 'Yes', please attach and no	umber #	
18. 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	
Have held their licence since 2021 Understand Host Responsibility Policy Training Health Promotion	#	
Onderstand Host responsibility Folicy Halling Health Fronteion		
Describe the type and range of food intended to be available for purchase:	Yes / No	
	#	
Hot Food available is Butter Chicken, Macaroni and Roast dinners when available		
Describe the type and range of non-alcoholic beverages intended to be available for purchase:	Yes / No	
	#	
Coke sugar free and normal , Schweppes ginger ale , Lemonade , Tonic , Soda water, Bundaburge , Lemon Lime and Bitters, Pink Grapefruit		
Describe the type and range of low-alcohol beverages intended to be available for purchase:	Yes / No	
	#	
White Wine 0%, Curious AE 0%, G/T 0%, Peroni 0%, Heineken 0%		
Describe to what extent, and where, drinking water is intended to be freely available to patrons (if no access to	Yes / No	
mains water supply, also advise the potability of water intended to be available):	#	
Will have two Functioning water coolers either side of the Bar we also have Hall Kitchenette with tea and coffee making facilities available.		

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Conditions contd-	Conditions conta-
Describe the steps proposed to be taken to prevent the sale and supply of alcohol to prohibited people:	Yes / No #
Duty Managers observe and do not serve alcohol to prohibited	
Describe any other steps the applicant proposes to promote the responsible consumption of alcohol (for instance host responsibility practices):	Yes / No #
Duty managers create a positive environment to where intoxication is not tolerated & can intervene to prevent any risk of intoxication by observing the patrons of the bar. Do not serve minors	
Describe any other systems (including training systems), and staff in place (or to be in place) for compliance with the Act:	Yes / No #
Host Responsibility & Service Wise Bar Staff have regular meetings to understand any further training requirements which may be needed.	
Describe any actions that have been taken to ensure the good order and amenity of the locality would not be likely to be: 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.	Yes / No #
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:	
None there have been no changes	
For Licence Renewal Only: Describe any conditions of the licence the applicant seeks to vary or cancel: To be filled in for each condition the applicant seeks to vary or cancel – attach additional pages as necessary Terms of condition at present: N/A	Yes / No # #
Action sought: YES Variation . If Variation, in what respect does the applicant seek to vary the condition?	# #

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Full reasons for variation or cancellation: Variation of Alcohol Licenced Area. New ground floor layout for Kapiti Village Metlifecare, the renovations for the cafe dinning area are now complete.	
 19. Attachments (if Not a Conveyance) 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 #
Copy of planning consent: Please attach certificate that 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 #N/A
Copies of all relevant building certificates consents: Please attach certificates that show the premises meet the requirements of Building Code 2004. <i>Not required for renewal unless structural changes have been undertaken since the last issue or renewal.</i>	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 #N/A
For body corporate applicant, please attach a copy of certificate of incorporation (or equivalent document). Not required for renewal unless changes have occurred since the last issue or renewal.	Yes / No #N/A
Advise if a Crime Prevention Through Environmental Design (CPTED) assessment has been undertaken or any improvements to the design and layout in accordance with CPTED. \square Yes \square No, and if 'Yes' attach a copy, and if 'No' complete a CPTED checklist (see HPA and the Ministry of Justice websites for more information).	Yes / No #N/A
Please attach a photograph or artist's impression of the exterior of the premises or proposed premises. <i>Not required for renewal unless major changes have been undertaken since the last issue or renewal.</i>	Yes / No #N/A
Please attach a map showing the location of the premises. Not required for renewal.	Yes / No #N/A
For the following documents, if they are already attached in response to a previous section you do not need to provid Just circle the Yes and repeat the document number you have given it.	e twice.
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 #N/A
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 #N/A
If the 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. <i>Not required for a renewal unless the lease or ownership arrangements have changed.</i>	Yes / No #N/A

