

(709) 729-1038.

Transfer of Hotel / Motel Licenses – Guidelines and Application

Hotel: an establishment in regular operation provided with the number of bedrooms, accommodation, facilities and equipment prescribed in the Liquor Licensing Regulations where, in consideration of payment, food and lodging are regularly provided to the public.

Motel: a roadside building containing three or more rental units under one roof with easy access to automobiles whether or not other rental units are operated in conjunction with it.

If you are interested in transferring a Hotel/Motel 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		
 Completed application for Transfer of Existing Liquor Establishment license (attached) 	(see	
 Completed Personal Data Sheets (enclosed) for each shareholder, direct officer who is in charge of the premises 	ctor and/or	
 Current Certificate of Conduct for each shareholder, director and/or officer charge of the premises 	r who is in	
Written Municipal approval		
Written approval from the Provincial Fire Commissioner's Office		
 Verification of Tourism license (see Tourism, Culture, Industry and Innovation below) 	ion section	
 One set of floor plans, drawn to scale on paper no larger than 8.5" x 14", or proposed licensed area and including dimensions of clearly identified rooms storage and the total number of fixtures in the men's and ladies' washrooms) 	(including	
 A current signed copy of a lease or purchase agreement, or another docuverifies ownership and/or legal possession of the establishment (e.g., Pro Bill) 		
A letter from the current licensee agreeing to transfer the license		
 A letter from the current licensee permitting you to operate on his/her license license has been approved 	e until your	
• If incorporated, please provide Notice of Directors form, The Corporations Ac	ct (Form 6)	
 Verification of Food Establishment License (see Service NL section below) 		
 Written approval from Buildings Accessibility and Fire & Life Safety (the required if renovations have been completed, please advise; see Service Intelligence (below) 		
• Once all information is collected, a pre-licensing inspection will be conducted	k	
Other Agency Requirements		
Service NL		
The proposed establishment will need a Food Establishment License. Service N conducts health inspections at all food establishments in the province. For more information, please visit www.servicenl.gov.nl.ca or call (709) 729-2104.		
Approvals from Buildings Accessibility and Fire and Life Safety are also required	l. For	

more information, please visit www.servicenl.gov.nl.ca/licenses/building/index.html or call



Tourism, Culture, Industry and Innovation

The proposed establishment requires a Tourism License. For more information, please visit www.tcii.gov.nl.ca/tourism/tourism_development or contact Karen Clarke at (709) 729-2835.

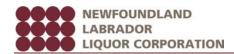


NOTICE TO APPLICANTS FOR TRANSFER OF LIQUOR ESTABLISHMENT LICENSE

Section 28 Liquor Licensing Regulations

"An application for the approval of the Board for a transfer of a license shall be forwarded to the Board at least 30 days before the date proposed for the transfer."

Please note that upon receipt of application, all required documentation is to be forwarded to the Newfoundland Labrador Liquor Corporation within 30 days. Applicants failing to comply will not be in a legal position to operate.



☐ APPLICATION FOR LIQUOR ESTABLISHMENT LICENSE☐ APPLICATION FOR TRANSFER OF EXISTING LICENSE

	irport Establishment ☐ Club estaurant ☐ Restaurant/Lou	☐ Hotel / Motel	☐ Institution☐ Tourist Home	□ Lounge	☐ Military Mess	☐ Recreational Facility
	ase note:	ige 2 Four Boat	- rounst rionic		isportation oct vice	
	ase note. application fee of \$200 must ac	oomnany this comm	lated form			
	icenses are subject to an Ann			olease see tl	he License Fee Sch	edule.
	oplying for transfer of license, na	_	_			
пар						
Add	ress:					
					Phone:	
PAR	RT ONE					
ТО	BE COMPLETED BY ALL APPL	ICANTS				
1.	Do you require a catering lice	nse? 🗆 Yes 🗆 🗅 N	lo			
2.	Applicant Information:					
	Name:Surname					
					Given Names	
	Address:					
	Phone:	Mobil	e:		Fax:	
	Email:					
3.	Establishment Information:					
	(a) Business name of establ	ishment:				
	(b) Physical Address of Establishment (please complete ALL FIELDS)					
	Address:					
	City/Town:					
	Postal Code:					
	(c) Mailing Address of Estal	olishment (if differen t	from above)			
	Address:					
	City/Town:					
	Postal Code:					



a) If not sole owner, give particulars of agreements with any other party or parties					
If a partnership, state separately each partner's investment and proportion of profit distribution:					
Name	Investment	% Profit-sharing ratio			
(c) If a corporation, give:					
Name					
Date of Incorporation					
Public or Private Company					
Provincial or Federal Charter					
•	an four, please provide separate list) Mailing Address (includi	ing Postal Code)			
•		ing Postal Code)			
· · · · · · · · · · · · · · · · · · ·		ing Postal Code)			
Name	Mailing Address (includi	ing Postal Code)			
State whether applicant will occup	Mailing Address (includi	n Canada or elsewhere either as an ind			
State whether applicant will occup	Mailing Address (including building as owner or tenant a license for the sale of spirits, beers or wines in officer, director or shareholder of a Corporation?	n Canada or elsewhere either as an ind			



DATE

PART	TWO
то в	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
то в	E COMPLETED BY APPLICANTS APPLYING FOR A TRANSPORATION SERVICE LICENSE
1.	Name and address of Company or Organization:
2.	Indicate type of transport for which this application is being made:
PART	FOUR
то в	E COMPLETED BY ALL APPLICANTS
l,	
	emnly 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.

Please send completed application to:

SIGNATURE OF APPLICANT

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@nlliquor.com



Date

PERSONAL DATA SHEET

Name of Establishment for which this report is submitted				
Location				
Surname	Given Name(s)			
Cumano				
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 <i>Liquor Control Act</i> and/or the <i>Liquor Corporation Act</i> ? □ 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.				

Signature of Applicant