

# Gaming machine threshold increase where LIA required



Liquor &amp; Gaming NSW

## OFFICE USE ONLY

GML000

By ☐ Email ☐ Mail

Date lodged

Amount paid \$

Receipt no.

Application no.

Finalised by

Date finalised

Notification issued

Daytime phone

02 4587 8544

Email

blighpark@dhhotels.com.au

karend@dhhotels.com.au

What is the total internal floor space of the premises in square metres?

1000 sqm

Is the premises part of a retail shopping centre or proposed retail shopping centre as defined in section 4 of the *Gaming Machines Act 2001*?No ☒Yes ☐

If Yes, what are the name and address of the current or proposed shopping centre?

## Part 1 About the premises

Liquor licence

LIQ H400120338

Premises name

Bligh Park Family Tavern

Premises address

Stewart &amp; Ham Streets

Suburb/town/city

SOUTH WINDSOR

State

NSW

Postcode

2756

Local Government Area (LGA)

Hawkesbury City Council

SA2

Windsor-Bligh Park

SA2 Band (select one)

☐ 1 ☒ 2 ☐ 3

Is the application for a new premises?

☐ Yes☒ No

Are the new premises within 200 metres of a school, place of public worship or hospital?

No ☐Yes ☐

If Yes, please provide a map showing the location of the relevant premises and the location of any school, place of public worship or hospital within 200 metres of the premises.

## Part 2 Gaming machine threshold (GMT)

GMT for current premises?

21

Proposed GMT threshold for the premises?

30

continue overleaf



### Part 3 Local impact assessment (LIA) information

#### Type of LIA being lodged.

For information on what type of LIA is required, see the information sheet on the new LIA process at [liquorandgaming.nsw.gov.au](http://liquorandgaming.nsw.gov.au).

#### What type of Local Impact Assessment (LIA) is being lodged? (tick one only)

☒ Class 1

☐ Class 2

Lodge the applicable LIA submission with this form. See the information sheets at [liquorandgaming.nsw.gov.au](http://liquorandgaming.nsw.gov.au) for guidelines on what the LIA submission needs to contain.

### Part 4 Notification of application result

Do you wish to be notified of the result of this application by email?

No ☐

Yes ☒

If Yes, print the email address:

[bt@hatziscusack.com.au](mailto:bt@hatziscusack.com.au)

### Part 5 Applicant declaration

- ▲ I declare that I am 18 years or older and I am authorised to lodge this application.
- ▲ I declare that the contents of this application including attachments are true, correct and complete and that I have made all reasonable inquiries to obtain the information required to complete the application.
- ▲ I undertake to immediately notify Liquor & Gaming NSW of any change to the information in this application, if the information changes before the application is determined.
- ▲ I acknowledge that under section 36 of the *Gaming and Liquor Administration Act 2007* and section 307A of the *Crimes Act 1900* it is an offence to provide false or misleading information in this application.
- ▲ I acknowledge that failure to provide all required information may result in refusal of the application.
- ▲ I understand that specific details I have supplied in this application may be 'personal information' under the *Privacy and Personal Information Protection Act 1998*. Personal information is any information or opinion that identifies an individual, or enables someone to identify an individual.
- ▲ I acknowledge that Liquor & Gaming NSW is collecting information to enable processing of the application. I also understand that they will use the information for its intended purpose only, store the information securely, and allow me to access and update the information. When processing this application, they may need to disclose personal information to other Government agencies.

Name of club secretary/hotel licensee

Karen Dear

Signature of club secretary/hotel licensee

*KS Dear*

Date

15.10.2020

continue overleaf

If the application is lodged by a legal or other representative, tell us:

Name of representative

**Brett Tobin**

Representative's business name

**Hatzis Cusack Lawyers**

Email

**bt@hatziscusack.com.au**

Contact phone daytime

**(02) 9221 9300**

Address for correspondence

**GPO Box 3743, SYDNEY NSW 2001**

Suburb/town/city

**SYDNEY**

State

**NSW**

Postcode

**2001**

## Part 6 Payment for this application

The fee for this application is available in the gaming machine licence and application fee schedule. Fill in the fee below.

Please pay by:

☐ Credit card ☐ Cheque ☐ Money order

Payment amount \$

**1650.00**

### Credit card payments

A surcharge of 0.4% will be added to credit card payments.

Card type

☐ MasterCard

☐ Visa

Card number

### Cheque and money order payments

▲ Make payable to 'Liquor & Gaming NSW'.

▲ For cheques, please cross and mark 'Not negotiable'.

Cheque drawer name