

Transportation Service Licenses – Guidelines and Application

Transportation Service: a service provided primarily for the conveyance of passengers by ship or aircraft.

If you are interested in obtaining a Transportation Service liquor license in Newfoundland and Labrador please use the following as a **guideline** of the requirements. *Please note: other agencies or departments may require information further to that which is listed below.*

Guidelines / Requirements	✓
Newfoundland Labrador Liquor Corporation (NLC) License Requirements	
<ul style="list-style-type: none"> • Completed application for Liquor Establishment license (see attached) 	
<ul style="list-style-type: none"> • Completed Personal Data Sheets (enclosed) for each shareholder, director and/or officer who is in charge of the premises 	
<ul style="list-style-type: none"> • Current Certificate of Conduct for each shareholder, director and/or officer who is in charge of the premises 	
<ul style="list-style-type: none"> • Approval from Transport Canada (<i>see Transport Canada section below</i>) 	
<ul style="list-style-type: none"> • If incorporated, please provide Notice of Directors form, <i>The Corporations Act</i> (Form 6) 	
<ul style="list-style-type: none"> • Once all information is collected, a pre-licensing inspection will be conducted 	
Other Agency Requirements	
<p>Transport Canada</p> <p>The proposed establishment will need approval from Transport Canada. Please visit https://www.tc.gc.ca/en/transport-canada.html for more information.</p>	

APPLICATION FOR LIQUOR ESTABLISHMENT LICENSE

APPLICATION FOR TRANSFER OF EXISTING LICENSE

Airport Establishment Club Hotel / Motel Institution Lounge Military Mess Recreational Facility
 Restaurant Restaurant/Lounge Tour Boat Tourist Home Transportation Service

***Please note:**

An application fee of \$200 must accompany this completed form.

All licenses are subject to an Annual Licensing Fee. For more details, please see the License Fee Schedule.

If applying for **transfer** of license, name under which License was last issued:

_____ License No: _____

Address: _____

_____ Phone: _____

PART ONE

TO BE COMPLETED BY ALL APPLICANTS

1. Do you require a catering license? Yes No

2. Applicant Information:

Name: _____
Surname Given Names

Address: _____

Phone: _____ Mobile: _____ Fax: _____

Email: _____

3. Establishment Information:

(a) Business name of establishment:

(b) **Physical** Address of Establishment (please complete **ALL FIELDS**)

Address: _____

City/Town: _____

Postal Code: _____

(c) **Mailing** Address of Establishment (if different from above)

Address: _____

City/Town: _____

Postal Code: _____

4. Is applicant sole owner? Yes No

(a) If not sole owner, give particulars of agreements with any other party or parties

(b) If a partnership, state separately each partner's investment and proportion of profit distribution:

Name	Investment	% Profit-sharing ratio
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(c) If a corporation, give:

Name _____

Date of Incorporation _____

Public or Private Company _____

Provincial or Federal Charter _____

Officers and Directors (If more than four, please provide separate list)

Name	Mailing Address (including Postal Code)
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State whether applicant will occupy building as owner or tenant

5. Has the applicant ever applied for a license for the sale of spirits, beers or wines in Canada or elsewhere either as an individual, a member of a partnership, or an officer, director or shareholder of a Corporation?

6. Is the establishment to be managed by the applicant? Yes No
If "No", by whom?

Name in Full	Address	Age
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7. Will the establishment be operated throughout the year or only seasonally?

_____ If seasonally, period of operation: _____

PART TWO

TO BE COMPLETED BY APPLICANTS APPLYING FOR AN INSTITUTION LICENSE OR MILITARY LICENSE

1. Name of institution, Club, Branch, Lodge, Division or mess _____
2. Incorporated or chartered _____ Date _____
3. Please provide separate list of executive including names, titles, addresses and telephone numbers.
4. State date on which institution or club commenced active operation _____

PART THREE

TO BE COMPLETED BY APPLICANTS APPLYING FOR A TRANSPORTATION SERVICE LICENSE

1. Name and address of Company or Organization:

2. Indicate type of transport for which this application is being made:

PART FOUR

TO BE COMPLETED BY ALL APPLICANTS

I, _____, of _____

do solemnly declare that:

- I have knowledge of the matters herein deposed to;
- all information set forth in the attached application to the Newfoundland Labrador Liquor Corporation is true and correct in substance and in fact; and
- I made this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

DATE

SIGNATURE OF APPLICANT

Please send completed application to:

NEWFOUNDLAND LABRADOR LIQUOR CORPORATION

P.O. Box 8750, Stn. A

St. John's, NL A1B 3V1

Attention: Regulatory Services

Telephone: (709) 724-1159

Fax: (709) 753-8625

Email: corporateservices@nliquor.com

PERSONAL DATA SHEET

Name of Establishment for which this report is submitted

Location

Surname

Given Name(s)

Address

Phone Number

Email

Date of Birth

Place of Birth

Place of Residence during past ten years

Are you or any member of your family engaged, in any capacity, with the enforcement or administration of the *Liquor Control Act* and/or the *Liquor Corporation Act*?

YES NO If yes, please give details

Have there been any findings of guilt against you of an offense in Canada or the United States?

YES NO If yes, please attach a certified copy of your criminal record.

The Royal Canadian Mounted Police, the Royal Newfoundland Constabulary or any other law enforcement agency is hereby authorized to supply the Newfoundland Labrador Liquor Corporation with any information which the Board considers pertinent to my application for a license.

Date

Signature of Applicant