

Application for a premises licence under the Gambling Act 2005 (standard form)

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

If you are completing this form by hand, please write legibly in block capitals using ink. Use additional sheets if necessary (marked with the number of the relevant question). You may wish to keep a copy of the completed form for your records.

Where the application is—

- In respect of a vessel, or
- To convert an authorisation granted under the Betting, Gaming and Lotteries Act 1963 or the Gaming Act 1968,

the application should be made on the relevant form for that type of premises or application.

Part 1 – Type of premis	es licence applied for	
Regional Casino	Large Casino 🗌	Small Casino
Bingo	Adult Gaming Centre	Family Entertainment Centre
Betting (Track)	Betting (Other)	
Do you hold a provisiona	I statement in respect of the premises	s? Yes 🗌 No 🗌
	ase give the unique reference number	er for the provisional statement (as
set out at the top of the fi	rst page of the statement):	
Part 2 – Applicant Detai	ils	
	lease fill in Section A. If the application of partnership, please fill in	
Section A		
Individual applicant		
1. Title: Mr Mrs Mis	ss	cify)
2. Surname:	Other name	e(s):
1 2	the applicant's operating licence or, it en in any application for an operating	• •

3. Applicant's address (home or business – [delete as appropriate]):	
Postcode:	
4(a) The number of the applicant's operating licence (as set out in the operating licence):	
4(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:	
5. Tick the box if the application is being made by more than one person.	
[Where there are further applicants, the information required in questions 1 to 4 should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants".]	
Section B	
Application on behalf of an organisation	
6. Name of applicant business or organisation:	
[Use the names given in the applicant's operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence.]	
7. The applicant's registered or principal address:	
Postcode:	
8(a) The number of the applicant's operating licence (as given in the operating licence):	
8(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:	
9. Tick the box if the application is being made by more than one organisation.	
[Where there are further applicants, the information required in questions 6 to 8 should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants".]	

Part 3 – P	Premises Details		
10. Propos	sed trading name to	be used at the p	oremises (if known):
11. Addres	ss of the premises (or, if none, give	a description of the premises and their location):
Postcode:			
	none number at pre	mises (if known):	
example,	a shopping centre o	or office block). T	ing, please describe the nature of the building (for he description should include the number of floors e premises are located.
14(a) Are	the premises situat	ed in more than o	one licensing authority area?
Yes/No [d	delete as appropriat	te]	
14(b). If the answer to question 14(a) is yes, please give the names of all the licensing authorities within whose area the premises are partly located, other than the licensing authority to which this application is made:			
Part 4 – T	imes of operation		
be used for [Where the	or longer periods that	an would otherwi	xclude a default condition so that the premises may se be the case? Yes/No [delete as appropriate] s not subject to any default conditions, the answer to
·	-	on 15(a) is yes, p	lease complete the table below to indicate the times
when you	want the premises	to be available fo	or use under the premises licence.
	011	First to	Data the of a management of the management of th
Mon	Start	Finish	Details of any seasonal variation
Mon	hh:mm	hh:mm	
Tue Wed			
Thurs			
Fri			

16. If you wish to apply for a premises licence with a condition restricting gambling to specific periods in a year, please state the periods below using calendar dates:

Sat Sun

Part 5 – Miscellaneous	
17. Proposed commencement date for licence (leave blank if you want the licence to common as it is issued): (dd/mm/yyyy)	mence as
18(a). Does the application relate to premises which are part of a track or other sporting versich already has a premises licence? Yes/No [delete as appropriate]	enue
18(b). If the answer to question 18(a) is yes, please confirm by ticking the box that an apply vary the main track premises licence has been submitted with this application.	lication to
19(a). Do you hold any other premises licences that have been issued by this licensing au	thority?
Yes/ No [delete as appropriate]	,
19(b). If the answer to question 19(a) is yes, please provide full details:	
20. Please set out any other matters which you consider to be relevant to your application.	:
Part 6 – Declarations and Checklist (Please tick)	
I/ We confirm that, to the best of my/ our knowledge, the information contained in this	
application is true. I/ We understand that it is an offence under section 342 of the	
Gambling Act 2005 to give information which is false or misleading in, or in relation to,	
this application.	
I/ We confirm that the applicant(s) have the right to occupy the premises. Checklist:	
Payment of the appropriate fee has been made/is enclosed	
A plan of the premises is enclosed	
 I/ we understand that if the above requirements are not complied with the 	
application may be rejected	
 I/ we understand that it is now necessary to advertise the application and give the appropriate notice to the responsible authorities 	

