

Portland House, 44 Richmond Road, Worthing, BN11 1HS

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

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 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			
(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)			
Postal address of premises or, if none, ordnance survey map reference or description			
Post town	Post code (if known)		
Name of premises licence holder or club holding club premises certificate (if known)			
Number of provided linear or state pro-			
Number of premises licence or club premises certificate (if known)			

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					
Surname First names					
Please tick ✓ yes I am 18 years old or over					
Current postal address including postcode					
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			
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			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			
4) the protection of children from harm			

Please provide as much information as possible to support the application (please read 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 premises please state what they were and when you made them				

	Please	tick ✓ yes
 I have sent copies of this form and en authorities listed below and the premi holding the club premises certificate, I understand that if I do not comply wi application will be rejected 	ses licence holder or club as appropriate	
IT IS AN OFFENCE, UNDER SECTION MAKE A FALSE STATEMENT IN OR I APPLICATION. THOSE WHO MAKE A SUMMARY CONVICTION TO A FINE O	N CONNECTION WITH THIS A FALSE STATEMENT MAY E	BE LIABLE ON
Part 3 – Signatures (please read guidance	note 4)	
Signature of applicant or applicant's solici (please read guidance note 5). If signing on what capacity.		
Signature		
Date		
Capacity		
Contact name (where not previously given associated with this application (please rea		ondence
Post town	Post Code	
Telephone number (if any)		
If you would prefer us to correspond with address (optional)	you using an e-mail address you	ır e-mail

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.

Responsible Authorities under the Licensing Act 2003 for applications within the district of Adur and borough of Worthing

The Licensing Authority (to which all applications must be sent):

The Licensing Unit
Adur & Worthing Councils
Portland House
Richmond Road
Worthing
West Sussex
BN11 1HS

Direct Line (for all licensing enquiries): 01273 263331 <u>Licensing.unit@adur-worthing.go</u>v.uk

Environmental Health and Health & Safety Authority

Adur & Worthing Councils Portland House Richmond Road Worthing West Sussex BN11 1HS

To above address, but marked with each responsible authority as necessary.

Planning Authority

Adur & Worthing Councils Portland House Richmond Road Worthing West Sussex BN11 1HS

If the **HSE** is responsible for the premises Health & Safety Executive (HSE) 3 East Grinstead House London Road East Grinstead West Sussex RH19 1RH

Sussex Police

marked "Licensing Application"
West Downs Divisional HQ
Centenary House
Durrington Lane
Worthing
BN13 2PQ

ws licensing wor@sussex.pnn.police.uk

West Sussex Fire and Rescue Service

Business Fire Safety
Horsham Fire Station
Hurst Road
Horsham
West Sussex
RH12 2DN

businessfiresafety@westsussex.gov.uk

Head of Safeguarding

Children's Safeguarding Unit Licensing, Room 24, Durban House Durban Road Bognor Regis West Sussex PO22 9RE

West Sussex Trading Standards

County Hall North Chart Way Horsham West Sussex RH12 1XA

Trading.standards@westsussex.gov.uk

West Sussex Public Health

Director of Public Health (Licensing)
WSCC 1st Floor
The Grange
County Hall Campus
Chichester
West Sussex
PO19 1QT

PublicHealth.Licensing@westsussex.gov.uk

Home Office Immigration Enforcement

Alcohol Licensing Team Lunar House 40 Wellesley Road Croydon CR9 2BY

alcohol@homeoffice.gsi.gov.uk