

Cease appointed manager – notice

Before you complete this form

What this form is for

It's for a licensee or an appointed manager of a liquor licence to notify Liquor & Gaming NSW when the appointed manager leaves that role and a replacement appointed manager has not yet been identified.

Note:

A replacement manager must be appointed within 28 days or, in the case of a registered club with separate premises, within two months.

Cost

No payment is required.

Whose details must be included

- ▲ Licensee (Part 1)
- ▲ Appointed manager (Part 2)
- ▲ Contact person for corporate licensee (Part 3)
- ▲ Applicant (Part 5)
- ▲ Legal representative/solicitor (Part 5)

Pre-lodgement checklist

If information is missing, processing this application will be delayed and the application may be withdrawn.

- Have you answered all applicable questions in Parts 1 to 4?
- Have you read and signed Part 5?

How to lodge this form

✉ liquor.applications@liquorandgaming.nsw.gov.au

Please include 'AM0210 Cease appointed manager - notice' in the subject line.

✉ Liquor & Gaming NSW
GPO Box 7060
Sydney NSW 2001

👤 Liquor & Gaming NSW
Level 6, 323 Castlereagh Street
Haymarket NSW 2000
Monday–Friday, 9am–5pm

Please provide all pages of this application. There's no need to attach the introduction page.

Need more information?

🌐 liquorandgaming.nsw.gov.au

✉ [Contact us online](#)

☎ 1300 024 720

Your privacy

We will handle your personal information in accordance with the *Privacy and Personal Information Protection Act 1998*. It is being collected by Liquor & Gaming NSW and will be used for the purpose of processing your application and may be disclosed to other Government agencies for this purpose. General information about your application may be published on an electronic noticeboard and information about the application, if granted, on a public register. Providing this information is voluntary, but where relevant information is not provided this may lead to your application being refused, delayed or not further considered. You have the right to request access to, and correct details of, your personal information held by us. You can access further information on privacy at liquorandgaming.nsw.gov.au.

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Cease appointed manager – notice

OFFICE USE ONLY

AM0210

Lodged by Email Mail OTC

Date lodged

Request no.

Finalised by

Date finalised

2A About the applicant (if an individual)

Mr Ms Mrs Miss Other

Given name

Middle name

Family name

Gender

Date of birth

City or town of birth

Email

Mobile

Home phone

Daytime phone

Driver licence no. State

Residential street address

Suburb/town/city

State Postcode

Country if not Australia

Part 1 About the liquor licence

Liquor licence number
LIQ
Licence name

Name of licensee

ABN

ACN

Contact phone

Part 2 About the applicant

If the applicant is the manager (i.e. a person),
▶ Complete all questions in Part 2A only.

If the applicant is an organisation licensee
(e.g. a company),
▶ Complete all questions in Part 2B only.

Postal address as above

Postal address

GPO/PO box or street address

Suburb/town/city

State

Postcode

Country if not Australia

2B About the Licensee

Name of organisation

ABN

ACN

Email

Daytime phone

Website

Business address a street address

Suburb/town/city

State

Postcode

Country if not Australia

Postal address

(if different from business address) a PO Box if one exists

Suburb/town/city

State

Postcode

Country if not Australia

Contact person details

Mr Ms Mrs Miss Other

Given name

Middle name

Family name

Gender

Date of birth

City or town of birth

Email

Mobile

Home phone

Daytime phone

Driver licence no.

State

Part 3 Cessation of appointed manager

Tell us the approved manager approval number

LIQXA or

Manager name

When will the appointment cease? must not be backdated

Note:

A replacement manager must be appointed within 28 days or, in the case of a registered club with separate premises, within two months.

Part 4 Contact person for the corporate licensee for this licence

Who will replace the manager as contact person

Mr Ms Mrs Miss Other

Given name

Middle name

Family name

Gender

Date of birth

City or town of birth

Email

Home phone

Mobile

Daytime phone

Driver's licence no.

State

Residential street address

Suburb/town/city

State

Postcode

Country if not Australia

Postal address (if different from residential address) a PO Box if one exists; otherwise a 'physical' street address. We will use this mailing address when we contact this person about the licence

GPO/PO box or street address

Suburb/town/city

State

Postcode

Country if not Australia

Part 5 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 the attachments are true, correct and complete and that I have made all reasonable enquiries to obtain the information required to complete this application.
- ▲ I undertake to notify as soon as possible Liquor & Gaming NSW (L&GNSW) of any change to the information in this application if the information changes before the application is determined.
- ▲ I declare that I am not suspended or disqualified from holding a liquor licence.
- ▲ I acknowledge that under s. 36 of the *Gaming and Liquor Administration Act 2007* and s. 307A of the *Crimes Act 1900* it is an offence to provide false, misleading or incomplete information in this application.
- ▲ I acknowledge that failure to provide all required information will result in the application being refused.
- ▲ 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 L&GNSW is collecting information on behalf of Independent Liquor & Gaming Authority to enable processing of the application.
- ▲ I also understand that L&GNSW will use this information for its intended purpose only, store the information securely, and allow the applicant or licensee to access and update the information. When processing this application, L&GNSW may disclose information to other Government agencies.

The applicant is an individual

▶ Complete 5A only

The applicant is an organisation

▶ Complete 5B only

5A Applicant (if a manager)

Full name

Title e.g. director

Signature

Date

DD / MM / YYYY

5B Applicant (if an organisational licensee)

Two signatures are required under section 127 of the *Corporations Act 2001*.

1. Name

Position e.g. director

Signature

Date

DD / MM / YYYY

2. Name

Position e.g. director, company secretary

Signature

Date

DD / MM / YYYY

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

Name of representative

Representative's business name

Daytime phone

Correspondence address

Email