



Name of Premises:

Address of Premises:

Please send your completed application form and any accompanying documents by email to <u>licensing@wigan.gov.uk</u> or alternatively, you can post them to:

☑ Licensing Team, PO Box 100, Wigan WN1 3DS

The Act states that a copy of your application and accompanying documents must be sent to the following Responsible Authorities. On receipt we will forward a copy to the following:

- ☑ The Chief Officer of Police for the area in which the premises are situated
- ☑ The Fire Authority for the area in which the premises are situated
- ☑ The Local Planning Authority for the area in which the premises are situated
- ☑ The body recognised as being responsible for Protection of Children from Harm for the area in which the premises are situated
- ☑ The Health and Safety Authority for the area in which the premises are situated
- ☑ The relevant Licensing Authority
- ☑ The Environmental Health Authority for the area in which the premises are situated
- ☑ Inspectors of Weights and Measures
- ☑ The Director of Public Health
- ☑ In respect of vessels only the British Waterways Board
- ☑ Home Office Immigration Enforcement (on behalf of the Secretary of State).

Notes for Guidance

- 1. A responsibility authority includes the local police, fire & 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.

Please read the following instructions first

Before completing this form please read the guidance notes. 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. You may wish to keep a copy of the completed form for your records.

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

I [______

_____] apply for the

Insert name of applicant

review of a premises licence under section 51* / apply for the review of a club premises certificate under section 87* of the Licensing Act 2003 for the premises described in Part 1 below (*delete as applicable)

Part 1 – Premises or club premises details

Postal address of premises or club premises, if description:	none, ordnance survey map reference or
Post town	Postcode

Name of premises licence holder or club holding club premises certificate (if known)

Number of premises licence or club premises certificate (if known)

Part 2 - Applicant Details

I am

Please tick \checkmark Yes

- an individual, body or business which is not a responsible authority (please read (please read guidance note 1, and complete (A) or (B) below
- 2) a responsible authority (please complete (C) below)
- 3) a member of the club to which this application relates (please complete (A) below

(A)	Details	of Individual	Applicant (fill	in as applicable)	
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Ir Mrs Miss Ms Other title (e.g. Rev)				
urname First name(s)				
Please tick ✓ Yes				
am 18 years old or over				
urrent address				
ost Town Postcode				
Daytime contact telephone number				
-mail address (optional)				

(B) Details of other applicant

Name and Address		
Telephone number (if any)		
E-mail address (optional)		

(C) Details of responsible authority applicant

Name and Address	
Telephone number (if any)	
E-mail address (optional)	

This application to review relates to the following licensing objective(s)

Please tick \checkmark one of 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)

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

Please tick ✓ (Yes)

Have you made an application for review relating to this premises before

If yes please state the date of that application

Day Month		Ye	ar		

If you have made representations before relating to this premises please state what they were and when you made them

Please tick ✓ (Yes)

- I understand that a copy of this form and enclosures will be sent to all responsible authorities and the premises 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

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. (See guidance note 5) If signing on behalf of the applicant please state in what capacity.

Signature	
Date	
Capacity	

Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 6)		
Post town	Postcode	
Telephone number (if any)		
If you would prefer us to correspond with you by e-mail your e-mail address (optional)		