

# Application for a Retail Tobacco and E-Cigarette Merchant's Licence

**ALL SECTIONS MUST BE COMPLETED – SEE NOTES OVERLEAF - INCOMPLETE FORMS WILL NOT BE ACCEPTED**

**Section 1 – New Applicant**

Full name of Proprietor (sole trader, partnership or company)

Registered Business or Company Name as listed with the Australian Business Register (ABR)

ABN / ACN

Contact Person (Mr/Mrs/Miss/Ms/Dr)

First name/s:

Postal Address for service of documents (as listed with ABR)

Street No. & Name:

Surname:

Contact Details

Suburb:

Phone:

State:

Postcode:

email:

From whom did you purchase this business?

Date premise will commence retailing Tobacco/E-Cigarette:

**Will you sell Tobacco Products?**

Yes / No

**Will you sell E-Cigarette Products?**

Yes / No

**Will you sell Shisha Products?**

Yes / No

Please tick the appropriate box below to describe your Tobacco Merchandising Premise Type:

- |   |  |  |                                       |                                 |
|---|--|--|---------------------------------------|---------------------------------|
| <input type="checkbox"/> Night Club/Wine Bar/Lounge Bar | <input type="checkbox"/> Sporting Venue                | <input type="checkbox"/> Service Station                             | <input type="checkbox"/> Hotel/Motel  | <input type="checkbox"/> Café   |
| <input type="checkbox"/> Community/Social Club          | <input type="checkbox"/> Function Centre               | <input type="checkbox"/> Supermarket                                 | <input type="checkbox"/> Newsagency   | <input type="checkbox"/> Casino |
| <input type="checkbox"/> Deli/Kiosk/Convenience Store   | <input type="checkbox"/> Liquor Store/Cellar           | <input type="checkbox"/> Mining Camp                                 | <input type="checkbox"/> Caravan Park | <input type="checkbox"/> Liquor |
| <input type="checkbox"/> Entertainment Complex          | <input type="checkbox"/> Shisha Premises               | <input type="checkbox"/> Temporary Venue (for tobacco products only) |                                       |                                 |
| <input type="checkbox"/> E-Cigarette / Vaping Store     | <input type="checkbox"/> Other (please specify): _____ |  |                                       |                                 |

**Section 2 – Address at which Tobacco / E-Cigarette Merchandising is conducted (place of business):**

Merchandising Trading Name:

Street No. & Name:

Suburb, State & Postcode:

**Section 3 – Number of points of sale:**

(i) How many points of sale are there at this outlet? (refer back of page)

(ii) Are any of the points of sale licenced to another entity? Yes  No

(iii) If Yes to (ii) above, who is the other licence holder?

**Section 4 – Period of Licence:** Unless otherwise provided for under the Act (e.g. cancellation or suspension), a Retail Tobacco and E-Cigarette Merchant's Licence will be valid for a period of 12 months.

**Section 5 – Declaration** (this section **MUST** be completed in order for your licence to be issued)

I  of  (residential address):

Print Name in Block Letters

**declare that the above details are true and correct. I understand that false or misleading information will result in rejection of this current (and any future) application. Maximum penalty: \$50,000.**

Signature of Authorised Person

Date

Contact phone number



Government  
of South Australia

SA Health

**Tobacco Licensing**  
Health Protection & Licensing Services

PO Box 6  
RUNDLE MALL SA 5000

Tel: (08) 8226 7100  
Fax: (08) 8226 7102

public.health@sa.gov.au

## Notes

### Section 1 – New Applicant

This section should only be completed if you are selling tobacco and/or e-cigarette products for the first time, have taken over selling tobacco and/or e-cigarette products from another person or your existing licence details have changed.

### Section 2 – Address at which Tobacco / E-Cigarette Merchandising is conducted

Please note that each address where tobacco and/or e-cigarette products are sold must have its own licence. Therefore you cannot list multiple addresses under one licence.

You must complete this section by including the address from which tobacco and/or e-cigarette merchandising is carried on (for example the location of the shop and, in the case of tobacco products, vending machine or vehicle and registration details for mobile vans).

### Section 3 – Number of points of sale

A point of sale is:

- (a) a contiguous retail service counter from which tobacco and/or e-cigarette products can be purchased,
- (b) a tobacco only vending machine.

A 'point of sale' may be licenced by another entity at the same premise (e.g. a tobacco vending machine) however, it must still be included in the number of 'points of sale' listed on your application. The number of points of sale is determined on a **per site basis**; regardless of how many licences are held for that site.

**A liquor licenced premises with an existing Retail Tobacco and E-Cigarette Merchant's Licence can have up to five points of sale** (one of which may be a tobacco vending machine). Businesses that currently have less than five points of sale should not exceed their existing number of points of sale. For the purpose of this condition, a 'liquor licenced premises' is a place licenced under Part 3 of the *Liquor Licencing Act 1997*, but does *not* include a place with a 'retail liquor merchant's licence' under Section 37 of that Act.

**A retail premise without a liquor licence can have one point of sale** (which includes those with a 'retail liquor merchant's licence' under Section 37 of the *Liquor licencing Act 1997*).

In accordance with Section 9 (3) of the *Tobacco and E-Cigarette Products Act 1997*, the Minister can vary licence conditions. If you wish to apply to vary your licence condition to allow more points of sale than those allowed above, you must complete an 'Application for Variation to the number of Points of Sale of Tobacco and E-Cigarette products' form. These can be obtained from the web [www.sahealth.sa.gov.au/tobaccocolaws](http://www.sahealth.sa.gov.au/tobaccocolaws) or from the Department for Health and Wellbeing (refer above for address details).

### Section 4 – Period of Licence

A Retail Tobacco and E-Cigarette Merchant's Licence can only be issued for a period of 12 months unless otherwise provided for under the *Tobacco and E-Cigarette Products Act 1997* (e.g. cancellation or suspension).

### Section 5 – Declaration

This section **MUST** be completed in order for your licence to be issued. Sign, date and return this notice with your remittance before expiration, or if no longer required please advise in writing – refer contact details below.

### Approval Process

The approval process involves assessing your application against the South Australian *Tobacco and E-Cigarette Products Act 1997*, the Tobacco and E-cigarette Products Regulations 2019 and any other relevant information and/or concerns.

Tobacco and e-cigarette products are known to be health harming, addictive and/or associated with potentially negative health/social/financial outcomes. As such, approval of any given application is not a certainty.

**Generally, it may take up to 6 months for an application to be assessed, and if approved, granted.**

**However, this process may take longer depending on circumstances relating to the application, the business unit's current workload demands, and/or other relevant information or concerns.**

Approval and issue of a licence should not be taken for granted/assumed. Businesses should not make financial commitments and/or set up dedicated premises on the assumption that their licence application will be approved, or that it will be approved within a given timeline.

If your application is approved, a Tax Invoice will be sent to you. **The current annual fee for this financial year is \$315.00.** In the case of tobacco and e-cigarette products, you cannot sell these products until SA Health, Health Protection and Licensing Services, SA Health, has assessed approved, and issued a Retail Tobacco and E-Cigarette Merchant's Licence.

Please submit your completed application form to:

Post: Tobacco Licensing  
Health Protection & Licensing Services  
PO Box 6  
Rundle Mall SA 5000

OR

email: [public.health@sa.gov.au](mailto:public.health@sa.gov.au)