# Commercial Activity Application Form

I am applying for occupancy of the following building. (Please complete separate forms if applying for both buildings).

□ Old Library on Stella Bull Park, Greytown

□ Old Courthouse on Clifford Square, Featherston

#### Commercial Entity Details

|  |  |
| --- | --- |
| Business name |  |
| Business registration no.  |  |
| Postal address |  |
| Phone |  |
| Email |  |
| Website |  |

#### Contact Person Details

|  |  |
| --- | --- |
| Full name:  |  |
| Position: |  |
| Daytime contact phone number: |  |
| Email: |  |
| Postal address: |  |

#### Proposed Lease Details

|  |  |
| --- | --- |
| Initial term: |  |
| Renewal term: |  |
| Number of renewals: |  |

#### Commercial Activity Details

Describe the proposed commercial activity.

* What is the company selling? e.g. food, alcohol, equipment, cafe etc.
* Number of staff? (scale and nature of operation)

Who will the commercial activity cater for?

The building is on a recreation reserve and the Reserves Act requires that a commercial activity operating on a Recreation reserve “must be necessary to enable the public to obtain the benefit and enjoyment of the reserve or for the convenience of persons using the reserve”. Please describe how your proposed commercial activity enables the public to obtain the benefit and enjoyment of the surrounding reserve or is for the convenience of persons using the reserve.

Please explain how your commercial activity supports Council’s community outcomes as defined in the Long-Term Plan

* See page 16 of the Long term plan at https://swdc.govt.nz/wp-content/uploads/LTP-2021-2031-final-12July21.pdf

#### Hours of Operation

Please provide the proposed hours of operation

* Specify hours of operation in relevant boxes e.g. 9-11am

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Mon | Tues | Wed | Thurs | Fri | Sat | Sun |
| Morning |  |  |  |  |  |  |  |
| Afternoon |  |  |  |  |  |  |  |
| Evening |  |  |  |  |  |  |  |

Please describe how the activity may affect the amenity of other reserve/park users or neighbours? Consider:

* Hours of operation
* Noise (levels/hours/type)
* Lighting (lux level, spread, hours)
* Parking requirements or members /users and the effect of this on the users
* Provision of a facility of the wider community or exclusion of other activities

#### Supporting Documentation

Please attach the following supporting documents:

1. Proof of company registration
2. Business Proposal to support application
3. Existing or forecasted budget
4. Applicable licencing permits e.g. liquor licence, food handling
5. Copy of insurance e.g. public liability

#### Declaration

|  |  |
| --- | --- |
| Full name:  |  |
| Position: |  |

|  |  |
| --- | --- |
| In making this application I declare I am authorised to do so and to the best of my knowledge the information provided is true and correct. | [ ]  |

#### Submission

Please submit your completed application by 4pm on Thursday the 29th of February 2024.

|  |  |  |
| --- | --- | --- |
| Email: |  | amenities.shared@swdc.govt.nz |
| Post to: |  | Property Portfolio Advisor, South Wairarapa District Council, Private Bag 6, Martinborough 5741 |
| Delivery: |  | Property Portfolio Advisor, South Wairarapa District Council, 19 Kitchener Street, Martinborough |