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| **FORM 15** |

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

A black background with a black square

Description automatically generated with medium confidence

**NOTICE OF APPLICATION FOR APPROVAL OF PERSON IN POSITION OF AUTHORITY OR OF SHAREHOLDING**

LIQUOR CONTROL ACT 1988

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

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| 1. **DETAILS OF LICENSEE** |
| (a) Name of Licensee:  (b) Daytime contact name of licensee:  (c) Telephone: ( ) E-mail: |
| 1. **DETAILS OF PERSON TO BE APPROVED (Complete either section 2 or 3)** |
| |  | | --- | | (a) Full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (b) Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Registered office if company)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (c) What is the position of authority to be assumed by the person?  Director  Shareholder  Other  - Please Specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (d) Please identify the company to which this approval relates (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (e) When do you propose to introduce this person? \_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_  ***Please note that it is an offence for a person to assume a position of authority without the prior approval of the licensing authority pursuant to section 102(1) of the liquor Control Act 1988 – Penalty $10,000.***  (f) Attach LL5 Personal Particulars form for the director / shareholder being approved.  *NB: one form per person/party is required if multiple directors are being appointed within an approved company.* | |

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| 1. **DETAILS OF COMPANY TO BE APPROVED (Complete either section 2 or 3)** |
| (a) Full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (b) Registered office address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (c) Attach a current ASIC extract for the Licensee Company.  ***Please note that it is an offence for a person to assume a position of authority without the prior approval of the licensing authority pursuant to section 102 of the Liquor Control Act 1988 – Penalty: $10,000.***  (d) Attach LL5 Personal Particulars form for the director / shareholder being approved. In the case of a Limited company, shareholder information is not required.  (e) From what date is approval sought? \_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_  *NB: one form per person/party is required if multiple directors are being appointed within an approved company.* |

1. **COMPANY DETAILS IF APPLICATION IS APPROVED**

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| (a) If the application is approved, state the resulting name and position held by each director, secretary, managing director, executive officer of the licensee company:-  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name Position held  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name Position held  (b) If the application is approved, and the licensed company is a proprietary company, state the resulting name of each shareholder or other member, and the number and class of shares to be held, in each case  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of Shareholder  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address of Shareholder No & Class of shares held  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of Shareholder  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address of Shareholder No & Class of shares held |

1. **DECLARATION**

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| **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.   *Please ensure that a director of the licensee company who has already been approved by the licensing authority completes this section.*  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. |

Level 2, Gordon Stephenson House, 140 William Street, Perth, WA, 6000

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