

**Notification of an interest in premises under section 178 of 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/We _____

(Insert name(s) of notifier)

hereby give/gives notice of my/our interest in the premises identified below for the purposes of section 178 of the Licensing Act 2003

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description	
Post town	Post code

Name of applicant for, or holder of, premises licence or club applying for, or holding, club premises certificate (if known)

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Premises licence / club premises certificate number (if known)

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Part 2 - Details of my/our interest in the premises

I/we

Please tick

- a) have a legal interest in the premises as freeholder or leaseholder ☐
- b) am/are the legal mortgagee in respect of the premises (within the meaning of the Law of Property Act 1925) ☐
- c) am/are in occupation of the premises ☐

I /we are

- a) an individual(s) ☐ please complete section (A)
- b) a company ☐ please complete section (B)
- c) a partnership ☐ please complete section (B)
- d) an unincorporated association ☐ please complete section (B)
- e) other (for example, a statutory corporation) ☐ please complete section (B)

(A) DETAILS OF INDIVIDUAL

Please tick

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other title
(for example, Rev)

Surname

First names

Current postal address if different from premises address

Post Town

Postcode

Contact phone number in working hours (if any)

**E-mail address
(optional)**

DETAILS OF SECOND INDIVIDUAL

Please tick

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other title
(for example, Rev)

Surname

First names

**Current postal
address if
different from
premises
address**

Post Town

Postcode

Contact phone number in working hours (if any)

**E-mail address
(optional)**

(B) DETAILS OF NON-INDIVIDUAL

Please provide name and registered address of notifier in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned

Name

Address

Registered number (where applicable)
Description of applicant (for example partnership, company, unincorporated association etc)
Telephone number (if any)
E-mail address (optional)

Please tick yes

- I have made or enclosed payment of the fee

☐

I/WE UNDERSTAND THAT 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.

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

Part 3 – Signatures (please read guidance note 1)

Signature of notifier or notifier's solicitor or other duly authorised agent (See guidance note 2). If signing on behalf of the notifier please state in what capacity.

Signature

.....

Date

.....

Capacity

.....

For joint notifiers signature of 2nd notifier 2nd notifier's solicitor or other authorised agent (please read guidance note 3). If signing on behalf of the notifier please state in what capacity.

Signature

Date

Capacity

Contact name (where not previously given or where it differs from the notifier) and address for correspondence associated with this notification (please read guidance note 4)

Post town

Post Code

Telephone number (if any)

E-mail address (optional)

Notes for Guidance

1. The form must be signed.
2. A notifier's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
3. Where there is more than one notifier, both notifiers or their respective agents must sign the form.
4. This is the address which we shall use to correspond with you about this notification and if a change is made to the register.

Acknowledgement by

[insert name of relevant licensing authority]

of receipt of this notification of an interest in the premises described in the

notice by the person/persons identified in the notice dated this day of

..... 20 [].

Signed for and on behalf of the authority

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