



# ADD OR CHANGE A LICENSEE'S THIRD PARTY OPERATOR LICENCE APPLICATION

Liquor Control and Licensing Form LCLB026

**Instructions:** Complete all applicable fields then submit with payment as outlined in this form. If you have any questions about completing this application, call Liquor Control and Licensing Branch (LCLB) toll-free at: 1 866 209-2111.

This application must be completed when a licensee wishes to engage a third party to manage the operation of the licensee's establishment. The third party operator participates in a contractual agreement with the licensee and benefits financially from the arrangement. The third party operator agreement must be in place when a licensee wishes to engage a third party--either a proprietorship, corporate entity or partnership to manage the operation of the licensee's establishment. A third party operator:

- is not an employee of the licensee
- must be approved by the Liquor Control and Licensing Branch
- does not assume accountability for the overall operation of the establishment on behalf of the licensee as the licensee remains responsible for all activities within the licensed establishment
- must not enter into an agreement or allow another person to use the licence
- must be 19 years of age or over
- is subject to the same suitability assessment as the licensee
- is not permitted to make application for a change to the licence or sign applications on behalf of the licensee.

## Part 1: Application Contact Information

The applicant authorizes the person below to be the primary contact for the duration of the application process only.

Name:  Phone number:

Fax number:  E-mail address:

## Part 2: Licensee Information

Office use only (CI - LIC)

Job No.

Licensee Name [as shown on licence(s)]:

Establishment Name [as shown on licence(s)]:

Establishment Address:      
Street City Province Postal Code

Business Mailing Address:      
(All correspondence will go to this address) Street City Province Postal Code

Business Tel:  Business Fax:

Business E-mail:

Contact Name:  Title/Position:

Licence #(s) affected:

**Part 3: Addition of Third Party Operator**

C1 - LIC

Third Party Operator Name: Third Party Operator Business Number\*: Business Mailing Address:      
Street City Province Postal CodeBusiness Tel:  Business Fax: Business E-mail: Contact Name:  Title/Position: 

**\*Note:** Third Party Operators must have a Canada Revenue Agency issued Business Number in place in the legal name of the Third Party Operator. This is the first 9 digits of your 15 digit GST/HST registration number. If you don't have a GST/HST registration number, you can apply for one through the Canada Revenue Agency at <http://www.cra-arc.gc.ca>.

**Part 4: Type of Business**

Choose () the type of business used to operate your establishment. Beneath the type of business you indicate are further fields to complete and a list of documents to submit with this application.

 Public CorporationCheck box () if your shares are publicly traded: 

The following documents are required for this type of business and must be submitted with this application:

 List of Directors and Officers.

Plus, all directors must submit:

 a completed Personal History Summary (LCLB004) form and required documents as noted on form including a copy of your Criminal Record Search completed by your local RCMP/Police Detachment (see LCLB web page Criminal Record Search for more information) Private Corporation

The following documents are required for this type of business and must be submitted with this application:

 Central Securities Register, Notice of Articles, and Special Rights and Restrictions within the articles of incorporation that detail the class and types of shares and whether or not each class or type of share has voting privileges (if the information is not already included in the Notice of Articles).

And, if one of the shareholders is a private corporation, a public corporation, a society or a partnership, submit all the documents listed under that business type.

Plus, all shareholders (individuals) holding 10% or greater interest in the applicant corporation must submit all the documents listed:

 a completed Personal History Summary (LCLB004) form and required documents as noted on form including a copy of your Criminal Record Search completed by your local RCMP/Police Detachment (see LCLB web page Criminal Record Search for more information)

**Note:** Shareholders (individuals) holding less than 10% interest in the applicant corporation must provide their full legal name and date of birth in the space provided below or on a separate sheet of paper.

 SocietyThe society's annual membership fee is: \$  The society has  members.

The following documents are required and must be attached to this application:

 current list of officers and directors,

Plus, all directors must submit:

 a completed Personal History Summary (LCLB004) form and required documents as noted on form including a copy of your Criminal Record Search completed by your local RCMP/Police Detachment (see LCLB web page Criminal Record Search for more information)

Partnership

Please check (☑) if you are a  Registered Partnership or a  Non-Registered Partnership

List Partners in the space provided below:

Partner 1: Percentage of Ownership:	<input type="text"/>	Legal Name:	<input type="text"/>
Partner 2: Percentage of Ownership:	<input type="text"/>	Legal Name:	<input type="text"/>
Partner 3: Percentage of Ownership:	<input type="text"/>	Legal Name:	<input type="text"/>
Partner 4: Percentage of Ownership:	<input type="text"/>	Legal Name:	<input type="text"/>

If there are more than four partners, provide same information for other partners on separate sheet and attach. If one or more of the partners are a private corporation, a public corporation or a society, submit all the documents listed under that business type with this application.

