



Service Nova Scotia and
Internal Services
Alcohol, Gaming, Fuel & Tobacco

Liquor Manufacturers Hospitality Room Permit Application

INSTRUCTIONS

Applications will be evaluated on a case by case basis and in accordance with NSLC Manufacturers Policy and the Nova Scotia Liquor Control Act. If not already on file with NSLC the following items may be requested.

- Manufacturer Permit or a Letter of Intent From NSLC
- Organizational Chart
- Criminal History Applications(s) for person(s) responsible for the Hospitality Room
- Zoning confirmation Letter
- Floor Plan (showing Production, Retail, Hospitality Room areas)
- Food Permit & Menu, if applicable
- Drink Menu / List of Products
- Fire Official Approval with Occupancy

- Incomplete or improperly completed forms may result in delay of processing.
- Each statement made in this application is subject to verification: It is a serious offense to knowingly provide false information in any part of this application.
- All questions and complete applications can be directed to:

**Alcohol, Gaming, Fuel & Tobacco Division
Service Nova Scotia and Internal Services
780 Windmill Road, 2nd Floor
PO Box 545
Dartmouth NS
B2Y 3Y8**

**PHONE: 1-877-565-0556 or 902-424-6160
Fax: 902-424-6313**

Email: AGDpermlicense@novascotia.ca

Website: <https://novascotia.ca/sns/access/alcohol-gaming.asp>

1. Applicant Information

Company Name: _____

Type: Company Partnership Sole Proprietor. Registry of Joint Stocks ID#: _____

Applicant Name: _____

Position: _____

Mailing Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Phone#: _____ Fax # ...: _____

Email: _____

2. Premises

Operating Name: _____

Expected opening date: _____

Civic Address of Premises

Mailing Address, if different from civic

Postal Code: _____

Postal Code: _____

3. Entertainment (do you plan to offer entertainment including background music)

No Yes. If yes, Details: _____

4. Payment

The one year permit fee (**\$100.00**) must be received prior to issuance. It will expire December 31 each year.

- Credit Card Payment: Visa/MasterCard –if your application is faxed, mailed, or dropped off to our office or you can provide this via phone.

DO NOT E-MAIL YOUR CREDIT CARD #

Visa/MC# _____ Exp. Date: _____

- Cheque payable to: **NS Alcohol and Gaming, Fuel & Tobacco Division**

Zoning Confirmation (if requested)

Within HRM: \$150 fee can be included with this application or contact HRM directly to purchase.

Outside HRM: contact our Permanent Licensing Division to see if our office can obtain this (for a fee) or you may purchase directly from your local municipality.

STATUTORY DECLARATION (Form must be notarized)

I (we) print name(s) _____ do solemnly declare:

THAT I (we) hereby apply for the type of Permit noted above pursuant to the Liquor Control Act and Nova Scotia Liquor Corporation Regulations.

AND THAT I (we) am nineteen years of age or over:

AND THAT I (we) am authorized to carry on business in the province whose officer, agent or manager in charge of the premises for which the Permit is issued is personally qualified as provided in clause 48 (3) (a) of the Act;

AND THAT the particulars furnished by me and forming the application for a Hospitality Room Permit and all subsequent documents submitted in support of this application are true and correct statements of fact and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act.

Applicant(s) Signature: _____
(To be signed in the presence of a Justice of the Peace, Commissioner of Oaths, Notary or Lawyer)

SWORN before me at _____ in the
Province of Nova Scotia this _____ day of _____ A.D. 20 _____

Signature & Stamp: Justice of the Peace, Commissioner of Oaths, Notary or Lawyer