APPLICATION FOR ON-LICENCE OR RENEWAL OF ON-LICENCE



Form 3, 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

1 6 JAN 2025

For	Council use
File	#

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

Received by Kapiti Coast District Council

at Paraparaumu

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: 0 1850	☐ Renewal of On-Licence with variation of conditions Licence number:
2. Endorsements		
Tick the appropriate box i	if you want an endorsed licence only	
Allow BYO	☐ On-Licence	plus Caterer's On-Licence
□ BYO Licence only	□ Caterer's C	n-Licence only (no restaurant)
3. Details of Applicant		
Full legal name or names to	be on licence (if a company, must be compan	y name):
Whether licence already he	Id for premises or conveyance concerned:	Yes No, and if 'Yes' state kind of licence
4. Applicant Status: by re	eference to section 28 of Sale and Supply of Al	cohol Act 2012
Natural person(s)		Private Company
☐ Body Corporate		Public Company
☐ Partnership		Other (please specify)

5. For Applicant that is a Natural Person(s):			
Full legal name:	Thach.		
Any aliases (and/or maiden name):			
Usual residential address: Number 38	Street: octavis not	•	
Suburb: waikanae	Street: octavis nd City: wellington		Postcode: 5391
Sex: Femalo.	Occupation:		
Date of birth:	Place of hirth:		
Telephone: 0223144592			
Email: masi 200012 e yatoo. co.		referred mod	de of contact:
6. For Applicant that is a Body Corporate, Authority	under which Incorporated:		
7. For Applicant that is <u>Not</u> a Natural Person(s), Det	ails of Contact Person:		
Name:	Designation/Position:		
Telephone:	Email:	-	
Mobile:	Preferred mode of contact:		
8. Postal Address for Service:			
Number/Street/PO Box:	Suburb:		
City:	Postcode:		
9. Business Details:			
Describe principal business, any other businesses			
Restaurant.			
10. Criminal Convictions:			
Does the applicant(s) have any criminal convictions (other	er than convictions for offences against provisi	ions of the I	and Transport Act 1998
not contained in Part 6, and offences to which the Crimin	al Records (Clean Slate) Act 2004 applies).		
please provide nature of the offence, details of conviction	n, and penalty imposed.		
11. For a Company: whether Incorporated under the C	ompanies Act 1993 or Equivalent Foreign Leg	islation	
Full Legal Names of Directors:	y ruan produce	K.	

12. For a Private Company Incorporated under the	Con	panies Act 1993:	
Authorised capital:		Paid up capital:	Life of Notifel
Name:		Address: Street number	F-1, 1 - 7 - 7 - 7
Street:		Suburb:	
City:		Postcode:	
Date of birth:		Place of birth:	
Designation:		Face value of shares held:	trong is all who
13. For a Partnership:			
Full legal name of partner:			
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 3 50	Str	eet: rain road	
Suburb: waikanae	City		Postcode: 5391
Trading Name: Prah ta pa	La	restaurant.	
If not Owned by Applicant:			
Tenure: (state whether to be held as leasehold, or under	tena	ncy agreement or licence)	
Full legal name of owner:	K ~	an pidduck	
Address: Number &	Str	eet: shear worker vice	
Suburb: paraparauna beach	Cit		Postcode: 5032
Is the licence conditional on completion of building work:	_ \		
15. Details of Conveyance			
Kind: (eg, ship, railway carriage, bus, etc)			
Tenure: (state whether owned by applicant, or to be open	rated	under charter, lease or licence\	

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", state details:	
16. Details of Duty Manager(s)/Proposed Manager(s)) If more than two certified managers please attach details :	separately
Full legal name:		
Number of manager's contificate:	1341/2022 Expiry Date: (6/6	-1-
Full legal name:	54112022 1010	05/26
Tuan dan	924 12021 Expiry Date:	1 -1 -
17. Business Details	924 12021	05 25
State the general nature of the business to be conducted restaurant, entertainment/nightclub)	by applicant in the premises if licence granted: (for example	e, hotel, tavern,
Restaurant		
Is the sale of alcohol intended to be the principal purpose business (for example: sale of alcohol, sale of food; enter	of business: Yes No, and advise the intended princtainment; accommodation).	cipal purpose of
sale of	food	
food, or in the provision of any services other than those of	he sale or supply of any goods other than alcohol, non-alcol directly related to the sale or supply of alcohol and non-alco other goods or services. This is to assess whether other go	holic refreshments, and

