

Blackpool Council

NOTIFICATION OF AN INTEREST IN A PREMISES LICENSING ACT 2003

Your Name:

Built Environment

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

Contact

T: (01253) 47 8572 / 8589
F: (01253) 47 8372

www.blackpool.gov.uk



Schedule 1 - regulation 9

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

hereby give/gives notice of my/our interest in the premises identified below for the purpose 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

Address									
Post Code									
Telephone Number					Mobile Number				

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

Premises Licence Number or Club Premises Certificate Number (if known)

Part 2 – details of my/our interest in the premises

I / we

If yes 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 Complete section A
- b) a company Complete section B
- c) a partnership Complete section B
- d) an unincorporated association Complete section B
- e) other (for example, a statutory corporation) Complete section B

A. INDIVIDUAL APPLICANTS (fill in as applicable)

Title:	Mr	Mrs	Miss	Ms		Forename(s)					
Surname						Date of Birth					
Home address											
						Post Code					
Telephone Number					Mobile Number						
E-Mail address											

SECOND INDIVIDUAL APPLICANT (If Applicable)

Title:	Mr	Mrs	Miss	Ms		Forename(s)					
Surname						Date of Birth					
Home address											
						Post Code					
Telephone Number					Mobile Number						
E-Mail address											

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															
								Post Code							
Name															
Address															
								Post Code							
Registered number (where applicable)															
Description of applicant (for example partnership, company, unincorporated association)															
Telephone number (if any)															
E-Mail address (optional)															

If yes please tick

- I have made or enclosed payment of the fee (£21)

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 4 – Signatures (see note 1)

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

Usual Signature

Date **Print Name**

Capacity

For joint applications signature of 2nd notifier or 2nd notifier’s solicitor or other duly authorised agent. (See guidance note 3) **If signing on behalf of the applicant please state in what capacity.**

Usual Signature

Date **Print Name**

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)

Name	<input type="text"/>
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Address	<input type="text"/>									
	<input type="text"/>									
	Post Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Telephone Number	<input type="text"/>	Mobile Number	<input type="text"/>
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E-mail Address	<input type="text"/>
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Notes for Guidance

1. The application 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, either either notifiers or their respective agents must sign the application form.
4. This is the address that we shall use to correspond with you about this application.

I acknowledge receipt of this Notification of Interest	Date:	Day	Month	Year
		<input type="text"/>	<input type="text"/>	<input type="text"/>
Signed	<input type="text"/>			
Name of signing officer	<input type="text"/>			
		Official Stamp		