Plus, each partner (individual) must submit:

- a completed Personal History Summary (LCLB004) form and required documents as noted on form including a copy of your Criminal Record Search completed by your local RCMP/Police Detachment (see LCLB web page Criminal Record Search for more information)

Sole Proprietorship

The sole proprietor must submit:

- a completed Personal History Summary (LCLB004) form and required documents as noted on form including a copy of your Criminal Record Search completed by your local RCMP/Police Detachment (see LCLB web page Criminal Record Search for more information)

Other

This includes entities incorporated through Federal or Provincial legislation. Examples: Local Government, First Nations, colleges, universities, etc. Contact the branch to discuss documentation requirements.

## Part 5: Declaration

Section 57(1)(c) of the Liquor Control and Licensing Act states: "A person commits an offence if the person (c) provides false or misleading information in the following circumstances: (i) when making an application referred to in section 12; (ii) when making a report or when required and as specified by the general manager under section 59".

Note: An agent, lawyer or third party operator may not sign the declaration on behalf of the licensee.

### Declaration of Licensee:

As the licensee or authorized signatory of the licensee, I understand and affirm that all of the information provided is true and complete.

Signature: \_\_\_\_\_  
Authorized signatory of the licensee

Name:  Position:  Date:   
(last / first / middle) (if not an individual) (Day/Month/Year)

### Declaration of Third Party Operator:

Note: An agent or lawyer may not sign the declaration on behalf of the third party operator.

Signature: \_\_\_\_\_  
Authorized signatory of the third party operator

Name:  Position:  Date:   
(last / first / middle) (if not an individual) (Day/Month/Year)

This form should be signed by an individual with the authority to bind the applicant. The Branch relies on the applicant to ensure that the individual who signs this form is authorized to do so. Typically, an appropriate individual will be as follows:

- If the licensee is an individual or sole proprietor, the individual himself/herself
- If the licensee is a corporation, a duly authorized signatory who will usually be an officer or, in some cases, a director
- If the licensee is a general partnership, one of the partners
- If the licensee is a limited partnership, the general partner of the partnership
- If the licensee is a society, then a director or a senior manager (as defined in the *Societies Act*)

If an authorized signatory has completed the *Add, Change or Remove Licensee Representative* form (LCLB101) and they have specifically permitted a licensee representative to sign this form on the licensee's behalf, the branch will accept the licensee representative's signature.

**Part 6: Application Fee**

Fee: (non-refundable): \$330 per licence X  licences = \$

In accordance with Payment Card Industry Standards, the branch is no longer able to accept credit card information via email.

Payment is by (check  one):

- Cheque, payable to Minister of Finance (if cheque is returned as non-sufficient funds, a \$30 fee will be charged)
- Money order, payable to Minister of Finance
- Credit card:  VISA  MasterCard  AMEX
  - I am submitting my application by email and I will call with my credit card information. I will call Victoria Head Office at 250-952-5787 or 1-866-209-2111 and understand that no action can proceed with my application until the application fee is paid in full.
  - I am submitting my application by fax or mail and have given my credit information in the space provided at the bottom of the page.

**Note:** Your complete application package must contain this application form with responses in all the applicable fields, all the required documentation and the full fee. If your application is submitted incomplete, it will cause a delay in processing your application and, therefore, your ability to sell liquor.

The information requested on this form is collected by the Liquor Control and Licensing Branch under Section 26 (c) of the *Freedom of Information and Protection of Privacy Act* and will be used for the purpose of liquor licensing and compliance and enforcement matters in accordance with the *Liquor Control and Licensing Act*. Should you have any questions about the collection, use, or disclosure of personal information, please contact the Freedom of Information Officer at PO Box 9292 STN PROV GVT, Victoria, BC, V8W 9J8 or by phone toll free at 1-866-209-2111.

**Credit Card Information** (To be submitted by fax or mail only)

Name of cardholder (as it appears on card):

Credit card number:  Expiry date:  /   
(Month) (Year)

Signature: \_\_\_\_\_