State the days and hours proposed for sale of alcohol (this is your current licensed hours not trading hours):	
morday to surday - loan - 11pm.	
Do you have an encroachment licence to consume alcohol on footpath: Yes No If 'Yes', please attach and nu	mber #
 18. Conditions 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 '#' 	Doc attached? Number.
Describe experience and training of applicant: - done Lac previously - word at restaurant more than, 18475.	Yes / No #
Describe the type and range of food intended to be available for purchase: See Mach (email).	Yes ₱ No #
Describe the type and range of non-alcoholic beverages intended to be available for purchase:	Yes / No #
Describe the type and range of low-alcohol beverages intended to be available for purchase: Neineken export cdrus	Yes /No #
Describe to what extent, and where, drinking water is intended to be freely available to patrons (if no access to mains water supply, also advise the potability of water intended to be available): Supply to table, retilied when.	Yes / No #

Conditions contd-	Conditions	conto
Describe the steps proposed to be taken to prevent the sale and supply of alcohol to prohibited people: 10 to be provided by client when reader (passpark, 18 plus could).	Yes / No #	,
Describe any other steps the applicant proposes to promote the responsible consumption of alcohol (for instance host responsibility practices): Taki signed up and visible to dient. Taki signed up and visible to dient. Lace also be called on at no consumption of alcohol (for instance host responsibility practices):	Yes /No #	
Describe any other systems (including training systems), and staff in place (or to be in place) for compliance with the Act: Some stark survey stark (regular).	Yes /No #	W
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. 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: **Transfer of the locality would not be likely to be: • reduced, by more than a minimal extent, by the refusal to renew the licence. 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: **Transfer of the locality would not be likely to be: **Transfer of the locality would not be likely to be: **Transfer of the locality would not be likely to be: **Transfer of the locality would not be likely to be: **Transfer of the locality would not be likely to be: **Transfer of the locality would not be likely to be: **Transfer of the locality would not be likely to be: **Transfer of the locality would not be likely to be: **Transfer of the locality would not be likely to be li	Yes / No #	
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: Action sought: Variation Cancellation. If Variation, in what respect does the applicant seek to vary the condition?	Yes / No # # #	

Full reasons for variation or cancellation:	
	- 4 - 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 #
Copies of all relevant building certificates consents: Please attach certificates that show the premises meet 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 #
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 #
Advise if a Crime Prevention Through Environmental Design (CPTED) assessment has been undertaken or any	Yes / No
improvements to the design and layout in accordance with CPTED. Yes 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).	#
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 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 / 100 #
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 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 #

20. Attachments (Conveyance) When including attachments please number the half 'Yes box and write the document number on '#		Doc attached? Number.
 For renewal applications you only need to attach co the last version you provided to the DLC 	ppies if there have been changes from	
Floor plan showing each area to be designated as a supervise supervised or restricted area. Not required for renewal unless renewal.		Yes / No #
For body corporate applicant, copy of certificate of incorporati renewal unless changes have occurred since the last issue or		Yes / No #
Please attach a photograph or artist's impression of the exteri 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		twice.
Please attach a copy of your Host Responsibility Policy. Not a 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 re the range and nature of the food offered since the last issue of		Yes / No #
If the conveyance is owned by another party, please attach ar no objection from the owner to the issue of licence to this conversious 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	the shares, or of any particular class of shares, issued by	the company.
Name: This Ly Know Problemole.	Address: 8 Showar water w	-ise
Suburb:	City: wellingto -	
Postcode: 5032	Date of birth: 20108186.	
Place of birth:	Designation: Owner direct	or.
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 #		

22. Further Details where Applicant is a Partnership		A REPORT OF THE RESIDENCE OF THE RESIDEN
Name:	Address:	u Desert by Philippin by the many A
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 #	ł	
23. Signature of Applicant (this must be signed by applicant	t not their agent):	
I authorise New Zealand Police to disclose any person Medical Officer of Health and/or the Licensing Inspec		
Name: The masi Tag		
Date: 14 (01 25.	Signature:	
Dated at location:		
Privacy Statement		
Information contained in your application and any su to enable your application to be processed under the made available to the public on request. The information of the NZ Police, the Medical Officer of Head	e Sale and Supply on the Sale and Supply of the Sale and Sal	of Alcohol Act 2012. This information will be ed 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.