Part 7 – Signa	atures	
	of applicant or applicant's solicitont, please state in what capacity:	or or other duly authorised agent. If signing on behalf
Signature:		
Print Name:		
Date:	(dd/mm/yyyy)	Capacity:
22. For joint applications, signature of 2nd applicant, or 2nd applicant's solicitor or other authorised agent. If signing on behalf of the applicant, please state in what capacity: Signature:		
Print Name:		
Date:	(dd/mm/yyyy)	Capacity:
	of further applicant(s)". The shee	ease use an additional sheet clearly marked et should include all the information requested in
	plication is to be submitted in an and should be a copy of the perso	electronic form, the signature should be generated on's written signature.]
Part 8 – Conta		
23(a) Please g	live the name of a person who ca	an be contacted about the application:
23(b) Please g can be contact	•	pers at which the person identified in question 23(a)
24. Postal add	lress for correspondence associa	ited with this application:
Postcode:		
	nappy for correspondence in related and the late and the	tion to your application to be sent via e-mail, please correspondence to be sent:



NOTICE OF APPLICATION FOR A PREMISES LICENCE (Form A)

Spelthorne Borough Council Council Offices Knowle Green Staines Middx TW18 1XB
The application for a premises licence has been made to the following licensing authority:
[Give the trading name to be used at the premises, and the address of the premises (or, if none, give a description of the premises and their location).]
The application relates to the following premises:
has made an application for a premises licence. [Insert here the kind of premises licence being applied for]
the number of whose operating licence is who applied for an operating licence on [Delete as appropriate. Insert the reference number of the applicant's operating licence (as set out in the operating licence). Where an application for an operating licence is in the process of being made, indicate the date on which the application was made.]
Postcode: [Give the full address of the applicant as set out in Part 2 of the application for a premises licence]
of the following address:
[Give the full name of the applicant as set out in Part 2 of the application for a premises licence]
Notice is hereby given that:
This notice is issued in accordance with regulations made under section 160 of the Gambling Act 2005

Website: www.spelthorne.gov.uk

Information about the application is available from the licensing authority, including the arrangements for viewing the details of the application.

The following person connected with the applicant is able to give further information about the application:

[This entry is optional and is to be included if the applicant wishes to provide the name, telephone number and (if available) e-mail address of a person connected with the applicant who is able to answer questions and provide further information about the application.]

Any representations under section 161 of the Gambling Act 2005 must be made no later than the following date:

[Please insert last day on which representations may be made in relation to the application. The period for making representations is 28 days (inclusive) starting with the day on which the application for the premises licence was made to the licensing authority.]



NOTICE OF APPLICATION FOR A PREMISES LICENCE (Form B)

This notice is issued in accordance with regulations made under section 160 of the Gambling Act 2005

Notice is hereby given that the persons or organisations whose details are given in the Schedule to this notice have made an application for a premises licence.

[Insert here the kind of premises licence being applied for]

The application relates to the following premises:

[Give the trading name to be used at the premises, and the address of the premises (or, if none, give a description of the premises and their location).]

The application for a premises licence has been made to the following licensing authority:

Spelthorne Borough Council

Council Offices

Knowle Green

Staines

Middx

TW18 1XB

Website: www.spelthorne.gov.uk

[Insert name of the licensing authority and the address of its principal office, followed by the address of its website]

Information about the application is available from the licensing authority, including the arrangements for viewing the details of the application.

The following person connected with the applicant is able to give further information about the application:

[This entry is optional and is to be included if the applicant wishes to provide the name, telephone number and (if available) e-mail address of a person connected with the applicant who is able to answer questions and provide further information about the application.]

Any representations under section 161 of the Gambling Act 2005 must be made no later than the following date:

[Please insert last day on which representations may be made in relation to the application. The period for making representations is 28 days (inclusive) starting with the day on which the application for the premises licence was made to the licensing authority.]

Schedule of Applicants
The persons or organisations making the application are as follows:
Name of 1 st Applicant:
[Give the full name of the applicant as set out in Part 2 of the application for a premises licence is more than one applicant]

Address of 1st Applicant:

Postcode:

[Give the full address of the applicant as set out in Part 2 of the application for a premises licence]

The number of the operating licence held by 1st Applicant is:

The 1st Applicant applied for an operating licence on

[Delete as appropriate. Insert the reference number of the applicant's operating licence (as set out in the operating licence). Where an application for an operating licence is in the process of being made, indicate the date on which the application was made.]

Name of 2nd Applicant:

[Give the full name of the applicant as set out in Part 2 of the application for a premises licence is more than one applicant]

Address of 2nd Applicant:

Postcode:

[Give the full address of the applicant as set out in Part 2 of the application for a premises licence]

The number of the operating licence held by 2nd Applicant is:

The 2nd Applicant applied for an operating licence on

[Delete as appropriate. Insert the reference number of the applicant's operating licence (as set out in the operating licence). Where an application for an operating licence is in the process of being made, indicate the date on which the application was made.]

[Where there are more than two applicants, also give the same information for the other applicants.]