



APPLICATION FOR VARIATION OR REVOCATION OF A
PROHIBITION ORDER MADE BY THE DIRECTOR OF LIQUOR LICENSING
LIQUOR CONTROL ACT 1988
Sections 152E and 152G

Please print neatly in **BLOCK LETTERS**

1. DETAILS OF APPLICANT (COMMISSIONER OF POLICE OR RELEVANT PERSON)

(a) Surname: _____

(b) Given name/s: _____

(c) Residential Address: _____
 _____ Post Code: _____

(d) Postal Address: _____
 _____ Post Code: _____

(e) Contact Number/s: _____

(f) Email: _____

If the applicant has someone acting on their behalf.

(g) Contact Name: _____

(h) Contact Number: _____

(i) Email: _____

(j) Relationship to applicant: _____

2. DETAILS OF APPLICATION

(a) Prohibition order number: _____

(b) Date of order: _____

(c) Is a variation or revocation being sought? **Variation** **Revocation**

(d) If a variation, what is being sought?

(e) What are the reasons in support of the variation or revocation application? (if space is insufficient, please attach submissions and any other information or document that the applicant considers relevant to the application)

3. DECLARATION

Signature of Applicant	Date

4. NOTES

1. The application must be made during the period that the Prohibition Order is in effect.
2. The Prohibition Order remains in force during the period of the review of the decision to give that notice.