

- 1. In awarding Liquor Expresses (LE) to proponents the NLC
 - a. Will generally not permit a LE to be established in motels, hotels, restaurants, licensed establishments; and
 - b. Will generally award LEs to persons with already existing businesses.
 - c. Only staff over 19 years of age are eligible to sell product.
- LEs will be responsible for providing, at their expense, all interior design, renovation, and finish for the LE operations, in accordance with NLC standards. All operating expenses and costs will be the responsibility of the LE. Details of financial and spacing requirements are attached as Schedule A.
- 3. The LE will be required to carry an appropriate brand selection, as determined by the NLC, and will be required to have adequate retail and warehouse space, in the opinion of the NLC, to accommodate this selection.
- 4. The LE will purchase the products from the NLC on a payment basis acceptable to the NLC. The purchase price will be the regular retail price of the goods, less the LE commission.
- 5. The commission is as follows:
 - a. 10.3% on sales up to \$250,000; and
 - b. 5.15% on sales exceeding \$250,000 in any fiscal year of the NLC.
- 6. The LE will, if required by the NLC, pay the purchase price on delivery of the goods.
- 7. The LE will, if required by NLC, provide security acceptable to the NLC for the payment of the purchase price.
- 8. The NLC will deliver the product to the LE at schedules established by the NLC, and the NLC will bear the freight cost.
- 9. The LE will be required to report monthly/quarterly to the NLC, and the NLC will supply the necessary reporting forms and operating instructions.
- 10. The LE will operate as a self-service outlet.

- 11. The Liquor Express will be required to meet minimum technology requirements. This includes a PC/Laptop with licensed Antivirus software, POS and an active internet connection.
- 12. The applicant shall complete fully the attached application.
- 13. The NLC will perform certain background checks on prospective applicants, including, but not limited to the following:
 - a. Credit checks.
 - b. Financial information review from the applicant's financial institution or institutions;
 - c. Certificates of Conduct or equivalent from police authorities;
 - d. Where necessary, corporate searches respecting the name, existence, and directors of the corporation.
 - e. Searches of the Personal Property Securities Registry.
 - f. Searches of the Judgment Enforcement Registry; and
 - g. Searches, where necessary, of other registries and government authorities that record liens or potential liens against.
 - h. Where necessary, the applicant will be required to sign a consent or authorization necessary for such authorities to release information to the NLC.
- 14. The applicant, if a corporation, will be required to:
 - a. provide with the application an Officer's Certificate in form annexed hereto as Schedule C
- 15. The applicant will be evaluated based on a scoring grid. Topics evaluated include:
 - a. Location -15 points
 - b. Premises 25 points
 - c. Operations 40 points
 - d. Interview 15 points
 - e. Financials 15 points
 - f. Review for existing Liquor Express 10 points

Total achievable points – 120

16. Applicant will be required to provide annual sales, annual beer sales if applicable, customer transaction count and sales trend.

- 17. The successful applicant will be required to sign a Liquor Express Agreement for a fiveyear term and provide insurance documentation in form acceptable to the NLC.
- 18. Successful applicant will be required to adhere to NLC's Check 25 program. This includes annual training and monthly submissions. Monthly submissions will be submitted through NLCs Liquor Express portal.
- 19. Further details will be made available by the NLC's authorized representative during the site visit and inspection.

NOTWITSTANDING ANYTHING CONTAINED HEREIN, THE NLC SHALL NOT BE REQUIRED, AS A RESULT OF THE ADVERTISING FOR A LIQUOR EXPRESS, TO AWARD A LIQUOR EXPRESS OUTLET TO ANY APPLICANT, AND RESERVES THE RIGHT TO CANCEL THE REQUEST FOR PROPOSALS AND/OR READVERTISE AND/OR SELECT ANY SUITABLE PERSON OR CORPORATION, WHETHER AN APPLICANT OR NOT, FOR THE OPERATION OF THE LIQUOR EXPRESS.



SECTION A - Applicant CHECKLIST

Applicant answered all questions completely in Section A, B, C, D	& E.
☐ Applicant faxed the CRA Clearance Request to 709-754-5928	
☐ Applicant Included fax confirmation sheet from CRA	
Applicant will email or fax CRA clearance letter no later than 2 week	eks from
the advertisement end date.	
☐ Applicant Included three (3) completed Business Reference forms	
(Appendix A)	
☐ Completed the Personal History Report – Section C (ALL applicant	ts
partners & shareholders)	
☐ Applicant will email or fax Criminal Records Screening Certificates	(ALL
applicants) no later than 2 weeks from the advertisement end date.	
Please forward application to:	
Liquor Express Sales Specialist/Business Development	
Newfoundland and Labrador Liquor Corporation P.O. Box 8750, Station A	
St. John's, NL A1B 3V1	
donna.hudson@nlliquor.com Fax: (709) 724-2250	
Note: Applications will NOT be accepted unless all required documentation has been completed. Please ensure you review the checklist. Missing information can cause with processing your submission and applications sent after the closing date deadling not qualify.	delays
Date Signature of Applicant	



Please read the following carefully:

There are five sections to this application – Section A (Checklist), B, C, D and E. Failure to complete any or all sections may result in rejection of the application.

