

LIQUOR LICENCE APPLICATION PACKAGE

FOR TRANSFER OF LICENCES

New licensees will receive an information package along with a copy of the *Yukon Liquor Act & Regulations*, and the *Yukon Liquor Board Policy Manual* from the Licensing and Inspections branch.

To assist you in preparing your transfer package, please find enclosed:	
Application checklist	
Inspection contact list	
Form 1: Liquor licence application*	
Form 2: Affidavit	
Form 3: Personal history report form	
RCMP Consent for the Release of Police Information form**	

Some of the information on this form may be your personal information. We are collecting it in order to process your application for a liquor licence or to transfer a liquor licence. Processing your application will require providing the information collected here to the Yukon Liquor Board. Our legal authority for this collection is the Liquor Act, R.S.Y. 2002, c.140 and the Liquor Regulations, OIC 1977/37. If you have any questions about why we need this information please contact Licensing & Inspections branch at (867) 667-5245 or Toll Free within Yukon 1-800-661-0408 ext 5245 or at 9031 Quartz Road, Whitehorse, Yukon Y1A 4P9.

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^{*} The enclosed application form is required when applying for all types of liquor licences outlined in Section 1 of Form 1. If you require any clarification or if you have any questions or concerns, please contact the Licensing and Inspections Branch at 667-5245 or toll free 1-800-661-0408, ext 5245.

^{**} The RCMP Consent for the Release of Police Information form must be completed and submitted in person to the nearest RCMP detachment with two pieces of ID, one of which must be a valid government issued photo ID. Should any result other than "Negative" be provided to the Yukon Liquor Corporation, a fingerprint submission to the RCMP must be done. Once the applicant has received the results of the fingerprint certification then the application can go forward to the Yukon Liquor Board.

APPLICATION CHECKLIST

The fo	Illowing is a checklist of the documents and information required to make a transfer.
	Completed and sworn (by applicant or by president or director of company) copy of Liquor Licence Application Package for Transfer of Licences
	Completed and sworn <i>Personal History Report</i> and RCMP <i>Consent for the Release of Police Information</i> for: each director of the company; each partner in a partnership; or for an applicant in a sole proprietorship and for the manager of the premises.
	A detailed plan of the building(s) or detailed plans for renovations indicating proposed licensed area and liquor storage area(s), including dimensions, and showing doorways, exits, and other major features (refer to section 7 of FORM 1 – <i>Application for Liquor Licence</i>).
	Copy of title or lease agreement (this agreement must be valid for one year or more) or a copy of the option to purchase or lease.
	Copy of your business name registration.
	Copy of purchase agreement (if leasing the building(s) from one party and have purchased the business from another party).
	Copy of food menu/list
	Copy of liquor menu with prices.
	\$150 non refundable transfer fee.
	Copy of the business licence (which must include liquor service).
	Application/documents required for specific class of licence, e.g. club, recreation facility, RV park etc. refer to section 7 of the application. (Other relevant documentation may be required.)
	Approval of the premises by Environmental Health for food service, washroom, and sanitation requirements, etc.
	Approval of the premises for occupancy by: the City of Whitehorse Building Inspection Branch or YTG-Building Inspection Branch; and/or a copy of the fire inspection report from the City of Whitehorse Fire Department or the YTG-Fire Marshall's Office.
	Notification from the current licensee of their intentions to sell or lease their premises along with a letter stating that they have no objection to the transfer of their liquor licences.

ADDITIONAL INFORMATION

The documents listed in the application package and the transfer fee must be received by our office <u>30 days prior</u> to the proposed transfer date so that an inspection of the premises can be completed, the transfer application can be considered and if approved, the licences can be issued in advance of your opening date.

A food primary – beer/wine licence, allows you to serve beer, wine, ciders and coolers. A food primary – all liquor licence, allows you to serve beer, wine and spirits.

PERSONAL HISTORY REPORT & RCMP CONSENT FOR THE RELEASE OF POLICE INFORMATION

Instructions for completion and processing of the forms on pages 8 and 9:

1. Personal history report:

Complete the Personal History Report form, have it notarized and then return it to the Yukon Liquor Corporation. For your convenience, notaries are available at all Yukon Liquor Stores and at our head office at 9031 Quartz Road in Whitehorse.

2. Consent for the Release of Police Information:

This form is available at the nearest RCMP detachment and attached within this application package.

