

**Liquor Licence Application
(Section 40 Certificate)**

I _____ of _____
(Full name in BLOCK LETTERS) (Company Name in BLOCK LETTERS)

(Address in BLOCK LETTERS)

request the City of Armadale to assess for a Section 40 Certificate the premises known as:

situated at: _____
(Name of premises in BLOCK LETTERS)

(Address of premises in BLOCK LETTERS)

Contact Number: _____

Email Address: _____

Please note this form is to be submitted with the completed *'Liquor Control Act 1988 Certificate of Local Planning Authority – Section 40'* application form available from www.rgl.wa.gov.au.

Declaration:

I declare and acknowledge the information provided above is accurate and payment is enclosed. I also acknowledge the City may advertise, display, copy and/or reproduce any supporting plans and documentation submitted as part of the application.

Date: