Online application for a minor variation to a premises licence or club premises certificate under the Licensing Act 2003



Licensing Team, Council Offices, 37 Pembroke Road, London W8 6PW Telephone: 020 7341 5152 email: licensing@rbkc.gov.uk

(Insert name(s) of applicant)

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes attached to the form (especially Note 1). Please ensure that your answers are typed in black. Some text boxes may have a limit on the number of characters. Where necessary please use additional sheets and upload them with your form.

ALL FIELDS MARKED IN RED ARE MANDATORY AND MUST BE COMPLETED.

Before submitting your application please save a copy to your desk top. Please ensure that you provide a valid email address

being the premises licence holder(s)/club holding a club premises certificate, apply to vary a

| premises licence under section 41A/club premises certificate under section 86A of the Licensing Ac 2003 for the premises described in Part 1 below. | | | |
|---|--------------------------------------|--|--|
| Part 1 – Premises details | | | |
| Postal address of premises (or, if none, ordnance su | urvey map reference, or description) | | |
| Post town | Postcode | | |
| Telephone number at premises (if any) | | | |
| Premises Licence number/club premises certificate number | | | |
| Brief description of premises (Please see Guidar | nce Note 2) | | |

Part 2 - Applicant Details

| ises certificate holder. (Please delete as appropriate) |
|---|
| |
| |
| PREMISES ADDRESS |
| |
| |
| Postcode |
| |
| us to contact you by email (optional) |
| |
| |
| Please tick |
| as soon as possible? |
| |
| take effect? DD MM YYYY |
| n relation to the introduction of the late night levy? |
| Yes No |
| tail in the box below and explain why you consider |
| ne promotion of any of the licensing objectives (See new or increased levels of licensable activities will be |
| include a tent): |
| uidance Note 4) ***LIMITED CHARACTERS – |
| |
| |
| |
| |
| |
| |
| |

| Details of proposed variation(s) (continued) ***LIMITED CHARACTERS –F ON SEPARATE SHEET IF NECESSARY*** | PLEASE CONTINUE |
|---|-----------------------------|
| | |
| Part 4 – Operating Schedule | |
| Please tick those parts of the Operating Schedule which would be subject to chavary were successful. | ange if this application to |
| Provision of regulated entertainment (please read guidance note 5) | Please tick all that apply |
| a. plays b. films c. indoor sporting events d. boxing or wrestling entertainment e. live music f. recorded music g. performances of dance h. anything of a similar description to that falling within (e), (f) or (g) | |
| Provision of late night refreshment | |
| Supply of alcohol | |
| (Note that this can only relate to reducing licensed hours, or moving them withoubetween 7am and 11pm) | ut any overall increase |
| Please tick to indicate you have enclosed the following: | |
| I have enclosed the premises licence/club premises certificate | |
| I have enclosed the relevant part of the premises licence/ club premises certificate | |
| I have included a copy of the plan (this is necessary if the proposed variation will affect the layout) | П |

| fу | ou have | not ticked | one of the | previous | three box | es, please | explain | why in | the bo | ox below. |
|----|---------|------------|------------|----------|-----------|------------|---------|--------|--------|-----------|
| | | | | | | | | | | |

| Rea | asons why you have not enclosed the premises licence/club premises certificate or release. | evant |
|-------|--|-------|
| | | |
| | y further information to support your application. (See Guidance Note 6) ***LIMITED ARACTERS – PLEASE CONTINUE ON SEPARATE SHEET IF NECESSARY*** | |
| Check | dist: | |
| | Please tick to indicate agreer | nent |
| • | I have made or enclosed payment of the fee; or I have not made or enclosed payment of the fee because this application has been made in relation to the introduction of the late night levy. | |
| • | I have enclosed a plan of the premises, if appropriate. | |
| • | I have enclosed the premises licence/club premises certificate or relevant part of it or explanation. | |
| • | I understand that if I do not comply with the above requirements my application will be rejected | |
| unde | erstand that I must now advertise my application for a continuous period beginning on the first | |

I understand that I must now advertise my application for a continuous period beginning on the first working day after the day on which the application was given to the relevant licensing authority and ending at the expiry of the ninth consecutive working day after that day.

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.

Part 5 – Signatures and Contact Details (See Guidance Note 7)

<u>Premises Licence</u>: Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (see Guidance Note 8). If signing on behalf of the applicant, please state your name and in what capacity you are authorised to sign:

| Signed | |
|--|--|
| Date | |
| Capacity | |
| Where the premises licence is jointly held, licence holder) or 2 nd applicant's solicitor of signing on behalf of the applicant, please state | signature of 2 nd applicant (the current premises or other authorised agent (See Guidance Note 9). If e in what capacity. |
| Signed | |
| Date | |
| Capacity | |
| Where the premises are a club | |
| I (insert full name) make this application on behalf of the club and | d have authority to bind the club. |
| Signed | |
| Date | |
| Capacity | |
| | |
| Contact name and address. (See Guidance | Note 10) – Must be completed |
| | |
| | |
| | |
| Post town | Postcode |
| Telephone number | Your email address |
| | |

Now save your form and upload here