|  |  |  |  |
| --- | --- | --- | --- |
| **Application to transfer premises licence to be granted under 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** |  | | |
| *(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 (see 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 h yes | | |
|  | a) an individual or individuals\* | please complete section (A) | | |
|  | | | | |
|  | b) a person other than an individual \*  i. as a limited company  ii. as a partnership  iii. as an unincorporated association or  iv. other (for example a statutory corporation) |  | | |
| please complete section (B) | | |
| please complete section (B) | | |
| please complete section (B) | | |
| 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  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)  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 h 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** | | | | | | | |
|  | | | | | | | | |  | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | Please tick h yes | | |
| **Date of birth       I am 18 years old or over** | | | | | | | | | | | | | | | |  | | |
| **Nationality** | | | | | | | | | | | | | | | | | | |
| Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit ‘share code’ provided to the applicant by that service (please see note 2 for information) | | | | | | | | | | | | | | | | | | |
| **Current residential**  **address if**  **different from premises address** | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Post town** | | |  | | | | | | | **Post code** | | | | | | |  | | |
|  | | | | | | | | | | | | | | | | | | |
| **Daytime contact telephone number** | | | | | | | | | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **E-mail address**  **(optional)**  **(optional)** | | | | |  | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SECOND** **INDIVIDUAL APPLICANT** (fill in as applicable) | | | | | | | | | | | | | | | | | | |
| Mr |  | Mrs | |  | | Miss |  | Ms | | | |  | | Other title | | | |  |
|  | | | | | | | | | | | | | | | (for example, Rev) | | | |
| **Surname** | | | | | | | | |  | | **First names** | | | | | | | |
|  | | | | | | | | |  | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | Please tick h yes | | |
| **Date of birth       I am 18 years old or over** | | | | | | | | | | | | | | | |  | | |
| **Nationality** | | | | | | | | | | | | | | | | | | |
| **Current residential**  **address if**  **different from premises address** | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Post town** | | |  | | | | | | | **Post code** | | | | | | |  | | |
|  | | | | | | | | | | | | | | | | | | |
| **Daytime contact telephone number** | | | | | | | | | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **E-mail address**  **(optional)**  **(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 h 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 | | | |  |  |  |  |  |  |  |  | | |
|  | | |
| Please tick h 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 h 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 h 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 have sent a copy of this form to Home Office Immigration Enforcement today * Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships. I have included documents or my Home Office online right to work checking service share code, to demonstrate my entitlement to work in the United Kingdom (please read note 2). |  |
|  |  |
|  | |
| **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.**  **IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND, PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.**  I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 2) | |
|  | |
| **Part 4 – Signatures** (please read guidance note 3) | |
|  | |
| **Signature of applicant or applicant’s solicitor or other duly authorised agent** (See guidance note 4). **If signing on behalf of the applicant please state in what capacity.** | |
|  | |
| Signature  ………………………………………………………………………………………………… | |
|  | |
| Date  ………………………………………………………………………………………………… | |
|  | |
| Capacity  ………………………………………………………………………………………………… | |
|  | |
|  | |
| **For joint applicants signature of second applicant, secondapplicant’s solicitor or other 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 by e-mail your e-mail address (optional)** | |

