

## Application to transfer premises licence to be granted under the Licensing Act 2003

Please read the following instructions before completing the form

1. Describe the premises. For example the type of premises it is, its general situation and layout and any other information which would be relevant to the licensing objectives.
2. The application form must be signed.
3. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
4. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
5. This is the address which we shall use to correspond with you about this application.

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 .....

*(Insert name of applicant)*

apply to transfer the premises licence described below under section 42 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number

### Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description	
Post town	Post code
Telephone number at premises (if any)	

**Please give a brief description of the premises** (please read guidance note 1)

**Name of current premises licence holder**

## Part 2 - Applicant details

In what capacity are you applying for the premises licence to be transferred to you?

Please tick  yes

- a) an individual or individuals\*  please complete section (A)
- b) a person other than an individual \*
- i. as a limited company  please complete section (B)
- ii. as a partnership  please complete section (B)
- iii. as an unincorporated association or  please complete section (B)
- iv. other (for example a statutory corporation)  please complete section (B)
- c) a recognised club  please complete section (B)
- d) a charity  please complete section (B)
- e) the proprietor of an educational establishment  please complete section (B)
- f) a health service body  please complete section (B)
- g) an individual who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales  please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in respect of an independent hospital in England  please complete section (B)
- h) the chief officer of police of a police force in England and Wales  please complete section (B)

\*If you are applying as a person described in (a) or (b) please confirm:

Please tick  yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a
  - statutory function or
  - a function discharged by virtue of Her Majesty's prerogative

**(A) INDIVIDUAL APPLICANTS** (fill in as applicable)

Mr  Mrs  Miss  Ms  Other title   
 (for example, Rev)

**Surname**  **First names**

I am 18 years old or over Please tick  yes

**Current postal address if different from premises address**

**Post town**  **Post code**

**Daytime contact telephone number**

**E-mail address (optional)**

**SECOND INDIVIDUAL APPLICANT** (fill in as applicable)

Mr  Mrs  Miss  Ms  Other title   
 (for example, Rev)

**Surname**  **First names**

Please tick  yes

I am 18 years old or over

Current postal address if different from premises address

Post town

Post code

Daytime contact telephone number

E-mail address (optional)

### (B) OTHER APPLICANTS

Please provide name and registered address of applicant 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
Registered number (where applicable)
Description of applicant (for example partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

**Part 3**

Please tick  yes

Are you the holder of the premises licence under an interim authority notice?

Do you wish the transfer to have immediate effect?

If not when would you like the transfer to take effect?

Day			Month			Year		
<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"/>

Please tick  yes

I have enclosed the consent form signed by the existing premises licence holder

If you have not enclosed the consent form referred to above please give the reasons why not. What steps have you taken to try and obtain the consent?

Please tick  yes

If this application is granted I would be in a position to use the premises during the application period for the licensable activity or activities authorised by the licence (see section 43 of the Licensing Act 2003)

Please tick  yes

I have enclosed the premises licence

If you have not enclosed premises licence referred to above please give the reasons why not.

- I have made or enclosed payment of the fee
- I have enclosed the consent form signed by the existing premises licence holder or my statement as to why it is not enclosed
- I have enclosed the premises licence or relevant part of it or explanation
- I have sent a copy of this application to the chief officer of police today
- I understand that if I do not comply with the above requirements my application will be rejected

**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** (please read guidance note 2)

**Signature of applicant or applicant’s solicitor or other duly authorised agent** (See guidance note 3). **If signing on behalf of the applicant please state in what capacity.**

Signature

.....

Date

.....

Capacity

.....

**For joint applicants signature of second applicant, second applicant’s solicitor or other authorised agent** (please read guidance note 4). **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 5)**

**Post town**

**Post Code**

**Telephone number (if any)**

**If you would prefer us to correspond with you by e-mail your e-mail address (optional)**

## CONSENT OF PREMISES LICENCE HOLDER TO TRANSFER

**I/We** *(Full name of premises licence holder(s))*

.....

**The premises licence holder of premises licence number** *(Insert premises licence number)*

.....

**Relating to** *(Name and address of premises to which the application relates)*

.....

**Hereby give my consent for the transfer of premises licence number** *(Insert premises licence number)*

.....

**To** *(Full name of transferee)*

.....

<b>SIGNED</b>	
<b>NAME (Please print)</b>	
<b>DATED</b>	



## Application to transfer premises licence to be granted under the Licensing Act 2003

### GUIDANCE NOTES

The process to transfer a premises licence to another party is quite straight forward and in most cases there are no issues that present a problem in the application process. However there are a couple of matters which an applicant should ensure are resolved before submitting an application as failure to do so could either delay the application process or even mean that a grant application for a new licence is required. They are - ensuring that the existing licence is still in force, and obtaining the permission of the existing licence holder.

#### Is the existing licence still in force.

You should ensure that the existing licence is still in force as there are instances where the licence may have lapsed and this may not be readily apparent. If the existing premises licence holder has either died, becomes a person who lacks capacity (within the meaning of the Mental Capacity Act 2005) to hold the licence, becomes insolvent, is dissolved, or has been previously surrendered then the premises licence will have lapsed and there is no longer any authorisation for licensable to be carried out at the premises.

However, if your application to transfer the licence is made **no later than 28 days after the day the licence lapsed** then the premises licence can be reinstated from the time the application is received by the licensing authority. You are advised that if an application to transfer the premises licence is proposed to be made after this time period, that the licensing authority has no option but to inform you that the application **can not be accepted** and that a new application for the grant of a premises licence must be applied for if you wish to carry out licensable activities at the premises. until such time as the grant application has been determined there is no authorisation to carry out licensable activities at the premises

#### Obtaining the permission of the existing licence holder

It is important for you to make every effort to obtain consent to the transfer from the existing licence holder before you make your application. You must take all reasonable steps to obtain it and we can only exempt you from this requirement if you are able to satisfy us that all reasonable steps have been taken, and that if the application were granted that you would be in a position to use the premises for licensable activities. If for whatever reason it is not possible for you to provide us with the existing licence holders signed consent form with the application, then it will be necessary for you to provide us with copies of (for example) any recorded delivery correspondence you may have sent to the licence holder or any other documentation which shows the steps taken to obtain it. If you cannot provide such information then your application will not be accepted.