

RECEIVED 10 SEP 2012

[Insert name and address of relevant licensing authority and its reference number (optional)]

Application for a personal licence

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 or typed in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

Your personal details	
TITLE Please tick <input checked="" type="checkbox"/>	
Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)	
Surname	CAKESIDE
Forenames	JASON
PREVIOUS NAMES (if relevant) please enter details of any previous names or maiden names. Please continue on a separate sheet if necessary.	
TITLE Please tick <input type="checkbox"/>	
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)	
Surname	
Forenames	
I am 18 years old or over. Please tick <input checked="" type="checkbox"/>	
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
ADDRESS WHERE ORDINARILY RESIDENT (We will use this address to correspond with you unless you complete the separate correspondence box below).	
[REDACTED ADDRESS]	
Post town	Post code
[REDACTED]	[REDACTED]
TELEPHONE NUMBERS	
Daytime	[REDACTED]
Evening	[REDACTED]
Mobile	[REDACTED]
FAX NUMBER	
E-MAIL ADDRESS (if you would prefer us to correspond with you by e-mail)	
[REDACTED]	

Address for correspondence associated with this application (if different to the address above)

Post town Post code

TELEPHONE NUMBERS

Daytime

Evening

Mobile

E-MAIL ADDRESS (if you would prefer us to correspond with you by e-mail)

2. Your licensing qualifications

Read Note 1. Please tick ✓/yes

Please indicate below which one of these statements applies to you:

1. I hold an accredited licensing qualification	<input checked="" type="checkbox"/>
2. I hold a certified qualification	<input type="checkbox"/>
3. I hold an equivalent qualification	<input type="checkbox"/>
4. I am a person of prescribed description	<input type="checkbox"/>

If you have ticked either of statements 1, 2 or 3 please provide details of your qualification in the box below (name of qualification, date of issue, issuing body) and please enclose your qualification with your application.
 If you have ticked statement 4, please provide evidence that you are a person of prescribed description.

BIAB LEVEL 2.
 DATE ACHIEVED - 12 JUNE 2012,


3. Previous or outstanding applications for a personal licence

Note: You may only hold one personal licence at a time. Please tick ✓

Do you currently hold a personal licence?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Do you currently have any outstanding applications for a personal licence, with this or any other licensing authority?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

Has any personal licence held by you been forfeited in the last 5 years?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Licensing Authority		
Licence number		
Date of issue		
Date of expiry		
Any further details		

4 CHECKLIST		
I have	Please tick <input type="checkbox"/> yes	
<ul style="list-style-type: none"> enclosed two photographs of myself, one of which is endorsed as a true likeness of me by a solicitor or notary, a person of standing in the community or any individual with a professional qualification 	<input checked="" type="checkbox"/>	
<ul style="list-style-type: none"> enclosed any licensing qualification I hold or proof that I am a person of prescribed description 	<input checked="" type="checkbox"/>	
<ul style="list-style-type: none"> enclosed a criminal conviction certificate or a criminal record certificate or the results of a subject access search of the police national computer by the National Identification Service 	<input checked="" type="checkbox"/>	
<ul style="list-style-type: none"> enclosed a completed disclosure of criminal convictions and declaration form (Schedule 3) 	<input checked="" type="checkbox"/>	
<ul style="list-style-type: none"> made or enclosed payment of the fee for the application 	<input checked="" type="checkbox"/>	

5 Declaration	
<p>The information contained in this form is correct to the best of my knowledge and belief.</p> <p>It is an offence knowingly or recklessly to make a false statement in or in connection with an application for the grant or renewal of a personal licence. A person is to be treated as making a false statement if he produces, furnishes, signs or otherwise makes use of a document that contains a false statement. To do so could result in prosecution and a fine not exceeding level 5 on the standard scale.</p>	
SIGNATURE	
DATE	28.08.2012

NOTES

1. Licensing qualifications

Licensing qualifications are dealt with in section 120(8) and (9) of the Licensing Act 2003.

[Insert name and address of relevant licensing authority and its reference number (optional)]

Disclosure of convictions and declaration

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 or typed in black ink. Use additional sheets if necessary.

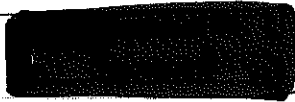
You may wish to keep a copy of the completed form for your records.

1. Your personal details	
TITLE Please tick ✓	
Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)	
Surname	EAKSIDE
Forenames	JASON
PREVIOUS NAMES (if relevant) please enter details of any previous names or maiden names. Please continue on a separate sheet if necessary.	
TITLE Please tick ✓	
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)	
Surname	
Forenames	

2. Forfeiture of a personal licence in the last 5 years		
Do not answer this question if you are applying under regulation 8 of the Licensing Act (Personal Licences) Regulations 2005		
	Please tick ✓	
Has any personal licence held by you been forfeited in the last 5 years? If yes, please provide details below:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Name of court		
Address of court		
Date of forfeiture *		
Offence which resulted in the forfeiture		
Any additional details		

3. Relevant or foreign offences		
Read Note	Please tick ✓	
Have you been convicted of any relevant offence or foreign offence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If you have been convicted of any relevant offences you must provide details for each conviction of the date of conviction, the name and location of the convicting court, offence of which you were convicted and the sentence imposed:		
PLEASE SEE DISCLOSURE		
If you have been convicted of any foreign offences you must provide details for each conviction of the date of conviction, the name and location of the convicting court, offence of which you were convicted and the sentence imposed:		

4. Declaration			
I declare that I have not been convicted of any relevant offence or any foreign offence			
SIGNATURE		DATE	

5. Declaration			
The information contained in this form is correct to the best of my knowledge and belief.			
It is an offence knowingly or recklessly to make a false statement in or in connection with an application for the grant or renewal of a personal licence. A person is to be treated as making a false statement if he produces, furnishes, signs or otherwise makes use of a document that contains a false statement. To do so could result in prosecution and a fine not exceeding level 5 on the standard scale.			
SIGNATURE		DATE	28/08/2012