



Liquor Control and Licensing Branch
 4th Floor, 3350 Douglas St, Victoria, BC V8W 9J8
 Mail: PO Box 9292 Stn Provincial Govt, Victoria, BC V8W 9J8
 Phone: 1 866 209-2111 Fax: 250-952-7066

FOOD PRIMARY TRANSFER OF LOCATION LICENCE APPLICATION

Liquor Control and Licensing Form LCLB096

Instructions:

Using the attached guide, complete this application form, attach the required documents, and submit the package with payment to the Liquor Control and Licensing Branch.

Type of Application

Food Primary licensees may apply to move the location of their food-primary establishment, including moving from one civic address to another civic address or moving from one unit in a mall to another unit.

Food Primary establishments located on a motor vessel may apply to move the location of their motor vessel to a new marina or berth. If you are replacing your motor vessel with a new motor vessel, you will need to apply for a new Food Primary licence using the Food Primary Licence Application (LCLB001B).

Part 1: Licensee Information

Licensee Name (as on licence):

Mailing address (if different than location address):

Street City Province Postal Code

Tel: E-mail:

Part 2: Contact Person

Name:

Email: Phone:

Part 3: Current Establishment Information

Current Establishment name: Licence number:

Current physical address:
 Street City Province Postal Code

Part 4: Proposed Establishment Information

Note: Establishment/licence name changes and changes to signs, menus, awnings, advertising, etc. are subject to approval by the Liquor Control and Licensing Branch.

Proposed new establishment name (if changing):

Proposed physical address:
 Street City Province Postal Code

Email: New Telephone Number (if changing):

Would you like mail sent to the establishment? No Yes

Parcel Identifier (PID):

If you answer 'Yes' to any of the following questions, see the guide for further instructions:

Will your Food Primary overlap a Liquor Primary Licence (aka dual licence)? No Yes

Is your new establishment a stand-alone patio with no interior seating? No Yes

Is your new establishment located at a winery, brewery, or distillery? No Yes

Is your new establishment located on Treaty First Nation land? No Yes

Hours of Liquor Service

Set liquor service hours to 9:00 a.m. - 12:00 midnight (standard hours), Monday - Sunday

Enter proposed hours of liquor service below, if not standard hours

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Close	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Note: Hours of liquor service that extend past midnight requires local government/First Nations approval for the proposed establishment location. See the guide.

Patron Participation Entertainment - dancing, karaoke or other types of entertainment that involve patron participation in the service area

Note: This endorsement requires local government/First Nations approval for the proposed establishment location. See the guide.

Establishment Layout

Submit the restaurant floor plan according to the requirements outlined in the guide

Are you applying for a patio? No Yes If Yes, it must be included on the floor plan.

Other Options

If you are applying for any of the following, please refer to the guide for further instructions:

- Catering Endorsement - Are you currently licensed with a catering endorsement? No Yes
Do you wish to keep the catering endorsement at the proposed establishment location? No Yes
- Third Party Operator

Part 5: Declaration of Signing Authority Including Valid Interest

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".

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

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

This form should be signed by an individual with the authority to bind the applicant. The Branch relies on the licensee 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 (non-refundable)

\$330 per licence

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.

The information requested on this form is collected by the Liquor Control and Licensing Branch under Section 26 (a) and (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: _____