

Application for the Review of a Premises Licence or Club Premises Certific under the Licensing Act 2003

Licensing, Town Hall, Feethams, Darlington. DL1 5QT Telephone: 01325 388562 Fax: (01325) 388555 Web site: http://www.darlington.gov.uk Email: licensing@darlington.gov.uk

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

that your an necessary.	nswers are inside the boxes and written in bla	ack ink. Us	e additional she	ets if
You may wi	sh to keep a copy of the completed form for yo	our records.		
I/We	Insert name(s) of applicant)			
apply for the review of a premise licence under section 51 apply for the review of a club premise certificate under section 87 of the Licensing Act 2003 for the premises described in Part 1 below (Please ✓as applicable) PART 1 – Premises or Club Premises Details				
Postal addre	ess of premises or, if none, ordnance survey map	reference or	description	
Post Town		Post Code If known		
Name of Pre	mise Licence Holder or Club holding Club Premis	e Certificate	(if known)	
Number of P	remise Licence or Club Premise Certificate (if kno	own)		
PART 2 - A	pplicant Details (please read guidance note 1)		
Please state	e whether you are applying for a premises licer	nce as		
I am		please 🗸	as appropriate	
•	dual, body or business which is not a response A or B below)	onsible aut	hority	
2) a respor (Please comp	esible authority lete C below)			
3) a member of the club to which this application relates (Please complete A below)				

(A) INDIVIDUAL APPLICANTS (fill in as applicable)			
Please √yes			
Mr Mrs Miss Ms Other Title (for example Rev)			
Surname First Names			
I am 18 years old or over Please ✓ yes			
Current postal address if different from premises address			
Post Town Post Code			
Daytime contact telephone number			
Email address (optional)			
(B) OTHER APPLICANTS (fill in as applicable)			
Name			
Address			
/ ddi coo			
Telephone number (if any)			
Email address (optional)			
(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT (fill in as applicable)			
Name			
Address			
Telephone number (if any)			
Email address (optional)			
This application to review relates to the following licensing objective(s)			
Please ✓ one or more boxes			
1) The prevention of crime and disorder			
2) Public safety			
3) The prevention of public nuisance			
4) The protection of children from harm			

Please state the ground(s) for review (please	se read guidance note 2)

Please provide as much information as possible to support the application (please read guidance note 3)	
	ļ

Please √yes

	D D	M I	VI Y	Y Y	Υ
If yes please state the date of that application					
If you have made representations before relating to the	e premi	ses p	olease	state	what
they were and when you made them					

Have you made an application for review relating to the premise before

DI	45 - 1	_	
Please	tick	✓	ves

I have sent copies of this form and enclosures to the responsible authorities and the premise licence holder or club holding the club premises certificate as appropriate			
I understand that if I do not comply with the above requirements my application will be rejected			
SCALE, UNDE	ENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD RESERVED RESERVED TO THE STANDARD RESERVED RECTION WITH THIS APPLICATION.		
PART 3 – SIG	GNATURES (please read guidance note 10)		
	applicant or applicant's solicitor or other duly authorised agent (please read 5). If signing on behalf of the applicant, please state in what capacity.		
Signature			
Date			
Capacity			
	(where not previously given) and postal address for correspondence associated with (please read guidance note 6)		
Post Town	Postcode		
Telephone number (if any) Email address (optional)			

Notes for Guidance

- 1. a responsible authority includes the local police, fire and rescue authority and other statutory bodies which exercise specific functions in the local area.
- 2. the ground(s) for review must be based on one of the licensing objectives
- 3. please list any additional information or details for example dates of problems which are included in the grounds for review if available
- 4. the application form must be signed
- 5. an applicant's agent (for example solicitor) may sign the form on their behalf provided that that have actual authority to do so
- 6. this is the address which we shall use to correspond with you about this application