

#### Transfer of Restaurant/Lounge Licenses – Guidelines and Application

If you are interested in transferring a Restaurant/Lounge 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 (see attached)			
Completed Personal Data Sheets (enclosed) for each shareholder, director and/or officer who is in charge of the premises			
Current Certificate of Conduct for each shareholder, director and/or officer who is in charge of the premises			
Written Municipal approval			
Written approval from the Provincial Fire Commissioner's Office			
• One set of floor plans, drawn to scale on paper no larger than 8.5" x 14", outlining the proposed licensed area, including dimensions of clearly identified rooms (including storage and the total number of fixtures in the men's and ladies' washrooms)			
A current signed copy of a lease or purchase agreement, or another document that verifies ownership and/or legal possession of the establishment (e.g., Property Tax 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 until your license has been approved			
• If incorporated, please provide Notice of Directors form, <i>The Corporations Act</i> (Form 6)			
Written approval from Buildings Accessibility and Fire & Life Safety (this is only required if renovations have been completed, please advise; see Service NL section below)			
Verification of Food Establishment License (see Service NL section below)			
Once all information is collected, a pre-licensing inspection will be conducted			
Other Agency Requirements			
Service NL			
The proposed establishment will need approvals from Buildings Accessibility and Fire and Life Safety. For more information, please visit			
www.servicenl.gov.nl.ca/licenses/building/index.html or call (709) 729-1038.			
A Food Establishment License is also required. Service NL conducts health inspections at all food establishments in the province. For more information, please visit <a href="http://www.servicenl.gov.nl.ca">www.servicenl.gov.nl.ca</a> or call (709) 729-2104.			



## 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

□ 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:	_	
Addr	ress:			_	
			Phone:	_	
PAR	TONE				
TO E	BE COMPLETED BY ALL APP	LICANTS			
1.	Do you require a catering lice	ense? 🗆 Yes 🛛 No			
2.	Applicant Information:				
	Name:		Given Names		
	Address:				
	Phone:	Mobile:	Fax:		
	Email:				
3.	Establishment Information:				
	(a) Business name of estab	lishment:			
	(b) Physical Address of Es	(b) Physical Address of Establishment (please complete ALL FIELDS)			
	Address:			_	
	City/Town:				
	Postal Code:				
	(c) Mailing Address of Esta	blishment (if different from above)			
	Address:			_	
	City/Town:				
	Postal Code:			_	



5.

6.

7.

#### 

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

Name	Investment	% Profit-s	sharing ratio
(c) If a corporation, give:			
Name			
Date of Incorporation			
Public or Private Company			
Provincial or Federal Charter			
Officers and Directors <b>(If more</b> Name	<b>than four, please provide separate</b> Mailing Addr	list) ress (including Postal Code)	
State whether applicant will occ	cupy building as owner or tenant		
Has the applicant ever applied t a member of a partnership, or a	for a license for the sale of spirits, bee an officer, director or shareholder of a	ers or wines in Canada or elsewhe	ere either as an individua
Is the establishment to be mana If "No", by whom?	aged by the applicant?	No	
If "No", by whom?		No dress	Age
If "No", by whom?		dress	Age



#### 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, t	itles, addresses and telephone numbers.
4.	State date on which institution or club commenced active of	peration
т.	State date on which institution of club confinenced active of	

#### PART THREE

#### TO BE 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:

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#### TO BE COMPLETED BY ALL APPLICANTS

do solemnly declare that:

Ι, \_

DATE

- 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

\_,of \_

• 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.

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@nlliquor.com



### PERSONAL DATA SHEET

Name of Establishment for which this report is submitted	
ocation	

Surname	Given Name(s)	
Address		
Phone Number	Email	
Date of Birth	Place of Birth	
Place of Residence during past ten years		

		our family engaged, in any capacity, with the enforcement or administration of the <i>Liquor</i> or <i>Corporation Act</i> ?
YES	NO	If yes, please give details

Have there bee	n any findings of	f guilt against you of an offense in Canada or the United States?
YES	D 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