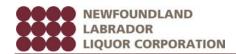


<u>Airport Establishment Licenses – Guidelines and Application</u>

An airport establishment license authorizes the licensee to sell, for consumption on the licensed premises to passengers of the airlines using the airport where the licensed premises are located, at all hours and on all days throughout the year, spirits by the glass and wine and beer by the glass or opened bottle.

If you are interested in obtaining an Airport Establishment 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 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 w is in charge of the premises | no | | | |
| 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) | ed | | | |
| A current signed copy of a lease or purchase agreement, or another docume that verifies ownership and/or legal possession of the establishment (e.g., Property Tax Bill) | nt | | | |
| Verification of posting of three public notices (see attached) | | | | |
| Copies of three newspaper advertisements (see attached) | | | | |
| If incorporated, please provide Notice of Directors form, The Corporations Ac (Form 6) | rt . | | | |
| Written approval from Buildings Accessibility and Fire & Life Safety (see Dig Government and Service NL section below) | ital | | | |
| Once all information is collected, a pre-licensing inspection will be conducted. | ı | | | |
| Other Agency Requirements | | | | |
| Digital Government and Service NL | | | | |
| The proposed establishment will need approvals from Buildings Accessibility and Fire and Life Safety. For more information, please visit https://www.gov.nl.ca/dgsnl/licenses/building/ or call (709) 729-1038. | | | | |



ADVERTISING REQUIREMENT

In keeping with Section 34 of the *Liquor Control Act*, an advertising requirement must be fulfilled when an application is being made for a liquor establishment license:

Newspaper advertisements measuring at least 2" x 3" must appear in a local newspaper once a week for three consecutive weeks. Copies of the newspaper advertisements, along with the name of the newspaper and insertion dates, must be submitted with the application.

All newspaper advertisements must use the following wording:

| Public Notice | | | |
|--|--|--|--|
| <insert company="" name="" of=""></insert> | | | |
| OPERATING AS | <insert establishment="" name="" of=""></insert> | | |
| AT | <insert address,="" city="" exact="" location="" or="" street="" town=""></insert> | | |
| IN THE PROVINCIAL DISTRICT OF | <insert district="" name="" of="" provincial=""></insert> | | |
| IS APPLYING FOR A | Choose an item. to sell spirits, beers, and wines on premise. | | |
| Resident and community feedback is an important part of the application process. If you have any concerns, or object to this application, please forward an email to licenseconcerns@nlliquor.com by 4:30 p.m. on licenseconcerns@nlliquor.com by 4:30 p.m. on | | | |

<u>Public notices</u> measuring 8.5" x 11" must be posted in three conspicuous places within the specified Municipality or Electoral District (e.g., public bulletin boards, retail outlets, restaurants), in proximity to the proposed site, for three consecutive weeks. After the expiration of the three weeks, officials of the premises on which the notices were posted must sign the back of the notices as verification of posting.

Please use the Public Notice template attached for the applicable locations.

Please note that advertisements are valid for six months from the date of the last publication. If the six month period lapses, the applicant is required to re-advertise.



PUBLIC NOTICE

| $\pmb{AT} \dots \dots \dots \dots \dots \dots$ | |
|--|--|
| IN THE PROVINCIAL DISTRICT OF $\ \ . \ \ .$ | |
| IS APPLYING FOR A | |
| | to sell spirits, beers, and wines on premise |

Resident and community feedback is an important part of the application process.

If you have any concerns, or object to this application, please send an email to: licenseconcerns@nlliquor.com by 4:30 p.m. on:

- * A copy of the feedback may be provided to the license applicant.
- ** Please contact your municipality if you have questions or concerns about zoning bylaws and requirements.