3. Mail to: Yukon Liquor Corporation

9031 Quartz Road

Whitehorse, Yukon, Y1A 4P9

Fax to: 867-393-6306

INSPECTION CONTACT LIST

LIQUOR Tel: 867-667-5245 • Fax: 867-393-6306

Toll free (in Yukon): 1-800-661-0408 ext. 5245

yukon.liquor@gov.yk.ca

BUILDING Whitehorse

Tel: 867-668-8340 • Fax: 867-668-8395

adminbuilding@whitehorse.ca

Territorial

Tel: 867-667-5741 • Fax: 867-393-6249 Toll free (in Yukon): 1-800-661-0408 ext. 5741

buildingsafety@gov.yk.ca

FIRE SAFETY Whitehorse

Tel: 867-668-8685 • Fax: 867-668-8389

www.whitehorse.ca

Territorial

Tel: 867-667-5230 • Fax: 867-667-3165 Toll free (in Yukon): 1-800-661-0408 ext. 5230

HEALTH Tel: 867-667-8391 • Fax: 867-667-8322

Toll free (in Yukon): 1-800-661-0408 ext. 8391

environmental.health@gov.yk.ca



LIQUOR LICENCE APPLICATION

SECTION	1 - Classes of liqu	uor licence	requ	ested (Liquor	Act S	Section 2	23)		
Liquo	r Primary Licence					Train, S	hip or Airc	raft Lic	ence
Food	Primary Licence					Recreat	ion Facility	y Licen	ce
Off P	remises Licence					Sports	Stadium L	icence	
Spec	ial Licence					Liquor N	Manufactu	rer's R	etail Licence
Club	Liquor Licence					Liquor N	Manufactu	rer's Li	cence
	ark Licence								
	2 - Conditions of	liquor lice	nce re	quested	ı	1			
	- all liquor					·			tail - winery
	- beer/wine						orimary - a		
Food	primary - all liquor					Liquor p	orimary - b	eer ca	nteen
Food	primary - beer/win	е				Liquor p	orimary - n	ness	
Liquo	or manufacturer's -	brewery				Off pren	nises liquo	or	
Liquo	or manufacturer's -	distillery				Off pren	nises liquo	or - bee	er/wine
Liquo	or manufacturer's -	winery				Recreat	ion facility	′	
Liquo	or manufacturer's re	etail - brew	ery			Room s	ervice		
Liquo	or manufacturer's re	etail - distil	lery						
SECTION	3 – Establishment	informati	on			•			
Establishn	nent name								
Legal desc	cription	Lot			Bloo	ck			Plan
Street add	ress	1			J				
Mailing ad	dress of establishn	nent (if diffe	erent fr	om above)					
SECTION	4 - Contact perso	n (for proc	essing	application)					
Name									
Address									
Telephone			Fax				Email		
Website									
SECTION	5 – Business info	mation							
☐ Sole pro	oprietorship \Box	Partnershi	p [☐ Corporation	n	□ Non-	profit orga	ınizatio	n
Name									
Address									
Telephone			Fax				Email		
Website									

SECTION 6 - Ownership			
IF PARTNERSHIP			
Name of each owner			% of ownership
IF CORPORATION			
Date of incorporation	YYYY/MM/DD	☐ Public ☐ Private	
Territorial, provincial or federal	charter (specify)		
Shares authorized	Common	Preferred	
Shares issued	Common	Preferred	
Par value of shares	Common	Preferred	
Bonds issued and o/s	Number	Value (\$)	
Applicant's position with corporation			
Location of corporation			
Address of corporation			
IF CORPORATION OR NON-	PROFIT ORGANIZATION		
Officers and directors	Name (attach list, includin	g # shares held (common and	d preferred) if corporation)
President			
Vice-president			
Secretary			
Treasurer			
Director			
Director			
Previous licences operated if so, provide details)	(Have you been granted a I	iquor licence previously by a	Liquor Board or Commission;

SECTION	7 – Description of proposed o	peration									
	nn application for dual licensing ime premises.	, please co	omplete \$	Section 7	for each	class of li	cense b	eing requ	ested		
		☐ Premi	ises unde	r construct	tion	☐ Con	structed				
General d	escription					□Not	yet cons	tructed			
Start date		YYYY	/MM/D								
		☐ Applicant ☐ Named manager in day-to-day control									
(day-to-da			М		W	Th	F	Sa	Su		
		From									
Hours and	days of business operation	То									
Hours and	d days of business operation			Openin	g date	YYYY	MM/D	D			
		If seaso	nal:								
	In charge of the liquor business day operations) Applicant Named manager in day-to-day control M T W Th F Sa From To Opening date Closing date VYYY/MM/DD If seasonal: Which is a seasonal to the property of the propert	Su									
		From	IVI	<u>'</u>	VV	111	Г	Sa	Su		
Proposed hours of liquor											
	hours of liquor service	10		0		V/V/V/	/ D				
		If seaso	nal:	-		W Th F Sa Su ate YYYY/MM/DD					
				Closing	date	YYYY	MM/D	D			
	# of resident members										
	# of non-resident members										
Clubs	# of honorary members										
	Annual dues (\$)										
	Bylaws										
SECTION	9 Signatures	·									
SECTION	r o – Signatures										
Signature	of applicant			Signatur	e of app	licant					
Print name				Print name							
 Title			_	Title							
YYYY/MM/DD				YYYY/MM/DD							
Date				Date							
Applicatio	n received by Yukon Liquor Co	rporation:									
YYYY/N	-	•									
Date	Name and	title									
Date revie	wed with client:										
YYYY/N											
Date	Name and	title									



