

Blackpool Council

APPLICATION FOR AN AUCTION ROOM LICENCE

Applicants Name:



Licensing Service
Blackpool Council
Municipal Buildings, PO Box 4
Blackpool, FY1 1NA

Contact

T: (01253) 47 8397
F: (01253) 47 8372

www.blackpool.gov.uk

COUNTY OF LANCASHIRE ACT 1984 – PART XII

1. Your Details:

Title: *

Mr	Mrs	Miss	Ms
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Forename (s)

Surname **Date of Birth**

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Home address

Post Code

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☎ Telephone Number **☎ Mobile Number**

Address of Premises

Post Code

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☎ Telephone Number **☎ Mobile Number**

2. Please give details of any previous convictions:

DATE OF CONVICTION	COURT	OFFENCE(S)	SENTENCE OR ORDER OF COURT

I list above all offences for which I have been convicted which need to be declared

USUAL SIGNATURE

3. Details of the owner of the Premises:

Title: * Mr Mrs Miss Ms **Forename (s)**

Surname **Date of Birth**

Home address

 Post Code

☎ Telephone Number **☎ Mobile Number**

4. Details of anyone (other than those mentioned above) who is, or is intended to be, concerned in the conduct or management of any sale of goods by way of competitive bidding on the premises:

Title: * Mr Mrs Miss Ms **Forename (s)**

Surname **Date of Birth**

Home address

 Post Code

☎ Telephone Number **☎ Mobile Number**

5. Give details of any previous convictions recorded against the person named in 4.:

DATE OF CONVICTION	COURT	OFFENCE(S)	SENTENCE OR ORDER OF COURT

I list above all offences for which I have been convicted which need to be declared

USUAL SIGNATURE

6. Have the premises been used for the sale of goods by way of competitive bidding prior to the submission of this application?

Yes	No
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Delete as appropriate

If Yes, please give details:

7. Will the premises be used throughout the year for the sale of goods by way of competitive bidding?

Yes	No
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Delete as appropriate

If Yes, give details of how frequently the premises will be so used:

8. What types of goods are to be sold on the premises?

9. Is it proposed that loudspeakers or other similar equipment be used on the premises?

Yes	No
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Delete as appropriate

10. Will persons on the premises be invited to compete for the purchase of articles otherwise than by way of increasing bids?

Yes	No
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Delete as appropriate

If Yes, please specify what form(s) of competitive bidding will be employed in the sale of goods on the premises:

11. What facilities exist for the servicing of the premises and, in particular, for the reception and collection of goods and for the onsite parking of motor vehicles?

12. Have you previously been involved in the conduct / management of any sale of goods by way of competitive bidding in Blackpool or elsewhere?

Yes	No
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Delete as appropriate

If Yes, please give details:

13. Has any other person named in this application previously been involved in the conduct or management of any such sale?

Yes	No
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Delete as appropriate

If Yes, please give details:

I DECLARE THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE STATEMENTS MADE AND PARTICULARS GIVEN IN THIS APPLICATION ARE TRUE. I ACKNOWLEDGE THAT ANY PERSON WHO, IN GIVING INFORMATION IN CONNECTION WITH SUCH AN APPLICATION, KNOWINGLY OR RECKLESSLY MAKES A FALSE STATEMENT OR OMITTS ANY MATERIAL PARTICULAR, IS GUILTY OF AN OFFENCE.

I HEREBY MAKE AN APPLICATION for the registration, under Part XII of the County of Lancashire Act 1984 of the premises described in this application on which goods are to be sold by way of competitive bidding.

I enclose with this application three copies of a scaled detailed plan of the premises together with the prescribed fee (see Note 1).

Usual Signature

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Date

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NOTES

- 1. This application, together with the plans and the prescribed fee of £335.00 should be sent to the Licensing Service, Blackpool Council, Municipal Buildings, PO Box 4, Blackpool, FY1 1NA**
- 2. The application must be made by the occupier of, or a person proposing to occupy, the premises concerned.**
- 3. In the event of any of the persons referred to in this application being a limited company, the registered office address of the company must be given.**
- 4. The form should be completed by the applicant personally or, if a limited company, by a person duly authorised by the company to make the application.**
- 5. If there is insufficient room on the form for any answer, please continue the answer on a separate sheet of paper and submit it with the application.**
- 6. By virtue of the Rehabilitation of Offenders Act 1974, you may be entitled to disregard certain convictions in answering questions 2 and 5. You should take appropriate advice if you are in any doubt as to what particulars to give.**