

# Gaming machine threshold increase where LIA required



**OFFICE USE ONLY** GML000

By  Email  Mail  OTC

Date lodged

Amount paid \$

Receipt no.

Application no.

Finalised by

Date finalised

Notification issued

## Part 1 About the premises

Liquor licence  
 LIQ

Premises name

Premises address

Suburb/town/city

State    Postcode

Local government area (LGA)

Daytime phone

Email

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

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 is the name and address of the current or proposed shopping centre?

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?

Proposed GMT threshold for the premises?

continue overleaf

L1403306-190717

### 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:

wca@sky.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

Fernhill Tavern Port Macquarie Pty Ltd
--

Signature of club secretary/hotel licensee

Director
----------

Date

06/03/2018	06/03/2018
------------	------------

continue overleaf

GW3806-190717

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

Name of representative

Warwick Gaisley

Representative's business name

AMW Lawyers

Email

wkaisley@amwlawyers.com.au

Contact phone daytime

0 2 8 2 8 1 6 6 0 9

Address for correspondence

Level 8, 131 York Street

Suburb/town/city

Sydney

State

N S W

Postcode

2 0 0 0

### Part 6 Payment for this application

Credit card  Cheque  Cash  Money order

Payment amount:

\$1,650 (with Class 1 LIA)

\$6,000 (with Class 2 LIA)

Credit card payments

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

Card type

MasterCard

Visa

Card number

Name on card

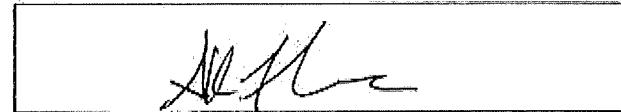
Alistair Flower

Expiry date

01/2020

01/2020

Cardholder signature



Date

DD/MM/YYYY

06/03/2018

Cheque and money order payments

▲ Make payable to 'Liquor & Gaming NSW'.

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

Cheque drawer name