## Application for renewal and/or variation of an on-licence

Absolutely Positively **Wellington** City Council
Me Heke Ki Pöneke

Section 120 or 127, Sale and Supply of Alcohol Act 2012

To: The Secretary
District Licensing Committee
PO Box 2199
Wellington 6140

I would like to receive the results of this application (including the licence, if applicable) by:  $\square$  email  $\square$  post

Please PRINT clearly.			
Endorsements			
If you are seeking an endorsement, tick the appropriate box:  BYO restaurant - applies to BYO-only restaurants (not fully licensed)  Caterer - off-site catering. You will need to provide evidence of catering (for example, menus, web information, booking agreements)			
Applicant details			
Full legal name/s of the person/s or company who will receive any proceeds from alcohol sales (list any other names, including a maiden name, you may be known by):  Selera Malaysid Limited T/A Rasa Malaysia Restaurant			
Applicant status:    Individual   Private Company   Partnership   Body corporate   Public company   Club   Trustee   Local authority   Licensing trust   Government Department or other instrument of the Crown   Manager under the Protection of Personal and Property Rights Act 1988   Board, organisation or other body  Address: 200 Cubal Street, Te Aro   GOII Wellington			
Postal address for service of documents: 65/170 Frager Frager Avenue Johnsonville, wellington Postcode: 6037			
Contact details			
Name of daytime contact: Uvanesan Narayanasamy			
Phone number(s): 021 - 1/0 8034			
Email (this is our preferred way of contacting you): NESOND2012@gmail.com			
If applicable, list all criminal convictions (except offences to which the Criminal Records (Clean Slate) Act 2004 applies). State the type and date of each conviction:			

Further details (complete the section that applies)
If the applicant is an individual
Occupation:
Date and place of birth:
If the applicant is a company or incorporated society
Private company: For each person who holds any shares issued by the company please provide: name, address, date of birth, place of birth, designation, percentage of shares held. (Continue on a separate sheet if necessary.)  UVanesan Narayanasany
<b>Public company:</b> For each person who holds 20 percent or more of the shares, or of any particular class of shares, issued by the company please provide: name, address, date of birth, place of birth, designation. ( <i>Continue on a separate sheet if necessary.</i> )
If the applicant is a partnership
Name of partnership if legally established:
For each partner provide name, address, date of birth, place of birth. (Continue on a separate sheet if necessary.)
And the control of th
Signature of each partner:
If the applicant is a body corporate
Please state the authority the body corporate is incorporated under:
Premises details (For a conveyance licence, skip this section and complete the following section)
Address: 200, Cuba Street, Te Aro
Address: 200, Cuba Street, Te Aro Goll wellington.
Trading name for the premises: Rasa Malaysia Restawant
Type of premises (for example, restaurant, tovern): Restaurant
K-3 fotos etc.
Is the licence being-applied for conditional upon the premises being constructed or altered?
☐ Yes ☐ No
If yes, describe the changes you are making and what consents you have:
For new premises, what date do you intend to open?
Does the applicant own the proposed licensed premises?  ✓ Yes  ✓ No
If no, what is the full name, address, email and phone number of the owner?
What form and term of tenure will the applicant have? 6 year's
Tick the box if the premises will have:
A supervised area (under-18s must be with parent or guardian)
☐ A restricted area (no under-18s allowed)
No designated areas
Supervised and restricted areas must be shown clearly on your scale plan of the premises.

