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

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.
You may wish to keep a copy of the completed form for your records.

I Inspector Nash 3903 on behalf of the Chief Constable of Surrey Police

(Insert name of applicant)

apply for the 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, if none, ordnance survey map reference or description	
Local, 77 Spinney Hill	
Post town	**Post code (if known)**
Addlestone	KT15 5AY

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

Number of premises licence or club premises certificate (if known)
024430

Part 2 - Applicant details

I am

	Please tick ✓ yes
1) an individual, body or business which is not a responsible authority (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)

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 telephone number	
E-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

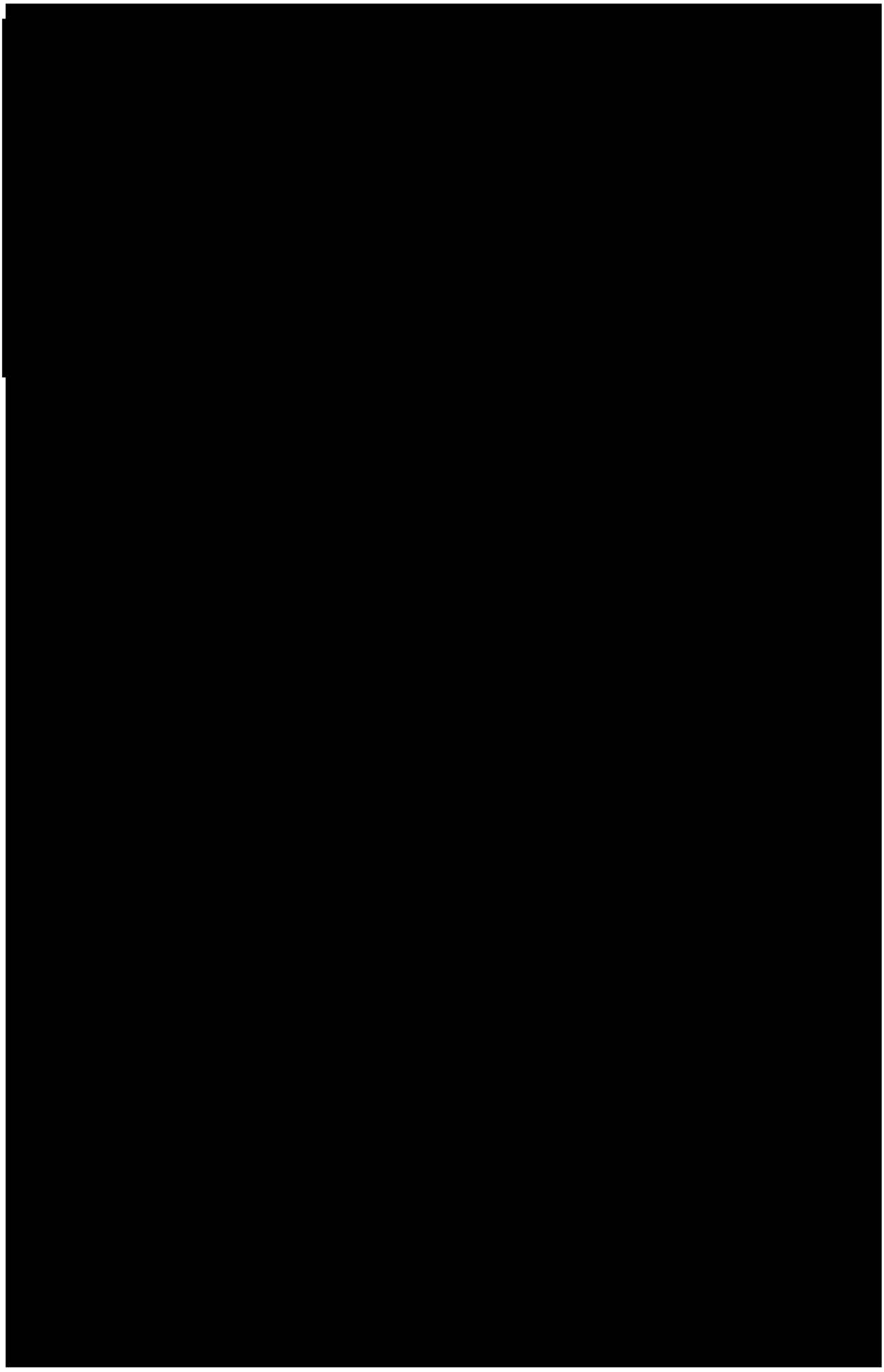
Name and address Surrey Police, Addlestone Civic Centre, Station Road, Addlestone, Surrey, KT15 2AH
Telephone number (if any) [redacted]
E-mail address (optional) [redacted]

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

	Please tick one or more boxes ✓
1) the prevention of crime and disorder	X
2) public safety	X
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)

[redacted]



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 the premises before	☐

If yes please state the date of that application

Day		Month		Year			

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

Please tick ✓ yes

- I have sent copies of this form and enclosures to the 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 (please read guidance note 5). **If signing on behalf of the applicant please state in what capacity.**

Signature
…… [redacted] Ian Nash - Inspector 3903 ……

Date
……

Capacity
……Delegated Officer on behalf of the Chief Constable of Surrey Police
……

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 6)	
[redacted] Police Alcohol Licensing Officer,Runnymede Civic Centre Station Road	
Post town Addlestone	**Post Code** KT15 2AF
Telephone number (if any) [redacted]	
If you would prefer us to correspond with you using an e-mail address your e-mail address (optional) [redacted]	

The Council may be statutorily required to supply any information you provide, to other bodies exercising functions of a public nature, for the prevention and detection of fraud.
For further information, please see www.runnymede.gov.uk/DataMatching

Data Protection and Privacy
Any data supplied by you on this form will be processed in accordance with the General Data Protection Regulations, in supplying it you consent to the Council processing the data for the purpose it is supplied. All personal information provided will be treated in the strictest confidence and will only be used by the Council or disclosed to others for a purpose permitted by law.
Data is deleted in accordance with our data retention policy. Our privacy policy is published on our web site www.runnymede.gov.uk

For further information about the Licensing Act 2003 please contact:
The Licensing Department, Runnymede Borough Council, Runnymede Civic Centre, Station Road, Addlestone, Surrey, KT15 2AH. Tel: 01932 838383 Email: Licensing@runnymede.gov.uk

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.