

Authorised Agent Appointment

Liquor and Gaming Branch
Department of Treasury and Finance

Only complete this form if you want to appoint someone else to deal with your application for a liquor licence or permit once you have lodged it. Please note that the applicant may personally still need to attend an interview (if required) in respect of the application.

1. Applicant

Applicant name
Date of birth
Residential address
Application type
Name of the premises, business or club

2. Authorised Agent

By completing this form, I authorise the agent listed below to act on my behalf in respect of my application listed above including the provision of any further particulars required by the Commissioner for Licensing. I understand that this may include the disclosure of my personal information to the agent (including but not limited to my criminal history and my consumer credit information).

Authorised Agent Name:
DOB: **Address:**
Phone Number: **Email address:**

The above personal details of the agent are used for the purpose of identifying the Authorised Agent when dealing with a matter in respect of the relevant application.

Applicant signature

Date