**Form 11B**

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| **Office Use Only** |
| **Paid Date** |  |
|  **Receipt No.** |  |
| **Amount Paid** |  |



**NOTICE OF APPLICATION TO ADD, VARY OR CANCEL CONDITION OF A LICENCE OR PERMIT (CONVERSION OF CLUB RESTRICTED LICENCE TO CLUB LICENCE)**

LIQUOR CONTROL ACT 1988

Sections 64 & 68

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

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| **1. DETAILS OF LICENSEE** |
| (a) Licence number: (b) Name of Licensed Premises: (c) Address of Licensed Premises:  Post Code: (d) Name of Licensee: (e) Daytime Contact Name:  Telephone Number: ( ) E-mail:  |
| **2. DETAILS OF APPLICATION** |
| (a) Does the club own the licensed premises? YES [ ]  NO [ ]  If **NO**,   (i) Name of owner:   Postal Address of owner:  Address of the owner:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(b) (i) Applicant’s tenure: *Lease [ ]  Other* [ ]  \_\_\_\_\_\_\_ (b) (ii) Will the Applicant have exclusive possession of the licensed premises (ETP area excluded)? YES [ ]  NO [ ]  ***Please note the application cannot proceed to determination unless the applicant has or will have exclusive tenure of the proposed premises.***  (iii) Are there any payments made to the freehold owner or another entity in relation to the turnover of the business? These payments could include rent, marketing, advertising or management fees that are based on the turnover of the business:  Yes\* [ ]  No [ ]  \*A completed Profit Sharing application form (Form 16) must be lodged if there are payments in relation to the turnover of the business.Please note that should the application be approved, and the licensee no longer has exclusive tenure of the licensed premises all rights to the licence will terminate pursuant to s37(5) of the Act.  |
| **3. DECLARATION** |
| **I declare/certify that:** * the information contained in this form, including attachments, is true and correct.
* The applicant understands that all rights to the licence will terminate should it not retain exclusive tenure of the licensed premises.
* I am authorised to sign this application on behalf of the applicant entity.

Signature: Date: Signature: Date: Print name and position: 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. |

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