

A statutory board established under the Gaming and Liquor Administration Act 2007

contact.us@liquorandgaming.nsw.gov.au www.liquorandgaming.nsw.gov.au

Key liquor licence details recorded as at 20 August 2019

Licence number:	LIQO660010514		
Licence name:	The Boathouse Palm Beach		
Licence type:	Liquor - on-premises licence		
Business type:	Restaurant		
Licence status:	Current		
Duration:	Unlimited duration		
Licence start date:	16/09/2009		
Licence expiry date:			
<u>Licensee</u>			
Organisation name:	PB GOROACEN PTY LIMITED		
ABN:		ACN:	634 543 632
Phone - daytime:	0299745440	Fax number:	
Email address:	heath@theboathousegroup.com.au		
Website:			
Business address:	227 Whale Beach Road WHALE BEAC		
Postal address:	227 Whale Beach Road WHALE BEAC	CH NSW 2107	
Start date:	16/08/2019		
<u>Manager</u>			
<u>Manager</u> Title:	Mr		
•	Mr Cousens		
Title:			
Title: Surname:	Cousens		
Title: Surname: Given name:	Cousens		
Title: Surname: Given name: Middle name:	Cousens Sam		
Title: Surname: Given name: Middle name:	Cousens Sam		
Title: Surname: Given name: Middle name: Start date:	Cousens Sam		
Title: Surname: Given name: Middle name: Start date: Contact Person	Cousens Sam 20/08/2019		
Title: Surname: Given name: Middle name: Start date: Contact Person Title:	Cousens Sam 20/08/2019 Mr		
Title: Surname: Given name: Middle name: Start date: Contact Person Title: Surname:	Cousens Sam 20/08/2019 Mr Cousens		
Title: Surname: Given name: Middle name: Start date: Contact Person Title: Surname: Given name: Middle name: Phone - daytime:	Cousens Sam 20/08/2019 Mr Cousens Sam		
Title: Surname: Given name: Middle name: Start date: Contact Person Title: Surname: Given name: Middle name: Phone - daytime: Mobile:	Cousens Sam 20/08/2019 Mr Cousens Sam 0403880129	Fax number:	
Title: Surname: Given name: Middle name: Start date: Contact Person Title: Surname: Given name: Middle name: Phone - daytime: Mobile: Email address	Cousens Sam 20/08/2019 Mr Cousens Sam 0403880129 sam@theboathousegroup.com.au	Fax number:	
Title: Surname: Given name: Middle name: Start date: Contact Person Title: Surname: Given name: Middle name: Phone - daytime: Mobile:	Cousens Sam 20/08/2019 Mr Cousens Sam 0403880129	Fax number:	

<u>Premises</u>

Address:	Governor Phillip Park, Barrenjoey Rd PALM BEACH NSW 2108		
Phone number:	02 9972 0647 Fax number:		
Email address:			
Website:			
LGA:	Northern Beaches Council		
ABS SLA:			
Start date:	16/09/2009		

Trading Hours

Consumption on premises

Day	Start Time	End Time	Start Date	End Date
Monday	10:00 AM	- 10:00 PM	16/09/2009	
Tuesday	10:00 AM	- 10:00 PM	16/09/2009	
Wednesday	10:00 AM	- 10:00 PM	16/09/2009	
Thursday	10:00 AM	- 10:00 PM	16/09/2009	
Friday	10:00 AM	- 10:00 PM	16/09/2009	
Saturday	10:00 AM	- 10:00 PM	16/09/2009	
Sunday	10:00 AM	- 10:00 PM	16/09/2009	

Conditions

Licence conditions imposed by the Liquor Act and Regulation apply. To view a copy of these conditions, go to www.liquorandgaming.nsw.gov.au

Additional licence conditions.

Condition type: Reference: Condition:	Condition 50 Section 11A of the	Condition source: Liquor Act 2007 applies to this licer	Authority
	licensed premises consecutive period	for a continuous period of 6 hours b	etween 4:00AM and 10:00AM during each nply with this 6-hour closure period along
Start date:	16/09/2009		
Condition type:	Condition	Condition source:	Liquor Act 2007
Reference:	101		
Condition:	Consumption on p Good Friday		can only be served with or ancillary
		to a m	eal in a dining area)
	Christmas Day		can only be served with or ancillary eal in a dining area)
	December 31st	Normal opening time until normal New Year's Day, whichever is the	closing time or 2:00 AM on
	authorised by an e	lso allowed at other times on Good F extended trading authorisation. Liquo I in a dining area after 5:00 AM on G	or can only be served with or
Start date:	28/10/2009		

Independent Liquor & Gaming Authority

Condition type:	Condition	Condition source:	Authority
Reference:	2010		
Condition:	impact on the well being of the	local and broader comr contained in the Comm	ate with a greater overall level of social nunity than what could be reasonably unity Impact Statement, application and this licence.
Start date:	16/09/2009		
Business owner			
Organisation name:			

Organisation name:	PB GOROACEN PTY LIMITED		
ABN:		ACN:	634 543 632
Phone - daytime:	0299745440	Fax number:	
Email address:	heath@theboathousegroup.com.au		
Website:			
Business address:	227 Whale Beach Road WHALE BEA	CH NSW 2107	
Postal address:	227 Whale Beach Road WHALE BEA	CH NSW 2107	
Start date:	16/08/2019		
Premises owner			
Organisation name:	DEPARTMENT OF INDUSTRY SKILL	S & REGIONAL DE	/ELOPMENT
ABN:	72 189 919 072	ACN:	
Phone - daytime:	0408814754	Fax number:	
Email address:	kyogleshow@yahoo.com.au		
Website:			
Business address:	Showground 43 Summerland Way NE	W PARK NSW 2474	
Postal address:	PO Box 19 KYOGLE NSW 2474		

16/08/2019

This licence is subject to a risk-based fee, payable annually. If the fee is not paid on time, the licence will be suspended or cancelled. Visit <u>https://www.onegov.nsw.gov.au/licencecheck</u> to find out the status of the licence.

Start date: