



**APPLICATION FOR A SEX ESTABLISHMENT LICENCE
- LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982 PART II SCHEDULE 3 -
(AS AMENDED BY SECTION 27 OF THE POLICING AND CRIME ACT 2009)**

Please complete this form in BLACK INK and BLOCK LETTERS. When completed, please return the form, application fee and all associated documentation to: The Licensing Team, Community Safety & Environment, Riverside House, Woolwich High Street, Woolwich, London SE18 6DN.

FOR OFFICE USE ONLY

Date Received:

Fee:

Receipt No:

SECTION A - ABOUT THE PREMISES

1. Trading name, address and telephone number of premises to be licensed.

Name:

Address:

Tel. No.:

2. Part of premises to be licensed.
(e.g., ground floor, first floor bar area etc).

Part of Premises:

3. If only part of the premises are to be used, to what use are the other parts of the premises put?

4. If the premises are already used as a sex establishment, please give the name and address of the persons or body who now operate the business, and the date on which the premises were first used as a sex establishment

Name:

Address:

Date Premises First Used:

SECTION B - ABOUT THE APPLICANT

5. Is the applicant:

An individual

☐

A partnership or other unincorporated body

☐

A body corporate

☐

6. Give the full name of the applicant(s) or body applying for the licence. If an individual or partnership, please state any previous name(s) and date name changed.

7.	Telephone number on which the applicant can be contacted during office hours	
8.	Address to which any communications for the applicant are to be sent	
9.	Applicants permanent address(es). If a company, please give the registered or principal office address	
10.	If the applicant is an individual or partnership, please provide:	1. Date of Birth: Place of Birth 2. Date of Birth: Place of Birth
11.	If the applicant is a company, please supply the company registration number:	
12.	What is the nature of the applicant's interest in the premises? Please state whether it is:	Freehold <input type="checkbox"/> Leasehold <input type="checkbox"/> Other (Please specify) <input type="checkbox"/>

SECTION C - ABOUT THE LICENCE

13.	Type of application.	
	<i>FIRST APPLICATION: Choose this option if this is the first time this premise has been licensed or if the previous licence held by the premises has lapsed. You MUST provide a copy of a plan of the premises with the application to enable it to be processed.</i>	<input type="checkbox"/>
	<i>RENEWAL APPLICATION: Choose this option if you already hold a licence for the premises that is due to expire shortly.</i>	<input type="checkbox"/>
	<i>VARIATION APPLICATION: Choose this option if you are proposing to change the hours of operation, the premises layout, etc.</i>	<input type="checkbox"/>
	<i>TRANSFER APPLICATION: Choose this option to transfer the licence from one licence holder to another.</i>	<input type="checkbox"/>

<p>14. Category of licence required.</p> <p><i>Please tick the appropriate boxes.</i></p>	<p>Sex Shop <input type="checkbox"/></p> <p>Sex Cinema <input type="checkbox"/></p> <p>Sexual Entertainment Venue <input type="checkbox"/></p>
<p>15. State which days and hours you intend to open the premises.</p>	<p>Monday am to pm</p> <p>Tuesday am to pm</p> <p>Wednesday am to pm</p> <p>Thursday am to pm</p> <p>Friday am to pm</p> <p>Saturday am to pm</p> <p>Sunday..... am to pm</p>

SECTION D - ABOUT THE BUSINESS

<p>16. Under what name is or will the business be known?</p>	
<p>17. If the application is for a sex shop, state whether any part of the premises will be used for displaying films, video recordings or other moving pictures. If yes, state whether cubicles are to be used for viewing, and if so, how many.</p>	
<p>18. What articles are to be offered for sale?</p>	
<p>19. If the application is for a sexual entertainment venue, state the proposed use of the premises and give a short description of the type of proposed performance, service, entertainment or exhibition for which a licence is required.</p>	

20.	What advertisements or displays are to be exhibited? Please indicate size(s) of proposed displays or advertisements.

21. Please complete a continuation sheet for each Director and any other persons who will manage or otherwise be involved in running the establishment or who will have an interest / will benefit from the venue.

The continuation sheet must include: the full name, former name(s), permanent address, date of residency in the UK, date and place of birth; of each person.

Number of continuation sheets accompanying this application:

22. In respect of each of the persons or bodies whose names are given in response to questions 6 and 21 give details of their previous convictions (use a continuation sheet if necessary).

Name

**Date of
Conviction**

**Place of
Conviction**

Nature of Offence

Sentence

23. Is there in force against the applicant or any of the persons name within this application a disqualification from holding a licence for a sex establishment under the Local Government (Miscellaneous Provisions) Act 1982?

Yes ☐ No ☐

24. Is there any further information that the applicant would wish the Council to take into account when considering this application?

SECTION E- OTHER PARTICULARS TO BE PROVIDED

A basic disclosure showing the criminal record of every application, every person involved in the management of the premises, and any persons who will receive financial benefit from the business (i.e. all persons referred to in Sections B and D).	<input type="checkbox"/>
A Scale plan of the premises in respect of which the licence is sought including all means of ingress and egress to and from the premises, parts used in common with any other building.	<input type="checkbox"/>
The appropriate fee.	<input type="checkbox"/>
A complete copy of the newspaper in which notice of the application has been published (this must be sent within five working days of making the application)	<input type="checkbox"/>

SECTION F- DECLARATION

I understand that any person who, in connection with an application for the grant, renewal or transfer of a licence makes a false statement which he knows to be false in any material respect, or which he does not believe to be true, shall be guilty of an offence punishable on summary conviction by a fine not exceeding £20,000.

I declare that the information I have given in this form is true and complete in every respect.

Where the application is made on the behalf of a Limited Company, the Company Secretary or Director should sign this form. In the case of a Partnership, each Partner should sign.

Signature.....Date.....

Name (please print).....

Position/capacity in which signing.....

Second partner's signature (if applicable).....Date.....

Name (please print).....

Position/capacity in which signing.....