

APPLICATION TO TRANSFER A DETACHED BOTTLE SHOP

Office Use Only

Date received

Receipt No

Amount received

Instructions

Please complete in **BLOCK** letters. Attach extra pages if needed. If you need help completing this form, visit our website www.olgr.qld.gov.au or contact the Office of Liquor, Gaming and Racing on 13 13 04.

Privacy Statement - Please read

The Department is collecting information, including personal information, for the purposes of the *Liquor Act 1992*. In accordance with the legislation, some personal information may be passed to the Queensland Police Service to assist with criminal history searches, and business information is placed on a register that may be inspected by the public. In other instances, information on this form can be disclosed without your consent where authorised or required by law.

Warning: False or misleading statements will attract a maximum penalty of 100 penalty units or 6 months imprisonment and may lead to immediate cancellation of licence.

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Fees:

To find out the current application fee go to www.olgr.qld.gov.au

Part 1 - Details of hotel currently operating the bottle shop

Section 1 Licensee details

Licensee (as shown on licence document)

.....

Section 2 Details of premises

Name of premises

Address of premises

Locality/Suburb State Postcode

Phone Fax

Mobile Email

Section 3 Liquor licence number

Liquor licence number (as shown on licence document)

Part 2 - Details of hotel seeking to operate the bottle shop

Section 1 Licensee details

Licensee (as shown on licence document)

.....

<p>Section 2 Details of premises</p>	<p>Name of premises</p> <p>Address of premises.....</p> <p>Locality/Suburb State <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Postcode <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p>Phone Fax</p> <p>Mobile..... Email.....</p>
<p>Section 3 Liquor licence number</p>	<p>Liquor licence number (as shown on licence document)</p>
<p>Part 3 – Details of bottle shop</p>	
<p>Section 1 Bottle shop address</p>	<p>Address of bottle shop.....</p> <p>.....</p> <p>Locality/Suburb State <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Postcode <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p>
<p>Section 2 Location of bottle shop</p>	<p>Location of bottle shop in relation to premises at Part 2, Section 2. (include distance from main premises by road and the route taken in measuring the distance)</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>Section 3 New tenancy details</p>	<p>Give details of new tenancy (eg. 3 x 3 year lease)</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>Section 4 Trading hours</p>	<p>Does the licensee at Part 2, Section 1, intend to operate the same hours at the bottle shop as the current licensee?</p> <p><input type="checkbox"/> No – You need to complete Form 9, Application for Approved Extended Hours</p> <p><input type="checkbox"/> Yes – Go to Section 5</p>
<p>Section 5 New tenancy agreement</p>	<p>You must attach a copy of the new tenancy agreement, or the assignment of the existing lease. Is this document attached?</p> <p><input type="checkbox"/> No – Should this application be approved, a copy of the executed lease will be required to be forwarded to the Office of Liquor, Gaming and Racing</p> <p><input type="checkbox"/> Yes – Go to Part 4</p>

Part 4 – Consent and signatures

Section 1 Bottle shop owners consent

As landlord of the bottle shop described in this form, I consent to this transfer.

Name

Address

Locality/Suburb State Postcode

Signature

Date _D / _D / _M / _M / _Y / _Y / _Y / _Y

Section 2 Signature of licensees

Licensee **currently** operating the bottle shop

Name

Signature

Date _D / _D / _M / _M / _Y / _Y / _Y / _Y

Licensee **seeking** to operate the bottle shop

Name

Signature

Date _D / _D / _M / _M / _Y / _Y / _Y / _Y

Lodgement and Payment

Lodgement details

Please lodge the completed application, any supporting documentation and fees at the Office of Liquor, Gaming and Racing at the address below or any Office of Liquor, Gaming and Racing office at Gold Coast (Southport), Sunshine Coast (Maroochydore), Toowoomba, Wide Bay, Rockhampton, Mackay, Mt Isa, Townsville or Cairns. The counter is open Monday to Friday, 8:30am to 4:30pm.

By mail: Locked Bag 180, City East Q 4002

In person: Office of Liquor, Gaming and Racing, Level 4, 33 Charlotte Street, Brisbane Qld 4000
or your nearest regional office

Payment details

Payment Type:

Money Order

Cheque – *Make cheque payable to Office of Liquor, Gaming and Racing*

Credit Card – Charge my:

Mastercard VISA

Credit Card No.

Cardholder's Name:

Amount Authorised: \$ Expiry Date:

Signature:

A receipt will not be issued unless specifically requested.