Upon receipt, the information contained is deemed CONFIDENTIAL.

The word "applicant" means the corporation or the persons or the person who will be appointed Operator and on whose behalf this application is made.

If the applicant is a corporation, the president must complete the application; in the case of a partnership, each partner must sign the application; in the case of a sole proprietorship, the owner must sign the application.

If additional copies of Sections B & C are required, the applicant should photocopy that section for use in completion of the application.

SECTION B - BUSINESS HISTORY REPORT

Please Print

1.	Area Applied for As Advertised:
2.	Business Name of Establishment:
3.	If operating under another name please list it below:
4.	Company Number:
5.	CRA Number:
_	

6. Location of Establishmen	IL.	
7. Physical Address:		Postal Code
(Please be sure to include the	street # in address)	
8. Mailing address:	Postal Co	ode
(Please be sure to include the	street #, if applicable, in address	
9. Business Establishment		
Telephone Number:	Fax Number:	E-Mail Address
10. Telephone Number Wh	ere Applicant Can Be Reached D	uring Rusiness Hours
10. Tolophone Hambol Him	oro Applicante Gan Bo Modolica B	arring Bacilloco Floare.
11. Names of Applicants (S Name	ole owner or partners or officers o	of a corporation): Address
Ivaille		Addiess
NOTE All III 4 44		
NOTE: All applicants must f	III OUT SECTION B	
40 1- 4	O. V	NI-
12. Is Applicant Sole Owner	r?Yes	INO

(a) If a	a partnership, list the pe	ercentage of ownership of ear	cn partner:	
		Name		Percentage
(b) If a	a corporation, give:			
	ncorporation:			
	Private Company:			
Provincia	al or Federal Charter:			
Number	of Common Shares Aut	horized:		
Number	of Common Shares Ou	tstanding:		
List Shar	eholders:			
	Name	Address	No. of Commo Shares Owned	Shares
	Name	Address	Commo Shares	on Preferred Shares
	o any Shareholders ha	Address Ve any direct or indirect final oholic beverages, including a	Commo Shares Owned	on Preferred Shares Owned y enterprise which
	o any Shareholders ha	ve any direct or indirect final	Commo Shares Owned	on Preferred Shares Owned y enterprise which
ma 	o any Shareholders ha anufactures or sells alco	ve any direct or indirect final	Commo Shares Owned ncial interest in an Brewers' Agent Lice	on Preferred Shares Owned y enterprise which
ma 	o any Shareholders ha anufactures or sells alco	ve any direct or indirect final oholic beverages, including a	Commo Shares Owned ncial interest in an Brewers' Agent Lice	on Preferred Shares Owned y enterprise which

If premises are	leased, enclose a copy of the lease.	
	rs of any mortgage or charge to which the property of the financial institution holding t	
The premises premises is	(type of construction)	and the age of the
Briefly describe	e the types of business now carried on at the ac	ddress given:
Current Hours	of Opening:	
Current Hours	of Opening:	
What is your c	urrent annual sales volume?	
What is your co	urrent annual sales volume?	

	No	
If yes, please state the ma	se and model.	
In conjunction with what t	pe of business will the Liquor Express store be operated?	,
Name of person who will	anage the Liquor Express store:	
Name, Address, and Dat other than the Manager:	of Birth of persons who will be employed in the establi	shm
	of Birth of persons who will be employed in the establi	shm
other than the Manager:		shn
other than the Manager: Name	Address	shm
Name Date of Birth	Address Place of Birth	shn
Name Date of Birth Name Date of Birth	Address Place of Birth Address	
Name Date of Birth Name Date of Birth Has any person named in	Address Place of Birth Address Place of Birth Question 21 ever been convicted of a criminal offence of the convicted of	

How long has the applicant carr	ried on business at the address given?
How long has the applicant car	rried on business described in Question 17?
Give three business references Appendix A and submit each	. Have your references complete the form include with your application.
listed in this Liquor Express app	erences need to be associated with the current busine olication and should be able to comment on the ccount(s), i.e. Grocery Supplier, Beer Vendors, Dairy, Tobacco, etc.
Name:	
Address:	
Telephone No:	Fax No:
Name:	
Address:	
Telephone No:	Fax No:
Name:	
Address:	
Telephone No:	

Date	Signature of Applicant
Date	Signature of Applicant (if required)
Date	Signature of Applicant (If required)



SECTION C - PERSONAL HISTORY REPORT

Please Print

Name in Full:

(Including middle name)

This form is to be completed by individual applicants, partners, or officers of a corporation applying for the Liquor Express. If additional forms are required, please photocopy this section. Upon completion, these reports are to be attached and will form part of the application.