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

| | irport Establishment | | | Lounge ☐ Trans | ☐ Military Mess | ☐ Recreational Facility |
|-------|--|----------------------------------|----------------------|-------------------|-------------------|-------------------------|
| | ease note: | 3 | | | -1 | |
| | application fee of \$200 must | accompany this comp | oleted form. | | | |
| AII I | licenses are subject to an An | nual Licensing Fee. I | For more details, pl | ease see th | e License Fee Sch | iedule. |
| If ap | oplying for transfer of license, | name under which Lice | nse was last issued: | | | |
| | | | | | License No: | |
| Add | ress: | | | | | |
| | | | | | | |
| DAE | RT ONE | | | | | |
| | RE COMPLETED BY ALL AP | PLICANTS | | | | |
| 1. | Do you require a catering lic | cense? □ Yes □ N | No | | | |
| 2. | Applicant Information: | | | | | |
| | Name: | | | | | |
| | Name:Surname | | | | Given Names | |
| | Address: | | | | | |
| | Phone: | Mobil | e: | | Fax: | |
| | Email: | | | | | |
| 3. | Establishment Information: | | | | | |
| | (a) Business name of esta | blishment: | | | | |
| | (b) Physical Address of Establishment (please complete ALL FIELDS) | | | | | |
| | Address: | | | | | |
| | City/Town: | | | | | |
| | Postal Code: | | | | | |
| | (c) <u>Mailing</u> Address of Es | tablishment (if differen | t from above) | | | |
| | Address: | | | | | |
| | City/Town: | | | | | |
| | Postal Code: | | | | | |



| a partnership, state separately each partner's investment and propose. Investment f a corporation, give: of Incorporation c or Private Company ncial or Federal Charter wrs and Directors (If more than four, please provide separate list) Mailing Address (whether applicant will occupy building as owner or tenant me applicant ever applied for a license for the sale of spirits, beers or inber of a partnership, or an officer, director or shareholder of a Corp establishment to be managed by the applicant? Yes No ", by whom? | plicant sole owner? | | | | |
|---|---|--|--|--|--|
| f a corporation, give: of Incorporation cor Private Company notial or Federal Charter ors and Directors (If more than four, please provide separate list) Mailing Address (whether applicant will occupy building as owner or tenant ne applicant ever applied for a license for the sale of spirits, beers or mber of a partnership, or an officer, director or shareholder of a Corp establishment to be managed by the applicant? □ Yes □ No | (b) If a partnership, state separately each partner's investment and proportion of profit distribution: | | | | |
| of Incorporation | % Profit-sharing ratio | | | | |
| of Incorporation | | | | | |
| or Private Company ncial or Federal Charter ars and Directors (If more than four, please provide separate list) Mailing Address (whether applicant will occupy building as owner or tenant ne applicant ever applied for a license for the sale of spirits, beers or niber of a partnership, or an officer, director or shareholder of a Corp establishment to be managed by the applicant? Yes | | | | | |
| cor Private Company Incial or Federal Charter It is and Directors (If more than four, please provide separate list) Mailing Address (Whether applicant will occupy building as owner or tenant The applicant ever applied for a license for the sale of spirits, beers or inber of a partnership, or an officer, director or shareholder of a Corp establishment to be managed by the applicant? Yes No | | | | | |
| whether applicant will occupy building as owner or tenant the applicant ever applied for a license for the sale of spirits, beers or inber of a partnership, or an officer, director or shareholder of a Corpetation of the sale of spirits of a Corpetation of the sale of spirits of a Corpetation of the sale of spirits of a Corpetation of a partnership of the sale of spirits of a Corpetation of the sale of spirits of the sale of spirits of a Corpetation of the sale of spirits | | | | | |
| whether applicant will occupy building as owner or tenant me applicant ever applied for a license for the sale of spirits, beers or mber of a partnership, or an officer, director or shareholder of a Corp establishment to be managed by the applicant? Yes | | | | | |
| whether applicant will occupy building as owner or tenant ne applicant ever applied for a license for the sale of spirits, beers or onber of a partnership, or an officer, director or shareholder of a Corp establishment to be managed by the applicant? Yes | | | | | |
| ne applicant ever applied for a license for the sale of spirits, beers or nber of a partnership, or an officer, director or shareholder of a Corp establishment to be managed by the applicant? | | | | | |
| establishment to be managed by the applicant? | | | | | |
| | wines in Canada or elsewhere either as an indivoration? | | | | |
| | | | | | |
| e in Full Address | Aç | | | | |
| ne establishment be operated throughout the year or only seasonally |) | | | | |



| ΡΔ | RT | T١ | NO | ١ |
|----|----|----|----|---|
| | | | | |

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 | | | |
| PA | RT THREE | | | |
| то | 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: | | | |
| PA | RT FOUR | | | |
| TO BE COMPLETED BY ALL APPLICANTS | | | | |
| | | | | |
| | | | | |
| 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@nlliquor.com



Date

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 <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