RACING, GAMING AND LIQUOR

RG301*

Liquor Licensing Act 1988

Liquor Licensing Amendment Regulations 2004

Made by the Governor in Executive Council.

1. Citation

These regulations may be cited as the *Liquor Licensing Amendment Regulations 2004*.

2. The regulations amended

The amendments in these regulations are to the *Liquor Licensing Regulations 1989**.

[* *Reprinted as at 8 March 2002. For amendments to 27 May 2004 see Western Australian Legislation Information Tables for 2003, Table 4, p. 214, and Gazette 30 January 2004.*]

3. Regulation 3 amended

Regulation 3(1) is amended by deleting the definition of "wine tax" and inserting instead —

"

"WET" has the meaning given to "wine tax" in section 33-1 of the Commonwealth *A New Tax System (Wine Equalisation Tax) Act 1999*.

".

4. Regulation 8 amended

(1) Regulation 8(1)(e) is amended by deleting "territorial waters of the State" and inserting instead —

" WA territorial seas ".

(2) After regulation 8(1) the following subregulation is inserted —

"

(1a) In subregulation (1)(e) —

"WA territorial seas" means 12 nautical miles of sea off the coast of the State, measured from baselines determined in accordance with Part II Section 2 of the United Nations Convention on the Law of the Sea done at Montego Bay on 10 December 1982.

".

5. Regulation 9 amended

Regulation 9(23) is repealed and the following subregulation is inserted instead —

"

(23) A licence granted for this purpose may permit the supply of samples of the packaged liquor that is for auction, for tasting.

".

6. Regulation 21 amended

Regulation 21(1) is amended by deleting "wine tax" and inserting instead —

" WET ".

7. Regulation 21A amended

(1) Regulation 21A(1) is amended by deleting "wine tax" and inserting instead —

" WET ".

(2) Regulation 21A(2) is amended by deleting "wine tax" in the 2 places where it occurs and inserting instead in both places —

" WET ".

8. Schedule 1 amended

Schedule 1 is amended by deleting Forms 19 and 19A and inserting the following forms instead —

"

Form 19

Liquor Licensing Act 1988

[Regulation 19(1)]

Application Form for Liquor Subsidy
(WA Producers Only)

1. **CLAIM FOR THE MONTH/PERIOD OF:**	Month/Quarter ____ Year ____
2. **AUSTRALIAN BUSINESS NUMBER:**	
3. **LIQUOR LICENCE NUMBER:**	
4. **NAME OF PREMISES:**	
5. **NAME OF LICENSEE:**	
ADDRESS OF LICENSED PREMISES:	Postcode

6. AMOUNT OF SUBSIDY CLAIM:	(a) WET subsidy claimable for Cellar door sales to persons other than liquor merchants (including sales made in a restaurant on the licensed premises). ……	$
	(b) WET subsidy claimable for Mail Order Sales. ……	$
(a) + (b) + (c) = Total for this period	(c) WET subsidy claimable for Tastings, promotions and donations for which no charge has been made. ……	$
	TOTAL FOR THIS PERIOD:	$
7. ADJUSTMENTS (IF APPLICABLE):	(e) Amount overpaid/underpaid for the month of	$
	TOTAL AMOUNT CLAIMED:	$

Have your bank details changed? No ❒ Yes ❒ If **yes** please provide new bank details below:

BANK NAME: _____ BRANCH NAME: _____

BSB No. _____ ACCOUNT No: _____

8. DECLARATION: I, _____ certify that:
name of licensee

WARNING
Penalties apply if you provide false or misleading information

(a) I am the licensee of the above named premises;

(b) the claim I am making for liquor subsidy is complete, true and correct;

(c) the claim I am making is honestly based on my WET obligations;

(d) I have all the necessary records to provide information to substantiate my claim;

(e) I will provide information to substantiate my claim, if requested, at any time by the relevant authorities;

(f) I have prepared and issued invoices reflecting the liquor subsidy in accordance with requirements of the Australian Taxation Office; and

(g) my prices to my customers incorporate the amount of the subsidy.

WHERE THE LICENSEE IS A COMPANY:

The common seal of _____ was hereunto affixed by order of its Directors in accordance with its Articles of Association, in the presence of:

Common Seal

Name and Signature of Director(s)

_____ Date: ____ / ____ / ____ Ph No: _____

_____ Date: ____ / ____ / ____ Ph No: _____

WHERE THE LICENSEE IS ONE OR MORE INDIVIDUAL PERSONS:

Signature(s)

_____ Date: ____ / ____ / ____ Ph No: _____

_____ Date: ____ / ____ / ____ Ph No: _____

FOR OFFICE USE ONLY	**DATE RECEIVED:** ____ / ____ / ____	**AMOUNT PAYABLE: $**
	DATE PAID: ____ / ____ / ____	**PAYMENT DETAILS:**

Form 19A

Liquor Licensing Act 1988

[Regulation 19(1)]

Application for Liquor Subsidy — Low Alcohol
(WA Wholesalers/Beer Producers)

1.	**CLAIM FOR THE MONTH/PERIOD OF:**	Month/Quarter ____ Year ____
2.	**AUSTRALIAN BUSINESS NUMBER:**	
3.	**LIQUOR LICENCE NUMBER:**	
4.	**NAME OF PREMISES:**	
5.	**NAME OF LICENSEE:**	
	ADDRESS OF LICENSED PREMISES:	Postcode

6.	**AMOUNT OF SUBSIDY CLAIM:**	Low Alcohol Beer	$
		Low Alcohol Wine	$
		TOTAL FOR THIS PERIOD:	$
7.	**ADJUSTMENTS (IF APPLICABLE):**	Amount overpaid/underpaid for the month of	$
		TOTAL AMOUNT CLAIMED:	$

Have your bank details changed? No ❒ Yes ❒ If **yes** please provide new bank details below:

BANK NAME: _____ BRANCH NAME: _____

BSB No. _____ ACCOUNT No: _____

8. DECLARATION: I, _____ certify that:
name of licensee

(a) I am the licensee of the above named premises;

(b) the claim I am making for liquor subsidy is complete, true and correct;

(c) I have all the necessary records to provide information to substantiate my claim;

(d) I will provide information to substantiate my claim, if requested, at any time by the relevant authorities;

(e) I have prepared and issued invoices reflecting the liquor subsidy; and

(g) my prices to my customers incorporate the amount of the subsidy.

WARNING
Penalties apply if you provide false or misleading information

WHERE THE LICENSEE IS A COMPANY:

The common seal of _____ was hereunto affixed by order of its Directors in accordance with its Articles of Association, in the presence of:

Common Seal

Name and Signature of Director(s)

_____ Date: ____ / ____ / ____ Ph No: _____

_____ Date: ____ / ____ / ____ Ph No: _____

WHERE THE LICENSEE IS ONE OR MORE INDIVIDUAL PERSONS:

Signature(s)

_____ Date: ____ / ____ / ____ Ph No: _____

_____ Date: ____ / ____ / ____ Ph No: _____

FOR OFFICE USE ONLY	**DATE RECEIVED:** ____ / ____ / ____ **DATE PAID:** ____ / ____ / ____	**AMOUNT PAYABLE: $** **PAYMENT DETAILS:**

".

By Command of the Governor,

M. C. WAUCHOPE, Clerk of the Executive Council.