Surname:

Given Names:

Date of Birth:			
(year / month / day)			
Place of Birth:			
Home Address:			
(Including Street & Street #,			
P.O. Box, City, Town, and			
Postal Code)			
Home Telephone #:			
Fax #:			
Place of Reside	ence During the Past 10 Ye	ars:	
	ence During the Past 10 Ye Place	ars: Date	

Details of Employment for the past 10 years:
 Dates Occupation Location

_____ Yes

If yes, give details:

_____ No

Yes No e details:	
e details:	
	direct, financial interest in any ent ncluding a Brewers' Agent Licence
YesNo	
e details, including Brewers' Ager	Licence No.:

Employer

or in your ass	ociation with a	ny group, compa
ankruptcy proc	eedings?	
	or in your ass pankruptcy proc	or in your association with an pankruptcy proceedings?

(NOTE – More than one applicant **please copy pages 12 to 14** and have all applicants/shareholders fill out Section C.)



SECTION D - POLICE & FINANCIAL CLEARANCE AUTHORIZATION

The Royal Canadian Mounted Police, The Royal Newfoundland Constabulary, or any other law enforcement agency, is hereby authorized to supply the Newfoundland Labrador Liquor Corporation with any information which the Corporation considers pertinent to my application for a Liquor Express store.

Please Print:				
Last Name	Gi	ven Names		
Date of Birth	Year	Month	Day	
				Signature of Applicant
				Date



CRA CLEARANCE

Please complete the attached form for tax clearance purposes: **FAX to the St. John's Taxation Centre at 709-754-5928.**

The requested letter will indicate whether your business is in good standing with Canada Revenue Agency with respect to HST/GST, Payroll Taxes and Corporate Taxes.

Once you receive a reply from Canada Revenue Agency, please forward the letter directly the NLC for consideration with your application. Please fax the letter to 709-724-2250. (Attention: Liquor Express Sales Specialist/Business Development).

Please note that this takes approximately 4 weeks to be processed, so please complete and fax as soon as possible.

Canada Revenue Agency St. John's Taxation Centre Fax Number: 709-754-5928

Please provide an account status comfort letter indicating the status and standing of the following business with respect to HST/GST, payroll tax, and corporate tax accounts.

Business Name:	
Business Number: BN	
Business Address:	
Business Telephone Number:	
Name of Authorized Individual:	



Financial Institution Information Authorization

The Newfoundland Labrador Liquor Corporation and/or its authorized representative is hereby authorized to obtain any information from the following Financial Institutions which it considers pertinent to my application for a Liquor Express store.

Please Print

Signature of Applicant

Date



Liquor Express - Category "D" Requirements

Estimated Annual Sales \$299,000 or less

Estimated Opening Inventory Investment: \$60,000

Minimum Linear Footage:

Perimeter Spirit Shelving: 120 ft – 140 ft

Wine Island Fixture: 32 ft - 48 ft

Ready to Drink Cold Space: 20 ft

Walk-In Beer Room 80 sqft



SCHEDULE B

OFFICER'S CERTIFICATE

I,	
 The Company was incorporated under the provisions of the [Corporations Act or equivalent in the jurisdiction] (the "Act") on the day of, A true and complete copy of the Certificate of Incorporation of the Company (the "Articles") and all amendments thereto are attached hereto, together with a current Certificate of Good Standing. The Articles have not been further amended and no proceedings have been 	
in the jurisdiction] (the "Act") on the day of, A true and complete copy of the Certificate of Incorporation of the Company (the "Articles") and all amendments thereto are attached hereto, together with a current Certificate of Good Standing. The Articles have not been further amended and no proceedings have been	
tanien er ane perianig te annena, ean en aer er eanner are eanner	lent
 The following persons are the directors and/or officers of the Company who hold the off set out opposite their name: 	ice
Name Position	
	

opposite their respective names:	
Name	Number and type of shares held.

The following persons are the shareholders of the Company who hold the shares set out

3.