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20. Attachments (Conveyance)		Doc attached?
 When including attachments please number the hard copies, and in the first column circle 'Yes box and write the document number on '#') 		Number.
 For renewal applications you only need to attach cop the last version you provided to the DLC 		
Floor plan showing each area to be designated as a supervise		Yes / No
supervised or restricted area. Not required for renewal unless renewal.	changes have occurred since the last issue or	#
For body corporate applicant, copy of certificate of incorporation renewal unless changes have occurred since the last issue or		Yes / No #
Please attach a photograph or artist's impression of the exterior unless major changes have been undertaken since the last is		Yes / No #
For the following documents, if they are already attached in re Just circle the Yes and repeat the document number you have		e twice.
Please attach a copy of your Host Responsibility Policy. Not r significant changes since the last issue or renewal.	required for a renewal unless there have been	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 the conveyance is 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 conveyance. Not required for a renewal unless the previous lease has expired. Yes \ No #		
21. Further Details where Applicant is a Company Include full details of each person who holds 20% or more of t	he shares, or of any particular class of shares, issued t	by the company.
Name:	Address:	
Suburb:	City:	
Postcode: Date of birth:		
Place of birth: Designation:		
Name: Address:		
Suburb: City:		
Postcode: Date of birth:		
Place of birth: Designation:		
Name: Address:		
Suburb: City:		
Postcode:	Date of birth:	
Place of birth: Designation:		
Are additional sheets attached? Yes / No - Doc number #		

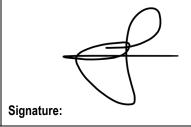
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22. Further Details where Applicant is a Partnership			
Name:	Address:	Address:	
Suburb:	City:		
Postcode:	Date of birth:		
Place of birth:	Date:	Signature:	
Name:	Address:		
Suburb:	City:		
Postcode:	Date of birth:		
Place of birth:	Date:	Signature:	
Name:	Address:		
Suburb:	City:		
Postcode:	Date of birth:		
Place of birth:	Date:	Signature:	
Are additional sheets attached? Yes / No - Doc number #			
23. 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: Julie Montgomery

Date: 24 January 2025



Dated at location: Kapiti Village Metlifecare

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.

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Met	ethod of payment (must be m	ade at time of application)	
	I have paid at a Kāpiti Coas	t District Council Service Centre when I delivered this application.	
*	The state of the s	nsfer (Council Bank Account Number: 03-0732-0306101-00) and quoted my name and lds; and PO number POMRV000059562	
	☐ I have included proof o	f electronic payment with this application.	
	I have enclosed a cheque w	rith this form.	
Ηον	ow I would like to receive my	alcohol licence (please select one only)	
X	•	nce – please contact me when it is ready by Phone or Email	
	OR		
Ш	☐ Please post my alcohol licence to me.		
		is complete, if you would like to make an appointment for an optional pre-lodgement meeting with the ephone (04) 296 4700 or Toll Free: 0800 486 486.	
2	This form must be accompanied by the prescribed fee. This form must be accompanied by the required attachments (refer Points 19 or 20). Within 20 working days after filing your application with the District Licensing Committee (or 10 working days if it is an application for renewal), the application must be publically notified. The public notice template will be provided on receipt of your application by the Alcohol Licensing Team.		
For	or Office Use: Application Fee R	isk Categories	
	□ Very Low	☐ High	
	□ Low	☐ Very High	
	□ Medium		
Арр	plication Fee Payable: \$	Signature of Licensing Inspector	

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Date:

Name of Licensing Inspector_

Guidance for Completing On-Licence Application Form

Background

The object of the Sale and Supply of Alcohol Act 2012 is that the sale, supply, and consumption of alcohol should be undertaken safely and responsibly; and the harm caused by the excessive or inappropriate consumption of alcohol should be minimised.

It is a legal requirement of the Sale and Supply of Alcohol Act 2012 that you must have a licence before you can sell or supply alcohol.

Before lodging application

Once this application is complete then you must 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.

If your application is regarding a 'premise - not a conveyance', you should also apply for certificate of compliance with the Resource Management Act and the Building Act from the Kapiti Coast District Council. A 'conveyance' means an aircraft, coach, ferry, hovercraft, ship, train, or other vehicle, used to transport people.

