



NOTICE OF APPLICATION TO ADD, VARY OR CANCEL CONDITION OF A LICENCE OR PERMIT
(GENERAL)

LIQUOR CONTROL ACT 1988
Sections 64 & 68

Please print neatly in **BLOCK LETTERS** with a *black* pen only

1. DETAILS OF LICENSEE

(a) Licence Number: 6060144973

(b) Name of Licensed Premises: MISTER D'ARCY

(c) Address of Licensed Premises: 97 FLORA TERRACE, NORTH BEACH
 _____ Post Code: 6020

(d) Name of Licensee: PIERRE D'ARCY PTY LTD

(e) Contact Name: PHIL COCKMAN Contact Number: 08 6278 2788
 Email: PHIL@CANFORD.COM.AU

2. DETAILS OF APPLICATION

(a) Does the application relate to the licence or to an extended trading permit relating to that licence?
 Liquor Licence Extended Trading Permit

(b) If it relates to an Extended Trading Permit, what is that number of that permit? 0218949422

(c) What new condition, variation or cancellation of the existing condition is sought?
SEE ATTACHED

(d) Local Government Authority in which licensed premises is located: CITY OF STIRLING

(e) What are the reasons in support of the application?
SEE ATTACHED

(f) Does the applicant have an exclusive right to occupy the proposed licensed premises? YES NO

*Please note the application cannot proceed to determination unless the applicant has exclusive tenure of the proposed premises.
 (Club Restricted exclusive tenure is only required during hours requested under the liquor licence.)*

(g) Wholesaler's, Producer's or Special Facility Online Wine Sales Licences*

Is approval sought to store liquor off the licensed premises? YES NO

If YES, Name and address of storage premises: _____
 _____ Postcode: _____

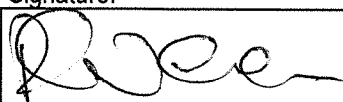
Has the proprietor of the storage premises provided consented to the arrangement? YES NO

**In respect of the Online Wine Sales licences the off-site storage location must be unlicensed premises.*

3. DECLARATION

I declare/certify that:

- the information contained in this form, including attachments, is true and correct.
- I am authorised to sign this application on behalf of the applicant entity.
- The applicant understands that all rights to the licence will terminate should it not retain exclusive tenure of the licensed premises. *(Club Restricted licensee's exclusive tenure is only required during hours approved under the liquor licence.)*

Signature:	Date:	Signature:	Date:
	27/7/23		
Print name and position:		Print name and position:	
PHIL LOCKMAN AGENT			

Signature:	Date:	Signature:	Date:
Print name and position:		Print name and position:	

It is an offence under section 159 of the Liquor Control Act 1988 to make a statement that is false or misleading.
 Penalty: \$10,000.

4. PAYMENT DETAILS

An invoice with detailed payment options will be provided once the application has been received.



**NOTICE OF APPLICATION FOR APPROVAL OF ALTERATION/REDEFINITION
LIQUOR CONTROL ACT 1988**

Sections 68 & 77

Please print neatly in **BLOCK LETTERS** with a *black* pen only

1. DETAILS OF LICENSEE AND APPLICANT

- (a) Licence number: 6060144973 _____
- (b) Name(s) of Licensee: PIERRE D'ARCY PTY LTD _____
- (c) Name and Address of Licensed Premises: 97 & 97C FLORA TERRACE, NORTH BEACH _____
 _____ Post Code: 6020 _____
- (d) Is the applicant, in this case, the licensee? YES NO
 If **NO**, (i) Name of applicant: _____
 (ii) Address for service of documents: _____
 _____ Post Code: _____
 (iii) Status of applicant (eg. owner, lessor): _____
- (e) Daytime Contact Name: PHIL COCKMAN _____
 Telephone number: (08) 6278 2788 _____ E-mail: PHIL@CANFORD.COM.AU _____
- (f) Where the alteration/redefinition will result in a change in the use of the premises, a section 40 Certificate of Local Planning Authority or Development Approval specifying the type of liquor licence sought is required to be lodged prior to the determination of the application. Please specify the date on which an application for planning approval in respect of the proposed alteration/redefinition of the licensed premises will/has been lodged with the relevant local government authority 6/6/23.

2. DETAILS OF APPLICATION

Describe the alteration or redefinition to be approved: PREMISES EXPANDING INTO ADJOINING TENANCY – NEW LICENSED AREA TO INCLUDE NEW TENANCY. _____

3. CONSENT OF THE OWNER/LESSOR

Has the consent of any owner and/or lessor of the premises been obtained? YES NO If **YES**, attach a copy.

4. DECLARATION

I declare/certify that:


- the information contained in this form, including attachments, is true and correct.
- I am authorised to sign this application on behalf of the applicant entity.

Signature:

Date:

Signature:

Date:



6/6/23

Print name and position:

PHIL COCKMAN - AGENT

Print name and position:

Signature:

Date:

Signature:

Date:

Print name and position:

Print name and position:

It is an offence under section 159 of the Liquor Control Act 1988 to make a statement that is false or misleading.
Penalty: \$10,000.

5. PAYMENT DETAILS

An invoice with detailed payment options will be provided once the application has been received.