

## East Cambridgeshire District Council

Application for the review of a premises licence or club premises certificate under the Licensing  $Act\ 2003$ 

## PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

If you are completing this form by hand please we that your answers are inside the boxes and writte You may wish to keep a copy of the completed for the complete for	rite legibly in block capitals. In all cases ensure n in black ink. Use additional sheets if necessary.
I (Insert name of applicant) apply for the review of a premises licence und premises certificate under section 87 of the Lie Part 1 below (delete as applicable)	
Part 1 – Premises or club premises details	
Postal address of premises or, if none, ordnan	ce survey map reference or description
Post town	Post code (if known)
Name of premises licence holder or club holdi	ng club premises certificate (if known)
Number of premises licence or club premises	certificate (if known)
Trumber of premises needed of clab premises	seruncute (ii kilowii)
Part 2 - Applicant details	
I am	Please tick ✓ yes
1) an individual, body or business which is not a authority (please read guidance note 1, and compor (B) below)	•
2) a responsible authority (please complete (C) b	elow)

3) a member of the club to which this application relates (please complete (A) below)					
(A) DETAILS OF INDIVIDUAL APPLICANT (fill in as applicable)					
Please tick ✓ yes					
Mr Mrs	Miss	Ms	Other title (for example, Rev)		
Surname		First names			
I am 18 years old or	over		Please tick ✓ yes		
Current postal address if different from premises address					
Post town		Post Code			
Daytime contact telep	phone number				
E-mail address (optional)					
(B) DETAILS OF OTHER APPLICANT					
Name and address					
Telephone number (if	any)				
E-mail address (option	nal)				

## (C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Telephone number (if any)  E-mail address (optional)  This application to review relates to the following licensing objective(s)  Please tick 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 read guidance note 2)
E-mail address (optional)  This application to review relates to the following licensing objective(s)  Please tick 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
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3) the prevention of public nuisance 4) the protection of children from harm
4) the protection of children from harm
Please state the ground(s) for review (please read guidance note 2)

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

Have you made an application for review relating to the premises before	Please tick ✓ yes
If yes please state the date of that application	Day Month Year
If you have made representations before relating to the p and when you made them	remises please state what they were

I have sent copies of this form and enclose	sures to the responsible authorities				
and the premises licence holder or club h					
<ul><li>as appropriate</li><li>I understand that if I do not comply with</li></ul>	the above requirements my				
application will be rejected					
IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.					
Part 3 – Signatures (please read guidance note	4)				
Signature of applicant or applicant's solicitor or other duly authorised agent (please read guidance note 5). If signing on behalf of the applicant please state in what capacity.					
Signature					
Date					
Capacity					
Contact name (where not previously given) an	d postal address for correspondence				
associated with this application (please read gui					
Post town	Post Code				
Telephone number (if any)					
If you would prefer us to correspond with you using an e-mail address your e-mail address (optional)					
(บุทบบแลเ)					

Please tick ✓ yes

## **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 they have actual authority to do so.
- 6. This is the address which we shall use to correspond with you about this application.