Cor	npleting your application	Who should complete which fields
1	Type of Application	All applicants to complete.
2	Endorsements	Only complete if seeking an endorsement for BYO or Caterer. This is for restaurants who only allow BYO and caterers who only cater.
3	Details of Applicant	All applicants to complete. If a company receives profits then apply in company name.
4	Applicant Status	All applicants to complete
5	For Applicant that is Natural Person(s)	Only complete if applicant is a natural person. A natural person is an individual. Complete all sections.
6	For Applicant that is Body Corporate	Only complete if applicant is a body corporate.
7	For Applicant that is <u>not</u> a Natural Person(s)	Only complete if applicant is a body corporate, partnership, private company or public company. Complete all sections.
8	Postal Address for Service	All applicants to complete.
9	Business Details	What is your principal business? For example restaurant/ entertainment centre/sale of alcohol (ie tavern).
10	Criminal Convictions	All applicants to complete.
11	For a Company full legal names of directors	Only complete if applicant is a public or private company.
12	For a Private Company	Only complete if applicant is a private company incorporated under the Companies Act 1983.
13	For a Partnership	Only complete if applicant is a partnership.
14	Details of Premises (if not a conveyance)	All applicants must complete either 14 or 15.
		A 'conveyance' is a premise which is used to transport people such as an aircraft, coach, ferry, hovercraft, ship, train, or other vehicle.
15	Details of Conveyance	A 'premise - not a conveyance', is any other type of premise for which you are seeking a Licence.

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16	Details of Duty Manager(s)/Proposed Managers	All applicants to complete. If more than 2 please attach details separately.	
17	Business Details	All applicants to complete.	
18	Conditions	All applicants to complete.	
19	Attachments (if not a conveyance)	All	
20	Attachments (conveyance)	All applicants must complete either 19 or 20 (see 14/15).	
21	Further Details where Applicant is a Company	Only complete if private or public company.	
22	Further Details where Applicant is a Partnership	Only complete if a partnership.	
23	Signature of Applicant	All applicants to complete.	

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) and the Council will sent you a template to complete this, along with further information. Unless notified otherwise by a Licensing Inspector, the notice must be published twice and there must not be less than five days and not more than 10 days between the two dates of publication. The notices 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.

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KAPITI VILLAGE BAR MENU

• Butter Chicken ready meals

• Macaroni Cheese ready meals

Roast Dinner

Meat Pies

\$8.00 each

\$8.00 each

\$8.00 each

\$8.00 each

Kapiti Village Bar

WINE

Sauvignon Blanc, Pinot Gris \$5.00 Pinot Noir, Shiraz, Merlot, Red: \$5.00 Cab Sav. Rose: \$5.00 Lindauer (mini) Bubbly: \$6.00 Sparkling Moscato Beer: \$4.00 SPIRITS Straight \$3.00 (with mixer) \$6.00 KGB Black Russian (can) \$5.00 KGB Jim Beam & Cola \$5.00 Gin & Tonic (can) \$6.00 Cider \$4.00 Soft Drinks \$3.00

Low & Zero Alcohol -Beer, Wine available



Select all that apply:

protection system agent.

Notification of building changes

Complete this form when notifying Fire and Emergency New Zealand of a change to your building, or the purposes of which some or all of it's used, that may impact your evacuation scheme.

Send the completed form to the Regulatory Compliance Group, either by email to RCG@fireandemergency.nz or post to Regulatory Compliance Group, Fire and Emergency New Zealand, PO Box 68444, Victoria Street West, Auckland 1142. You should do this before the change to the building or its use occurs, or otherwise as soon as practicable.

Part A				Owner details
Owner name Kapit		ti Village Metlifecare		
Postal address 1 Her		nley Way off Guilfor	d Drive Paraparaumu	
Phone number 04 29		96 1790	Mobile numbe	r 027 412 3974
Fax number	N/A			
Email address jule		es.montgomery@metlifecare.co.nz		
Part B				Building details
Evacuation scheme reference #		EVAC02389-09		
Building name		Metlifecare Kapiti		
		The Village Centre	Building	
Street address		1 Henley Way		
		Paraparaumu		
Part C		发表的理想是由		Contact details for building
Contact person's name	Lucas Goodwin on behalf of Safety First			
Phone number			Mobile numbe	r 0273042506
Email address lucas		s@safetyfirst.co.nz		

☐ The means of escape from fire for the building is to be altered under section 107 of the Building Act 2004.

The building's fire detection and suppression system will be or is non-operational for a period of time.

