

## **Restaurant Licenses – Guidelines and Application**

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

<b>Guidelines / Requirements</b>	✓
<b>Newfoundland Labrador Liquor Corporation (NLC) License Requirements</b>	
<ul style="list-style-type: none"> <li>• Completed application for Liquor Establishment license (see attached)</li> <li>• Completed Personal Data Sheets (enclosed) for each shareholder, director and/or officer who is in charge of the premises</li> <li>• Current Certificate of Conduct for each shareholder, director and/or officer who is in charge of the premises</li> <li>• Written Municipal approval</li> <li>• Written approval from the Provincial Fire Commissioner's Office</li> <li>• One set of floor plans, drawn to scale on paper no larger than 8.5" x 14", outlining the proposed licensed area, including dimensions of clearly identified rooms (including storage and the total number of fixtures in the men's and ladies' washrooms)</li> <li>• A current signed copy of a lease or purchase agreement, or another document that verifies ownership and/or legal possession of the establishment (e.g., Property Tax Bill)</li> <li>• Verification of posting of three public notices (see attached)</li> <li>• Copies of three newspaper advertisements (see attached)</li> <li>• If incorporated, please provide Notice of Directors form, <i>The Corporations Act</i> (Form 6)</li> <li>• Written approval from Buildings Accessibility and Fire &amp; Life Safety (<i>see Service NL section below</i>)</li> <li>• Verification of Food Establishment License (<i>see Service NL section below</i>)</li> <li>• Once all information is collected, a pre-licensing inspection will be conducted</li> </ul>	
<b>Other Agency Requirements</b>	
<p><b>Service NL</b></p> <p>The proposed establishment will need approvals from Buildings Accessibility and Fire and Life Safety. For more information, please visit <a href="http://www.servicenl.gov.nl.ca/licenses/building/index.html">www.servicenl.gov.nl.ca/licenses/building/index.html</a> or call (709) 729-1038.</p> <p>A Food Establishment License is also required. Service NL conducts health inspections at all food establishments in the province. For more information, please visit <a href="http://www.servicenl.gov.nl.ca">www.servicenl.gov.nl.ca</a> or call (709) 729-2104.</p>	

## ADVERTISING REQUIREMENT

In keeping with Section 34 of the *Liquor Control Act*, an advertising requirement must be fulfilled when an application is being made for a liquor establishment license:

**Newspaper advertisements** measuring at least 2" x 3" must appear in a local newspaper once a week for three consecutive weeks. Copies of the newspaper advertisements, along with the name of the newspaper and insertion dates, must be submitted with the application.

**All newspaper advertisements must use the following wording:**

Public Notice	
<Insert name of Company>	
<b>OPERATING AS</b>	<Insert name of Establishment>
<b>AT</b>	<Insert Street Address, City or Town or Exact Location>
<b>IN THE PROVINCIAL DISTRICT OF</b>	<Insert Name of Provincial District>
<b>IS APPLYING FOR A</b>	Choose an item. to sell spirits, beers, and wines on premise.
Resident and community feedback is an important part of the application process. If you have any concerns, or object to this application, please forward an email to <a href="mailto:licenseconcerns@nliquor.com">licenseconcerns@nliquor.com</a> by 4:30 p.m. on _____.	
<insert date 3 weeks from date of initial publication>	

**Public notices** measuring 8.5" x 11" must be posted in three conspicuous places within the specified Municipality or Electoral District (e.g., public bulletin boards, retail outlets, restaurants), in proximity to the proposed site, for three consecutive weeks. After the expiration of the three weeks, officials of the premises on which the notices were posted must sign the back of the notices as verification of posting.

Please use the Public Notice template attached for the applicable locations. NLC will also post the notice on its website at [www.nliquorcorp.com](http://www.nliquorcorp.com) on your behalf. Therefore, it is important to advise Regulatory Services when your notices begin (date).

