

APPLICATION FOR THE TRANSFER OF A TOBACCO RETAIL LICENCE

Please print using block letters.

Fixed Premises Mobile Premises

1. Full Name and Address of Current Licensee
.....
.....
.....
..... Postcode.....

2. Current Licence Number
.....

3. Trading Name of Premises
.....
.....

4. Full Name and Address of Transferee
.....
.....
.....
..... Postcode.....

5. Other Contact Details
Telephone Facsimile
Email
Web Address

6. Reason for Transfer
.....
.....
.....

7. Does the Applicant hold a licence issued under ...
Liquor Act Gaming Machine Act Gaming Control Act
Racing and Betting Act
NB: This licence can only be transferred at the time of transfer of licence identified above.

8. Nature of Business (e.g. Specialist Tobacconist, Supermarket, Petrol Station, etc)
.....
.....

9. Trading Details (Days/Hours)
.....
.....
.....

10. Full Name, Address and Date of Birth of Proposed Manager
 Name
 Address

 Date of Birth

Mobile Premises Only

10. Nature of mobile premises (eg vehicle, vessel, aircraft) please specify

 11. Location of mobile premises when not in use
 Postcode.....

I/We hereby apply for approval for the grant of a Tobacco Retail Licence in accordance with the information provided. We declare that the information provided is true in every particular.

Signature of Current Licensee.....	Signature of Proposed Licensee.....
Date.....	Date:.....

Please ensure the following relevant documentation is attached to your application.

1. Application for grant of a Licence duly executed by the Applicant.
2. Certificate of Incorporation if Applicant is a Company.
3. Copy of Partnership agreement if application is a partnership.
4. Copy of Business Name Registration Certificate.
5. Company search, including details of all directors and shareholders, holding companies or any associated company (and including details of all directors and shareholders of this company) or partnership. In the case of shareholders being a company, ASC details for that company.
6. If the premises are currently licensed as identified in Question 4, no documentation other than the application form will be required.
7. **Criminal History Check: (Name check only required for this application)**
 - (a) All details are printed clearly.
 - (b) The form is completed in ink.
 - (c) All sections of the form are completed.
 - (d) The original form is submitted (no photocopies or faxed copies will be accepted), with original signatures only.
 - (e) All relevant signatures appear on the form.
 - (f) No wording of this form is altered or deleted in any way except when relevant to the application.
 - (g) Supply a photocopy of your photographic driver's licence; birth certificate; passport or similar and certify that the original has been sighted.

CONTACT DETAILS

SUBMIT APPLICATIONS TO:

FOR ENQUIRIES OR ASSISTANCE CONTACT:

DARWIN

Territory Business Centre
Development House, Ground Floor
76 The Esplanade
Darwin NT 0800
PO Box 9800
Darwin NT 0801

Phone: (08) 8982 1700
Facsimile: (08) 8982 1725

DARWIN

Racing, Gaming and Licensing
1st Floor, Enterprise House
Cnr Knuckey & Woods Streets
Darwin NT 0800

Phone: (08) 8999 1800
Facsimile: (08) 8999 1888

ALICE SPRINGS

Territory Business Centre
Peter Sitzler Building
67 North Stuart Highway
Alice Springs NT 0870
PO Box 9800
Alice Springs NT 0871

Phone: (08) 8951 8524
Facsimile: (08) 8951 8591

ALICE SPRINGS

Racing, Gaming and Licensing
Peter Sitzler Building
67 North Stuart Highway
Alice Springs NT 0870

Phone: (08) 8951 8452
Facsimile: (08) 8951 8591

TENNANT CREEK

Shop 2, Barkly House
Cnr Davidson and Paterson Streets
Tennant Creek NT 0860
PO Box 9800
Tennant Creek NT 0871

Phone: (08) 8962 4411
Facsimile: (08) 8962 4413

KATHERINE

Territory Business Centre
Shop 1 Randazzo Building
18 Katherine Terrace
Katherine NT 0850
PO Box 9800
Katherine NT 0851

Phone: (08) 8973 8180
Facsimile: (08) 8973 8188

TOBACCO CONTROL ACT

NOTICE IN ACCORDANCE WITH THE INFORMATION ACT (INFORMATION PRIVACY PRINCIPLE 1)

Racing, Gaming and Licensing (RGL – a division of NT Treasury) is seeking information from you for the purposes of your application.

Information Privacy Principle 1 (IPP 1) requires that a public sector organisation must not collect personal information unless the information is necessary for one or more of its functions or activities. If personal information about an individual is collected from the individual, the organisation must take reasonable steps to ensure that the individual is aware of certain matters. For the purposes of IPP 1, the following advice is provided.

- You are able to access your personal information that you have provided by making a written request to the Director of Licensing.
- The information is required pursuant to the Tobacco Control Act. The Act requires that certain matters must be considered when deciding whether or not to approve an application.
- The information will be kept confidential except as follows:
 - (a) Information may be sought from Police, government agencies, interstate licensing authorities, or referees or other persons nominated by you. Information may be released to those sources to the extent necessary to obtain information about you and your application.
 - (b) If a hearing is involved, information will be released to the parties, Commission or the Court, as required.
 - (c) Registers of licences and permits will be maintained and may be made available to the public on request.
- You do not have to provide information if you do not wish to do so. However, an application may not be approved if there is insufficient information to properly determine the matter in accordance with the Act.

Website: www.nt.gov.au/ntt/licensing