Note: For certified systems, you must complete the Fire Protection System Shutdown form from your fire

\boxtimes	Building work is to be carried out on the building under section 112 or 133AT of the Building Act 2004, affecting the building's means of escape from fire.
	The building's life is to be extended under section 116 of the Building Act 2004.
	The occupancy of the building is changing to the extent that the building's means of escape from fire will be materially affected.
	There are to be changes to the place or places of safety specified in the evacuation scheme.
	There is to be a change in purpose or activities within the building.
	The building no longer requires an evacuation scheme, e.g. the building is to be demolished or will no longer be used for a purpose under section 75(1) of the Fire and Emergency New Zealand Act 2017.

Part E Details of changes

Enter details of the change, e.g. how long the detection and suppression systems will be non-operational and what you are doing to manage evacuations during the outage:

There is currently construction undertaken in the building. There has been a temporary partition wall installed in the south of the building which, prevents occupants from internally travelling through (pics attached to email notification) the construction site and out the main entrance. The exit sign above the old egress route has been temporarily covered.

One manual call point in the existing front entrance has been temporarily removed while building works is complete. No other manual call point in the building has been removed at this point.

10 February 2023 2

Part F Owner or contact person signature

Date: 24

TRIAL EVACUATION ASSESSMENT REPORT



Building Name: Metlifecare Kapiti Village Centre

Address: 1 Henley Way, Paraparaumu, Paraparaumu

EV Ref

Building Owner: Metlifecare Retirement Villages Ltd

Postal Address:

Contact Person Details: Lucas Goodwin, Safety First

Trial Evacuation Details			
Date Of Trial Evacuation:		31/10/2024	
Start Time:		14:00 PM	
Tim	e Taken to Evacuate:	03 min 32 sec	
Any	one Injured?	No	
Sec	tion A - Pre-Trial Evacuation	Inspection	
1	Was an inspection carried out	of assembly area/s and outside escape routes from the building?	Yes
2	Were contractors in the buildin	g for the purpose of the trial evacuation accounted for?	Yes
Sec	tion A - Trial Evacuation Out	come	
1	Were any injuries reported as	occurring during this trial evacuation?	No
2	Was a 111 Call made to FENZ	??	Yes
111 War	rdens should ask if a call has be	111 was made. ponsibility, and whoever discovers smoke or fire should that be the situat een made when reporting clearance at the wardens reporting point. Anyon r evacuating using a cell phone.	
3	B Did occupants use the correct fire egress routes (i.e. nearest exit, not lifts)?		Yes
4	Was the building evacuated immediately?		Yes
5	Were occupants carrying drinks/food/large items?		No
6	Are there procedures in place for anyone who cannot self-evacuate, and if so, were the procedures followed?		Yes
	ere are procedures in place for a ded assistance.	nyone who cannot self-evacuate, but at the time of the trial evacuation n	o one
7	Were the Chief Wardens dutie	s carried out correctly?	Yes
adju	usting the evacuation check she	quired duties including, ensuring a 111 call to Fire and Emergency NZ wa et after receiving clearance reports from the wardens, appointing monitor re and Emergency NZ on their arrival.	
8	Did Wardens carry out their du	ities correctly (e.g. Clear designated area, Report, Remain Available)?	Yes
9		b be clear in accordance with the evacuation scheme (i.e all areas d or otherwise including toilets)?	Yes
10	Was Chief Warden/Warden ID	worn (e.g. hardhats, armbands, vests)?	Yes
11	Was the correct assembly area	a/s used?	Yes
11	,		

Sec	Section A - Trial Evacuation Outcome		
13	Was the method of accounting for areas cleared (e.g evacuation board/tags/folder) used correctly and re-instated following the evacuation?	Yes	
14	If an assistance register is in use, was it available during the evacuation?	Yes	
15	Did any equipment to assist with the evacuation work as intended?	NA	
Section B - Building Assessment			
1	Were emergency procedures/fire action notices displayed in the building?	Yes	
2	Was the fire alarm/method of alerting clearly heard in all areas of the building?	Yes	
3	Were there any hazards or obstructions in exit ways noted during the trial evacuation?	Yes	
There is currently construction being carried out internally on this building. The area that is affected has restricted access so residents and visitors cannot enter. Contractors had a display of all construction hazards on site at the time of the trial evacuation.			
4	Were all doors (including fire/smoke stop) closed during the evacuation?	Yes	
Section C - General Comments			
1	Are there any further observations/comments regarding the trial evacuation?	Yes	
We take this opportunity to congratulate the chief warden and wardens on a very efficient trial evacuation.			
5	When was the last training session (trial evacuation) for permanent occupants held?	Yes	
The	The last scheduled trial evacuation and wardens debrief was held on 27/05/2024.		