**Please note that advertisements are valid for six months from the date of the last publication. If the six month period lapses, the applicant is required to re-advertise.**

# LIQUOR LICENSE APPLICATION

# PUBLIC NOTICE

**OPERATING AS** . . . . .  
**AT** . . . . .  
**IN THE PROVINCIAL DISTRICT OF** . . . . .  
**IS APPLYING FOR A** . . . . .

to sell spirits, beers, and wines on premise

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Resident and community feedback is an important part of the application process.

If you have any concerns, or object to this application, please send an email to:  
[licenseconcerns@nliquor.com](mailto:licenseconcerns@nliquor.com) by 4:30 p.m. on:

\* A copy of the feedback may be provided to the license applicant.

\*\* Please contact your municipality if you have questions or concerns about zoning bylaws and requirements.

## APPLICATION FOR LIQUOR ESTABLISHMENT LICENSE

## APPLICATION FOR TRANSFER OF EXISTING LICENSE

Airport Establishment     Club     Hotel / Motel     Institution     Lounge     Military Mess     Recreational Facility  
 Restaurant     Restaurant/Lounge     Tour Boat     Tourist Home     Transportation Service

**\*Please note:**

An application fee of \$200 must accompany this completed form.

All licenses are subject to an Annual Licensing Fee. For more details, please see the License Fee Schedule.

If applying for **transfer** of license, name under which License was last issued:

\_\_\_\_\_ License No: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_

### PART ONE

#### TO BE COMPLETED BY ALL APPLICANTS

1. Do you require a catering license?  Yes     No

2. Applicant Information:

Name: \_\_\_\_\_  
Surname Given Names

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

3. Establishment Information:

(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: \_\_\_\_\_

4. 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
_____	_____	_____
_____	_____	_____
_____	_____	_____

(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)
_____	_____
_____	_____
_____	_____
_____	_____

State whether applicant will occupy building as owner or tenant

\_\_\_\_\_

5. Has the applicant ever applied for a license for the sale of spirits, beers or wines in Canada or elsewhere either as an individual, a member of a partnership, or an officer, director or shareholder of a Corporation?

\_\_\_\_\_

\_\_\_\_\_

6. Is the establishment to be managed by the applicant?  Yes  No  
If "No", by whom?

Name in Full	Address	Age
_____	_____	_____

7. Will the establishment be operated throughout the year or only seasonally?

\_\_\_\_\_ If seasonally, period of operation: \_\_\_\_\_

**PART TWO**

**TO BE COMPLETED BY APPLICANTS APPLYING FOR AN INSTITUTION LICENSE OR MILITARY LICENSE**

1. Name of institution, Club, Branch, Lodge, Division or mess \_\_\_\_\_
2. Incorporated or chartered \_\_\_\_\_ Date \_\_\_\_\_
3. Please provide separate list of executive including names, titles, addresses and telephone numbers.
4. State date on which institution or club commenced active operation \_\_\_\_\_

**PART THREE**

**TO BE COMPLETED BY APPLICANTS APPLYING FOR A TRANSPORTATION SERVICE LICENSE**

1. Name and address of Company or Organization:  
\_\_\_\_\_  
\_\_\_\_\_
2. Indicate type of transport for which this application is being made:  
\_\_\_\_\_

**PART FOUR**

**TO BE COMPLETED BY ALL APPLICANTS**

I, \_\_\_\_\_, of \_\_\_\_\_

do solemnly declare that:

- I have knowledge of the matters herein deposed to;
- all information set forth in the attached application to the Newfoundland Labrador Liquor Corporation is true and correct in substance and in fact; and
- I made this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT

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**Please send completed application to:**

**NEWFOUNDLAND LABRADOR LIQUOR CORPORATION**

**P.O. Box 8750, Stn. A**

**St. John's, NL A1B 3V1**

**Attention: Regulatory Services**

**Telephone: (709) 724-1159**

**Fax: (709) 753-8625**

**Email: [corporateservices@nliquor.com](mailto:corporateservices@nliquor.com)**

## 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 license.

Date

Signature of Applicant