|  |
| --- |
| Notes for Guidance   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. **Right to work/immigration status for individual applicants and applications from partnerships which are not limited liability partnerships:**   A licence may not be held by an individual or an individual in a partnership which is not a limited liability partnership who:   * does not have the right to live and work in the UK; or * is subject to a condition preventing him or her from doing work relating to the carrying on of a licensable activity.   Any premises licence issued on or after 6 April 2017 will lapse if the holder ceases to be entitled to work in the UK. Applicants must demonstrate that they have the right to work in the UK and are not subject to a condition preventing them from doing work relating to the carrying on of a licensing activity. They do this in one of two ways: 1)by providing with this application copies or scanned copies of the documents listed below (which do not need to be certified), or 2) by providing their ‘share code’ to enable the licensing authority to carry out a check using the Home Office online right to work checking service (see below).Documents which demonstrate entitlement to work in the UK  * An expired or current passport showing the holder, or a person named in the passport as the child of the holder, is a British citizen or a citizen of the UK and Colonies having the right of abode in the UK [please see note below about which sections of the passport apply]. * An expired or current passport or national identity card showing the holder, or a person named in the passport as the child of the holder, is a national of a European Economic Area country or Switzerland. * A Registration Certificate or document certifying permanent residence issued by the Home Office to a national of a European Economic Area country or Switzerland. * A Permanent Residence Card issued by the Home Office to the family member of a national of a European Economic Area country or Switzerland. * A **current** Biometric Immigration Document (Biometric Residence Permit) issued by the Home Office to the holder indicating that the person named is allowed to stay indefinitely in the UK, or has no time limit on their stay in the UK. * A **current** passport endorsed to show that the holder is exempt from immigration control, is allowed to stay indefinitely in the UK, has the right of abode in the UK, or has no time limit on their stay in the UK. * A **current** Immigration Status Document issued by the Home Office to the holder with an endorsement indicating that the named person is allowed to stay indefinitely in the UK or has no time limit on their stay in the UK, **when produced in combination with** an official document giving the person’s permanent National Insurance number and their name issued by a Government agency or a previous employer. * A birth or adoption certificate issued in the UK, **together with** an official document giving the person’s permanent National Insurance number and their name issued by a Government agency or a previous employer. * A birth or adoption certificate issued in the Channel Islands, the Isle of Man or Ireland **when produced in combination with** an official document giving the person’s permanent National Insurance number and their name issued by a Government agency or a previous employer. * A certificate of registration or naturalisation as a British citizen, **when produced in combination with** an official document giving the person’s permanent National Insurance number and their name issued by a Government agency or a previous employer. * A **current** passport endorsed to show that the holder is allowed to stay in the UK and is currently allowed to work and is not subject to a condition preventing the holder from doing work relating to the carrying on of a licensable activity. * A **current** Biometric Immigration Document (Biometric Residence Permit) issued by the Home Office to the holder which indicates that the named person can currently stay in the UK and is allowed to do the work in question. * A **current** Residence Card issued by the Home Office to a person who is not a national of an EEA state or Switzerland but who is a family member of such a national or who has derivative rights or residence. * A **current** Immigration Status Document containing a photograph issued by the Home Office to the holder with an endorsement indicating that the named person may stay in the UK, and is allowed to work and is not subject to a condition preventing the holder from doing work relating to the carrying on of a licensable activity **when produced in combination with** an official document giving the person’s permanent National Insurance number and their name issued by a Government agency or a previous employer. * A Certificate of Application, **less than 6 months old**, issued by the Home Office under regulation 17(3) or 18A (2) of the Immigration (European Economic Area) Regulations 2006, to a person who is not a national of an EEA state or Switzerland but who is a family member of such a national or who has derivative rights of residence. * Reasonable evidence that the person has an outstanding application to vary their permission to be in the UK with the Home Office such as the Home Office acknowledgement letter or proof of postage evidence, or evidence that the person has an appeal or administrative review pending on an immigration decision, such as an appeal or administrative review reference number. * Reasonable evidence that a person who is not a national of an EEA state or Switzerland but who is a family member of such a national or who has derivative rights of residence in exercising treaty rights in the UK including:- * evidence of the applicant’s own identity – such as a passport, * evidence of their relationship with the EEA family member – e.g. a marriage certificate, civil partnership certificate or birth certificate, and * evidence that the EEA national has a right of [permanent residence in the UK](#_Residence_cards_(biometric) or is one of the following if they have been in the UK for more than 3 months:   (i) working e.g. employment contract, wage slips, letter from the employer,  (ii) self-employed e.g. contracts, invoices, or audited accounts with a bank,  (iii) studying e.g. letter from the school, college or university and evidence of sufficient funds; or  (iv) self-sufficient e.g. bank statements.  Family members of EEA nationals who are studying or financially independent must also provide evidence that the EEA national and any family members hold comprehensive sickness insurance in the UK. This can include a private medical insurance policy, an EHIC card or an S1, S2 or S3 form.  **Original documents must not be sent to licensing authorities**. If the document copied is a passport, a copy of the following pages should be provided:-  (i). any page containing the holder’s personal details including nationality;  (ii) any page containing the holder’s photograph;  (iii) any page containing the holder’s signature;  (iv) any page containing the date of expiry; and  (v) any page containing information indicating the holder has permission to enter or remain in the UK and is permitted to work.  If the document is not a passport, a copy of the whole document should be provided.  Your right to work will be checked as part of your licensing application and this could involve us checking your immigration status with the Home Office. We may otherwise share information with the Home Office. Your licence application will not be determined until you have complied with this guidance  **Home Office online right to work checking service**  As an alternative to providing a copy of the documents listed above, applicants may demonstrate their right to work by allowing the licensing authority to carry out a check with the Home Office online right to work checking service.  To demonstrate their right to work via the Home Office online right to work checking service, applicants should include in this application their 9-digit share code (provided to them upon accessing the service at https://www.gov.uk/prove-right-to-work) which, along with the applicant's date of birth (provided within this application), will allow the licensing authority  to carry out the check.  In order to establish the applicant's right to work, the check will need to indicate that the applicant is allowed to work in the United Kingdom and is not subject to a condition preventing them from doing work relating to the carrying on of a licensable activity. An online check will not be possible in all circumstances because not all applicants will have an immigration status that can be checked online.  The Home Office online right to work checking service sets out what information and/or documentation applicants will need in order to access the service. Applicants who are unable to obtain a share code from the service should submit copy documents as set out above.   1. The application form must be signed. 2. An applicant’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 applicant, both applicants or their respective agents must sign the application form. 4. This is the address which we shall use to correspond with you about this application. |
|  |

# 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].*

|  |  |
| --- | --- |
| signed |  |
| name  (please print) |  |
| dated |  |