A Notary Public in and for Yukon

FORM 2 AFFIDAVIT FOR APPLICATION FOR LIQUOR LICENCE

I/We,		_ and		
	NAME		NAME	
of the	NAME OF SOLE PROPRIETORSHIP,			
	NAME OF SOLE PROPRIETORSHIP,	PARTNERSHIP, CORPORATION	ON, ORGANIZATION	
of	COMN			in Yukon
	СОМИ	MUNITY/LOCATION		
MAKE	E OATH AND SAY THAT:			
1.	I/we have read the application;			
2.	I/we have knowledge of the matters therein;			
3.	All the facts stated and information furnished therein	and pursuant the	reto are true and correct;	
4.	I/we am/are the full age of nineteen years; and			
5.	I/we am/are the authorized representative of the appl	licant.		
Signa	ıture	Signature		
SWO	RN BEFORE ME AT THE			
	of			
in Yul	kon, this day of 20			





PERSONAL HISTORY REPORT

See instructions for completion on page 3.

Full legal name (last, first, ı	middle)	Date of birth
		YYYY/MM/DD
Mailing address		
Name of premises		
	vith the business? (owner, partner, director	or, corporate officer, shareholder, manager)
Have you ever held a liquo applicable dates.	r licence in Yukon, or elsewhere? If yes,	list what type of liquor licence, where, address,
	ed a liquor licence in Yukon or by any oth ne Criminal Code of Canada? (If so, prov	er liquor authority? Have you been convicted of an de detail)
Have you ever had a liquor	licence suspended or revoked in Yukon,	or by any other liquor authority? (If so, provide detail)
STATUTORY DECLARATION	DN	
	to be true and knowing that it is of the sa	, do solemnly declare that the particulars ts of fact and I make this solemn declaration ame force and effect as if made under oath and by
SWORN before me at		
of	in the Yukon Territory this	Justice of the Peace, Commissioner of Oaths or Notary Public
day of	A.D	Signature

This information is being collected under the authority of sections 61 and 62(2) of the *Yukon Liquor Act*; section 46(1) *Yukon Liquor Regulations* for the purpose of liquor licensing and administration. For further information direct inquiries to the Licensing and Inspections branch at (867) 667-5245.



Consent for the Release of Police Information

Last name				Tobar -	441			-de-	Indiana de la companya dela companya dela companya dela companya dela companya de la companya dela	
	Given name (1)			Given nar	ne (2)		Ge	nder M [] F	Date of birth (yyyy-n	ım-ao
Address (no., street, apt.)	•	City				Province			Postal code	
el, no. (incl. area code)	Place of birth				Jsual	first name o	ralies	Malden n	ame or any other last	name
revious address if less than 5 year	s at current address									
ddress 1 (no., street, apt.)		City				Province			Postal code	
ddress 2 (no., street, apt.)		City				Province			Postal code	
art 2 - Consent		3		1,3-99						
mportant - Informed Consent s an Individual providing informed	••									
ature of the information that may be rganization, you acknowledge that re established and controlled by the r authorized body is not involved we statement of Consent: I consent information, charges before the cou- tecords and local records available lentification has been confirmed by	e contained in them. By you understand that you employer or the organ tith, or responsible for, d I to a search of all recontrate, findings of guilt or contrate, findings of guilt or contrate findings of guilt or contrate findings.	r agree ir suitai ization ecision dis and onvictio unders	ing to allow bility could to a not the post that are maintenation in and countend that if	your persons se determine pilce agency ade by the e available at the torders regis	il Infor d base or auti mploy the tim stered	mation to be ad on the inf horized bod er or organi ne the searc in my name	disclosed to ormation disci- conducting li- ration. It is conducted in the Nation	e prospecthosed. The ane checks. I, including a Repositor	va employer or suitability criteria The police agency non-conviction ry of Criminal	
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ientity of the organization ti				re the resu	its o	f the reco	d checks	1		
ame of Person or Organization				., street, apt.)	-					
City			Province				Postal code	1		
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Organization/Company/Firm.		. ²⁰	Sig	nature:	perso		ve indicaled	F	inger:	!
Organization/Company/Firm. lated this day of lart 3 - Type of Record Check	k Required - Compl	-		nature:			-1-4	F	inger:	:
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