



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)**

**Part 1 – Premises or club premises details**

**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 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**

I am 18 years old or over

Please tick ✓ yes

**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

✓

**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)

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

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**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 listed below 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 (UNLIMITED) 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) and postal address for correspondence associated with this application** (please read guidance note 6)

**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)**

## 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.

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### **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

[Licensing.unit@adur-worthing.gov.uk](mailto:Licensing.unit@adur-worthing.gov.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](mailto: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](mailto: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](mailto:Trading.standards@westsussex.gov.uk)

**West Sussex Public Health**

Director of Public Health (Licensing)

WSCC 1<sup>st</sup> Floor

The Grange

County Hall Campus

Chichester

West Sussex

PO19 1QT

[PublicHealth.Licensing@westsussex.gov.uk](mailto: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](mailto:alcohol@homeoffice.gsi.gov.uk)