NOTICE OF RENEWAL OF MANAGER'S CERTIFICATE

Section 226, Sale and Supply of Alcohol Act 2012

CAROLYNNE MAE PARSONS

Your manager's certificate 45/CERT/970/2021 is renewed.

Subject to the requirements of the Act relating to the payment of fees, and to the provisions of the Act relating to the suspension and cancellation of managers' certificates, this certificate expires on **22 March 2026** unless again renewed.

Dated at Paraparaumu on 6 April 2023

Common Seal of of white state of the seal of the seal

Secretary
Kapiti Coast District Licensing Committee

Note: This certificate replaces the original certificate number 45/CERT/970/2021 issued on 22 March 2022 at Paraparaumu by the Kapiti Coast District Licensing Committee



NOTICE OF RENEWAL OF MANAGER'S CERTIFICATE

Section 226, Sale and Supply of Alcohol Act 2012

LOUISE PATRICIA SCOTT

Your manager's certificate 45/CERT/907/2021 is renewed.

Subject to the requirements of the Act relating to the payment of fees, and to the provisions of the Act relating to the suspension and cancellation of managers' certificates, this certificate expires on **16 February 2025** unless again renewed.

Dated at Paraparaumu on 4 April 2022

Secretary Kapiti Coast District Licensing Committee

Note: This certificate replaces the original certificate number 45/CERT/907/2021 issued on 17 February 2021 at Paraparaumu by the Kapiti Coast District Licensing Committee



ornmon

seal

NOTICE OF RENEWAL OF MANAGER'S CERTIFICATE

Section 226, Sale and Supply of Alcohol Act 2012

MICHAEL JOHN WILKINSON

Your manager's certificate 45/CERT/906/2021 is renewed.

Subject to the requirements of the Act relating to the payment of fees, and to the provisions of the Act relating to the suspension and cancellation of managers' certificates, this certificate expires on **16 February 2025** unless again renewed.

Dated at Paraparaumu on 15 March 2022

Secretary

Kapiti Coast District Licensing Committee

Note: This certificate replaces the original certificate number 45/CERT/906/2021 issued on 17 February 2021 at Paraparaumu by the Kapiti Coast District Licensing Committee



NOTICE OF RENEWAL OF MANAGER'S CERTIFICATE

Section 226, Sale and Supply of Alcohol Act 2012

PETER MEREDITH KEEDWELL

Your manager's certificate 45/CERT/905/2021 is renewed.

Subject to the requirements of the Act relating to the payment of fees, and to the provisions of the Act relating to the suspension and cancellation of managers' certificates, this certificate expires on **16 February 2025** unless again renewed.

Dated at Paraparaumu on 15 March 2022

Secretary

Kapiti Coast District Licensing Committee

Note: This certificate replaces the original certificate number 45/CERT/905/2021 issued on 17 February 2021 at Paraparaumu by the Kapiti Coast District Licensing Committee

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:	Kapiti Village Methilecare
Applicants name: (Individual or Company)	Metholecare CTD
Premises address:	1 Henley Way, Paraparaumu
Contact phone:	Home: 042961790 Mobile:
Contact email:	Jules. montgomery@metlilecore.co.nz Kapitireception @ metlilecore.co.nz
	Kepitiveception @ metilecore.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-rrteams@fireandemergency.nz.

Statement
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;
<u>OR</u>
because of the building's current use, its owner is not required to provide and maintain such a scheme;
<u>OR</u>
because of the nature of the building, its owner is exempt from the requirement to provide and maintain such a scheme.
NOTE:
f 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:	Julie Montgomeny
Signature:	I I
Date:	27-01-2025-

Submitting applications

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

Post to:

or deliver to:

Alcohol Licensing Team

Kāpiti Coast District Council

Private Bag 60601

Paraparaumu 5254

Kāpiti Coast District Council

175 Rimu Road

Paraparaumu