Conveyance details	
Type of conveyance (for example, plane, boat, train, bus):	
Trading name for the conveyance:	
Address of home base:	
Principal route travelled:	
Does the applicant own the conveyance?	
Yes No	
If no, what is the full name and address of the owner?	
What form and term of tenure will the applicant have?	
For a <b>ship, ferry or hovercraft</b> , do you have a current Safe Shi <sub>l</sub>	p Management Certificate?
For an airplane, do you have a current Certificate of Airworthi	ness? Yes No
For a <b>train</b> , do you have a Rail Service Licence?	☐ Yes ☐ No
For a <b>bus</b> , do you have a current warrant of registration?	☐ Yes ☐ No
Registration number:	
Business details	
Is the sale of alcohol intended to be the principal purpose of t  Yes No  If no, state what the principal purpose of the business will be	
	premises selling goods other than alcohol and food, or providing
If yes, describe the other goods or services:	
Days and hours	The second second second second
Days and hours when alcohol is to be sold or supplied	
Sam to 12 midnight/	Monday to Sunday
BYO-only – days and hours the applicant wants endorsed for	a BYO licence
Manager details	
Full name and address of managers to be employed their cert	
Name: Uyaneran Narayanasamy	16/06/2021
Certificate number: 49 C/CERT/337/5017	Expiry date: 16/06/2021
Name: Rahul Bisht	1 - 21 2 2 2
Certificate number: 49C/CERT/609/2016	Expiry date: 9/08/2023
Name:	
Certificate number:	Expiry date:

Conditions	
Describe the applicant's experience and training in the sale and su Owned and operate Rasan Held Manager certificate s Alway's get myself update	Malaysia Since 2016.
Provide menus or descriptions regarding the available:  food (describe type and range)  non-alcoholic refreshments (describe type and range)  low-alcohol beverages (describe type and range available contactoristic describe type and range)  how and where drinking water will be made freely available to	raining 1.15%–2.5% alcohol )
What actions does the applicant propose to take to make sure min supplied alcohol?  - Alcho Alcohol will strickly not be people - Check ID before serve alcho	
What actions does the applicant propose to take to provide help premises?  We have range of Taxi phe driver at the counter of the R	ione number and Dial a
What other actions does the applicant propose to take to promot we have tost Responsibility Poliwill be trained accordingly responsible alcohol consumption	icy which all Staff y to promote safe and
What other systems (including training) and staff are, or will be, in Every tow two Month, the Restaur staff on the latest information All for Staff will undergo train	place for compliance with the Act?  and Manager Will update the  bout Lac Law and procedure.  ning by Manager to keep then update
Please note: The New Zealand Police and the Medical Officer of H	lealth are required by the Sale and Supply Act 2012 to make applicant. The Police inform the District Licensing Committee of
Dated at (place):	on (date): 08/04/202/
Print name: Uvanesan Narayanasamy	Applicant's signature:

## **Privacy statement**

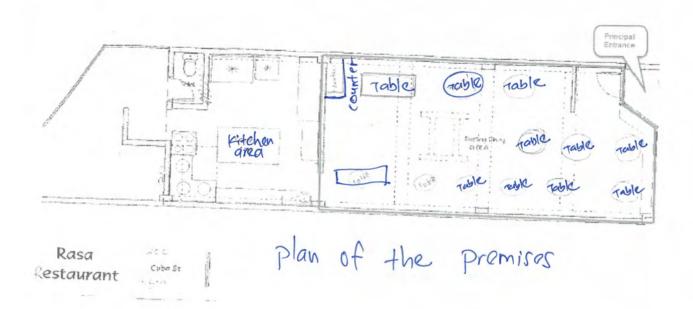
Print name:

Information you provide in this application and any supporting documents will be used by Wellington City Council (WCC) to process your application under the Sale and Supply of Alcohol Act 2012. This information will be made available to the public upon request, and will be shared with the Wellington District Licencing Committee, the Police, the Medical Officer of Health and WCC's Licencing Inspectors.

Applicant's signature:

This information may form part of a public hearing or other consideration of your application before the Wellington District Licencing Committee, and may be used in the Committee's decision on your application. The decision will be made publicly available.

WCC is required to keep a statutory register of all alcohol licence applications. Anyone can request a copy of information held on the register from SecretaryDLC@wcc.govt.nz. The District Licencing Committee's decision on applications can be found at www.nzlii.org. WCC is required to report statistics about applications to the Alcohol Regulatory and Licencing 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 or shared for other purposes in line with the Privacy Act 1993. You have the right to see and correct personal information that WCC holds about you, and you can do so by contacting info@wcc.govt.nz.



Wellington City Council 12 April 2021