

DUDLEY METROPOLITAN BOROUGH

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS ACT) 1982 – PART II, SCHEDULE 3

**APPLICATION FOR GRANT / RENEWAL / TRANSFER / VARY OF A
SEXUAL ENTERTAINMENT VENUE LICENCE**

The information you provide on this form is subject to the provisions of the Data Protection Act 1998.

The information will be held confidentially and will be retained for the purposes of processing your request. Further Data Protection information can be obtained from the Information Commissioners website at: www.informationcommissioner.co.uk

This authority is required by law to protect the public funds it administers. It may share information provided to it with other bodies responsible for auditing or administering public funds in order to prevent and detect fraud.

PLEASE COMPLETE THIS FORM ACCURATELY AND IN FULL. UNLESS REQUESTED, TICKS/CROSSES/LINES THROUGH THE RELEVANT BOX WILL NOT BE ACCEPTED. PLEASE NOTE THAT ANY OMISSION OR FALSE INFORMATION MAY MAKE YOU LIABLE TO PROSECUTION

I / We

(insert name(s) of applicants)

apply for the Grant / Renewal / Variation / Transfer* of a Sex Entertainment Venue Licence for the premises described in Part 1 below (the premises) in accordance with Schedule 3 of the Local Government (Miscellaneous Provisions) Act 1982.

*(*delete as necessary)*

Part 1 – Premises Details

Full Postal Address (including trading name, post code and telephone number of premises)

Part 2 – Applicant Details

Please state whether you are applying for a licence as:-

(Please tick appropriate response)

		Yes	No
(a)	Individual or Individuals		
(b)	A person other than an individual		
i	as a limited company		
ii	as a partnership		
iii	as an unincorporated association or		
iv	other (e.g. a statutory corporation)		

(A) Individual Applicant Details

Mr	Mrs	Miss	Ms	Other Title

1.	Surname	
2.	Forename(s)	
3.	Date of Birth	
4.	Place of Birth	
5.	Date became resident in UK	
6.	Current permanent residential postal address (inc. Post Code)	
7.	Provide a telephone number at which the applicant can be contacted during normal office hours	
8.	Provide an alternative postal address to which written communications are to be sent if different to No 6	
9.	E-mail address <i>(optional)</i>	

(If more than one individual please use continuation sheet)

(A) Individual Applicant Details – (Continuation Sheet)

Mr	Mrs	Miss	Ms	Other Title
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10. Surname	
11. Forename(s)	
12. Date of Birth	
13. Place of Birth	
14. Date became resident in UK	
15. Current permanent residential postal address (inc. Post Code)	
16. Provide a telephone number at which the applicant can be contacted during normal office hours	
17. Provide an alternative postal address to which written communications are to be sent if different to No 6	
18. E-mail address <i>(optional)</i>	

(B) Other Applicants

19. Is the application being made by an individual on behalf of a partnership or a body corporate	Yes	No
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If Yes, *(please complete all sections – including your details):-*

20. Surname	
21. Forenames(s)	

22.	Current residential address of the individual making application on behalf of the partnership or body corporate	
23.	Name of the individual body corporate or unincorporated body to whom the licence is to be issued	
24.	Permanent postal address of the registered or principal office of the body corporate or unincorporated body	
25.	What type of company is the applicant (eg. public or private limited by share or guarantee etc?)	
26.	In which Country is the company incorporated?	
27.	What is the date of incorporation of the company?	
28.	The registered number of the company?	
29.	If the applicant is a body corporate or an unincorporated body, completed the table in respect of each of the Directors, the Company Secretary, or other persons responsible for the management of the body. In case of a partnership details of all the partners must be given.	
	Name (in full) *Mr / Mrs / Miss / other	Permanent resident address throughout six months immediately preceding this application
		Date became resident in the UK (if applicable)

(Please use Continuation sheet if necessary)

30. In respect of each individual who is responsible for the management of the premises in the absence of the licence holder please supply the following details:-					
Forename	Surname	Former name (if any)	Permanent residential address	Date of Birth	Place of Birth

(C) Personal / Companies Interests

31. Has the applicant a financial interest in the business which is the subject of this application? If "yes" to what extent?	
32. Is the whole of the business owned by the applicant?	
33. If the applicant's interest in the premises is a leasehold one please state:-	
(i) Whether a head lease or a sub-lease	
(ii) The name and address of the landlord and the superior land where applicable	
(iii) The length of the unexpired term	

(D) Criminal Convictions_

34. Has the applicant or any persons named in this form any convictions?	Yes	No		
Details of any relevant previous convictions and cautions <i>(Please give details of any "unspent" convictions or cautions)</i>				
Full Name in which cautioned	Police Station of caution	Date	Nature of Offence	Sentence
Full Name in which convicted	Court of Conviction	Date	Nature of Offence	Sentence

(Please use separate sheet if necessary)

Part 3 – Premises Details

35. Is there a premises licence, or club premises certificate as issued under the Licensing Act 2003 in force for the premises subject of this application?	Yes	No
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If yes:- (Please complete section 36 in full)

36. (i) Licence Reference Number		
(ii) Name and address of premises licence holder		
(iii) Name and address of the nominated DPS		
(iv) Authority where DPS personal licence was issued		
(v) Reference number of the personal licence		
37. Under what names are or will the premises be known		
38. State whether the application is in respect of premises or a vehicle or a vessel or a stall		
39. Where the licence is sought in respect of a vehicle, vessel, or a stall state where it is to be used as a 'sex entertainment venue'		
40. Are the premises described above to be used under the licence?	Yes	No

41.	Are the whole of the premises named in the application to be used under the licence?						Yes	No
42.	If the answer to Question 41 above is "No" please state:-							
	(i) Which part of the premises is used for the purposes of the licence							
	(ii) The use to which the remainder of the premises are to be put							
	(iii) The names of those who are responsible for the management of the remainder of the premises							
43.	Give details of the times during which it is proposed to open the premises:-							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
	From:	From:	From:	From:	From:	From:	From:	
	To:	To:	To:	To:	To:	To:	To:	

44.	Are the premises, vehicle, vessel or stall in use as a 'sex entertainment venue' at the date of this application?						Yes	No
45.	Give the date from which the licence is required							
46.	Is there any further information which the applicant wish the Council to take into account when considering this application?							

APPLICANTS ARE INFORMED THAT ANY PERSON WHO, IN CONNECTION WITH AN APPLICATION FOR THE GRANT, RENEWAL OR TRANSFER OF A LICENCE MAKES A FALSE STATEMENT WHICH HE KNOWS TO BE FALSE IN ANY MATERIAL RESPECT, OR WHICH HE DOES NOT BELIEVE TO BE TRUE, IS GUILTY OF AN OFFENCE AND LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING £20,000.

DECLARATION

I declare that the information given above is true and complete in every respect.

Dated this day of 20

Name of Signatory

Signature

Designation of Signatory