

Delivery Service Licences – Guidelines and Application

A Delivery Service licence may be issued to the owner or operator of a delivery service that is maintained, equipped and operated in a manner satisfactory to the board.

A Delivery Service licence authorizes the licensee or an employee of the licensee to deliver alcoholic liquor to persons who purchased the liquor with a meal prepared by a licensed establishment authorized under subsection 27(7) of the Liquor Control Act.

If you are interested in obtaining a Delivery Service licence in Newfoundland and Labrador please use the following as a guideline of list of application requirements that follow. *Please note: other agencies or departments may require information further to that which is listed below.*

Newfoundland Labrador Liquor Corporation (NLC) Licence Requirements	
• Completed application for a Delivery Service licence (see attached)	
• Completed Personal Data Sheets (enclosed) for all shareholders or directors	
• Current Certificate of Conduct for all directors/shareholders	
• If incorporated, please provide Notice of Directors form, <i>The Corporations Act</i> (Form 6)	
• All delivery persons shall be at least 19 years of age or older	
• All delivery persons shall have completed the Serve Responsible NL program offered by Hospitality NL	
• A current list of licensed establishments (including name of location and licence number) that the company services	
• <i>Once all information is collected, a pre-licensing review will be conducted</i>	

APPLICATION FOR DELIVERY SERVICE LICENCE

***Please note:**

An application fee of \$125 must accompany this application.

Delivery Service licences are also subject to an Annual Licensing Fee of \$125.

Application is hereby made for a licence to deliver alcohol with meals prepared by a licensed establishment.

1. Applicant Information:

Name: _____ Position / title: _____

Address: _____

Phone: _____ Mobile: _____ Fax: _____

Email: _____

2. (a) Business name of establishment:

(b) Physical address of establishment (please complete ALL FIELDS)

Address: _____

City/Town: _____ Postal Code: _____

(c) Mailing address of establishment (if different from above)

Address: _____

City/Town: _____ Postal Code: _____

3. Is applicant sole owner? ☐ Yes ☐ No

(a) If not sole owner, give particulars of agreements with any other party or parties

(b) If a partnership, state separately each partner's investment and proportion of profit distribution:

Name	Investment	% Profit-sharing ratio
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(c) If a corporation, give:

Name:

Date of Incorporation

Public or Private Company

Provincial or Federal Charter

Officers and Directors (If more than four, please provide separate list)

Name	Mailing Address (including Postal Code)
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Completed applications may be submitted via email, fax or mail:

Email: corporateservices@nlliquor.com

Fax: 709-753-8625

**NEWFOUNDLAND LABRADOR LIQUOR CORPORATION
P.O. Box 8750, STN. A
St. John's, NL A1B 3V1
Attention: Regulatory Services**

PERSONAL DATA SHEET

Name of Establishment for which this report is submitted

Location

Surname

Given Name(s)

Address

Phone Number

Email

Date of Birth

Place of Birth

Place of Residence during past ten years

Are you or any member of your family engaged, in any capacity, with the enforcement or administration of the *Liquor Control Act* and/or the *Liquor Corporation Act*?

☐ YES

☐ NO

If yes, please give details

Have there been any findings of guilt against you of an offense in Canada or the United States?

☐ YES

☐ NO

If yes, please attach a certified copy of your criminal record.

The Royal Canadian Mounted Police, the Royal Newfoundland Constabulary or any other law enforcement agency is hereby authorized to supply the Newfoundland Labrador Liquor Corporation with any information which the Board considers pertinent to my application for a licence.

Date

Signature of Applicant