Met	hod of payment (must be made at time of	application)
d	I have paid at a Kāpiti Coast District Counc	il Service Centre when I delivered this application.
	I have paid by electronic transfer (Council E "alcohol" in the reference fields; and	Bank Account Number: 03-0732-0306101-00) and quoted my name and
	☐ I have included proof of electronic pay	ment with this application.
	I have enclosed a cheque with this form.	
Hov	v I would like to receive my alcohol licenc	e (please select <u>one</u> only)
	I will collect my alcohol licence – please colors	ntact me when it is ready by □ Phone or □ Email
d	Please post my alcohol licence to me.	
	kt Step: Once your application is complete, if your sing Inspector then please Telephone (04) 296	ou would like to make an appointment for an optional pre-lodgement meeting with the 4700 or Toll Free: 0800 486 486.
1 2 3	This form must be accompanied by the in Within 20 working days after filing your a	required attachments (refer Points 19 or 20). Application with the District Licensing Committee (or 10 working days if it is an must be publically notified. The public notice template will be provided on receipt of
For	Office Use: Application Fee Risk Categories	Tradicion of the Material Collection of Capital Collection (September of the Collection
	1 Very Low	☐ High
	1 Low	☐ Very High
	I Medium	
App	ication Fee Payable: \$	Signature of Licensing Inspector
Nam	ne of Licensing Inspector	Date:

DLC_Form_003 Page 10 of 12

rah Ta Pang Restaurant Takeaway menu

Open 7 days 5pm-9.30pm for takeaway 3/50 Main Road Waikanae.
We accept eftpos, cash, no credit cards

	Al. Chai jor (spring rolls) (Vermicelli, carrot, mince pork, onion, and coriander Morn/ chruk jong kark (chicken or pork skewers) Chicken/pork, oyster sauce, garlic, chilli flakes, serve with sweet and sour chilli sauce Rish, lean grass, coriander-spring onion and prawn Num bang chean(Deep-fry bread and prawn Bi cuong(Summer rolls-min wrap in rice paper Mint, pork, lettuce served with sweet and sour fish sauce Roy coung (Summer rolls wrap in rice paper Mint, prawns, lettuce served with soya bean sauce Sach ko sa lek kray ang (Nutty peppered beef skewers Beef, onion, mint peanuts and chilli flakes Stuffed boneless chicken wings Vermicelli, carrot, minced pork, onion and coriander Rot Served with peanut sauce Deep fried kumara Served with sweet and sour chilli sauce	\$6.50 \$6.50 \$6.50 \$8.50 \$7.00 \$5.50
A2.	Chai jor (spring rolls) (Vermicelli, carrot, mince pork, onion, and coriander Morn/ chruk jong kark (chicken or pork skewers) Chicken/pork, oyster sauce, garlic, chilli flakes, serve	\$6.50
E.	Pro heat tri (fish cake) Fish-lemon-orass-coriandor-spring-spring-and-shilli	\$6.50
A	Num bang chean(Deep-fry bread and prawn Bread, prawns, enion, garile, and coriander	\$6.50
8.	Bi cuong(Summer rolls-prime wrapin rice paper Mint, pork, lettuce served with sweet and sour fish sauce	\$8.50
19.	Roy coung (Summer rolls wrap in rice paper Mint, prawns, lettuce served with soya bean sauce	\$8.50
5	Sach ko sa lek kray ang (Nutty peppered beef skewers Beef, onion, mint peanuts and chilli flakes	\$7.00
=	Stuffed boneless chicken wings Vermicelli, carrot, minced pork, onion and coriander	\$9.50
12.	Roti Served with peanut sauce	\$5.50
. 33	13. Deep fried kumara Served with sweet and sour chilli sauce	\$6.50

82.

Nhorm sach ko (Beef salad)

Cucumber, tomatoes, onion, mint, garlic, chilli flakes and beef

Nhorm cro ao juk (Lotus root and carrot salad) pork, lotus root, carrot; garlic and Vietamese mint

Nhorm nearm kroth tlong (Chicken and grapefruit salad)
Chicken, bean sprout, fresh mints, peanuts, carrot, Cabbage, and grape fruit.

\$8.00

\$8.00

\$8.00

	i Sund	
5.50	A5. Sub tum pang barang (Chicken and asparagus soup) Chicken, Chinese mushroom, onion, asparagus, egg and Coridander	\$7.50
5.50	A6. Chicken, cream corn, onion and coriander and black peper	\$7.50
.50	A7. Sup peing poh (Tomato and egg drop soup) Tomatoes, egg, ginger, coriander and black peper	\$7.50
.50		
.50		
.50	. Junua	
3		

Răpiti Coast District Couricii at Paraparaumu

2 1 JAN 2025

By Jutte Time /000

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:	Prah Ta Pang Restaurant
Applicants name: (Individual or Company)	Startish Kapiti 2015 Limited
Premises address:	3/50 main rd waikange
Contact phone:	Home: — Mobile: 6223144592
Contact email:	masi2000nze yahoo.com

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

I hereby state that	(tick one):
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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:	masi Thach.
Signature:	
Date:	19.01.25

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