- 4. No action has been taken by either the shareholders or directors of the Company to limit or restrict the powers of the directors, including the power to enter into contracts, borrow money and give security therefor, as conferred under the Act. There are no provisions in the Articles or by-laws of the Company or any unanimous shareholder agreement or declaration with respect to the Company which restricts, limits or regulates the powers of the Company or the directors of the Company to borrow money upon the credit of the Company, to issue, re-issue, sell or pledge debt obligations of the Company, to give guarantees on behalf of the Company, or to hypothecate, pledge, transfer, assign or subject to a security interest any of the present and future property, real and personal, movable and immovable, undertaking, rights and assets of the Company.
- 5. No proceedings are pending for the forfeiture of the Company's Certificate of Incorporation or for its dissolution, voluntarily or involuntarily.
- 6. The Company is duly registered, licenced and qualified and is up to date in the filing of all corporate and civil returns under the laws of Newfoundland and Labrador and any other jurisdiction where the nature of its business or the assets owned or leased by it so requires.
- 7. I have reviewed the terms of the Documents. Any director or officer who executes the Documents on behalf of the Company has full authority to so execute on behalf of the Company and to bind the Company with respect thereto.
- 8. The Company is not presently a party to any material litigation or proceedings and there is no litigation, or proceedings pending or threatened against the Company before any court, administrative board or agency, or any other tribunal and we know of no facts which might give rise to any such litigation or proceedings.
- 9. The Company has fully and adequately insured all of its property and assets to the full insurable value thereof with a reputable and established insurer.
- 10. There is no outstanding liability to any government or governmental or statutory agency or authority whereby any lien is outstanding or pending.
- 11. The Company has full capacity and power to own its properties, to carry on its business as the same is presently conducted, and execute and deliver the Documents.

12.	The entry into, execution and delivery of, and the performance of the obligations under and pursuant to the Documents by the Company do not conflict with or result in the breach of or constitute a default under any bond, debenture, notice, mortgage, indenture, agreement or other instrument to which it is a party.
D ()	
Dated	I this day of, 20
Presid	dent & Secretary



Appendix A - BUSINESS REFERENCE

Date:		
To: (Includ	le Business Name)	Attn:
Phone:		Fax Number:
From: _	-	Attn:
Phone:	·····	Fax Number:
Labrador your com	Liquor Corporation requires t	icant for a Liquor Express store, the Newfoundland the credit and business status of the applicant with eturn this document regarding the above referenced
1)	Amount of Credit granted:	
2)	Annual business volume:	
3)	Term Credit (Payment):	
4)	Credit Rating:	
5)	Present Account Balance:	
6)	Status of Account(s):	
Additiona	al Comments:	
		Company Official Signature



Appendix A - BUSINESS REFERENCE

Date:		
To: (Includ	le Business Name)	Attn:
Phone:		Fax Number:
From: _	-	Attn:
Phone:	·····	Fax Number:
Labrador your com	Liquor Corporation requires t	icant for a Liquor Express store, the Newfoundland the credit and business status of the applicant with eturn this document regarding the above referenced
1)	Amount of Credit granted:	
2)	Annual business volume:	
3)	Term Credit (Payment):	
4)	Credit Rating:	
5)	Present Account Balance:	
6)	Status of Account(s):	
Additiona	al Comments:	
		Company Official Signature



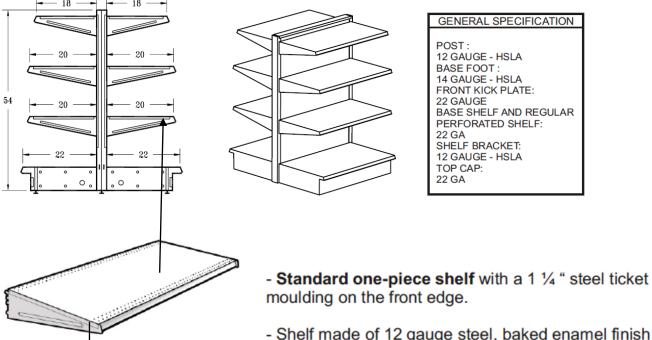
Appendix A - BUSINESS REFERENCE

Date: _			
To:	ude B	Business Name)	Attn:
Phone:			Fax Number:
From:			Attn:
Phone:			Fax Number:
Labrado your co	or Li ompa	quor Corporation requires any. Please complete and your earliest opportunity.	plicant for a Liquor Express store, the Newfoundland the credit and business status of the applicant with return this document regarding the above referenced
1)	Amount of Credit granted:	
2	2)	Annual business volume:	
3	3)	Term Credit (Payment):	
4	·)	Credit Rating:	
5	5)	Present Account Balance:	
6	5)	Status of Account(s):	
Additio	nal C	Comments:	
			Company Official Signature



Wine Fixture shelving requirements.

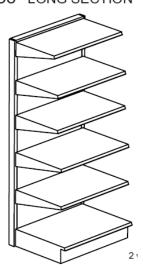
48" LONG SECTION



- Shelf made of 12 gauge steel, baked enamel finish and perforated.

Perimeter (Spirits) shelving requirements.

36" LONG SECTION



84

GENERAL SPECIFICATION

POST: 12 GAUGE - HSLA BASE FOOT: 14 GAUGE - HSLA FRONT KICK PLATE: 22 GAUGE BASE SHELF AND REGULAR PERFORATED SHELF: 22 GA SHELF BRACKET: 12 GAUGE - HSLA TOP CAP: 22 GA