Notification of an interest in premises under section 178 of 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/Wehereby gives/give notice of my/our interest in the (Insert name(s) of notifier)

premises identified below for the purposes of section 178 of the Licensing Act 2003

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description		
Post town	Post code	

Name of applicant for, or holder of, premises licence or club applying for, or holding, club premises certificate (if known)

Premises licence / club premises certificate number (if known)

l/we	Ple	ease tick 🖌
a)	have a legal interest in the premises as freeholder or leaseholder	
b)	am/are the legal mortgagee in respect of the premises (within the meaning of the Law of Property Act 1925)	
c)	am/are in occupation of the premises	
l/v	/e are	
a)	an individual(s)	D please complete section (A)
ь)	a company	please complete section (B)
c)	a partnership	D please complete section (B)
d)	an unincorporated association	D please complete section (B)
e)	other (for example, a statutory corporation)	please complete section (B)
(A) DET	AILS OF INDIVIDUAL	
Mr	Mrs Miss Ms	Other title (for example, Rev)
Surnam	e First nan	nes
Current address differer premise	if	
Post To	wn Po:	stcode
Contac	t phone number in working hours (if any)	
E-mail a (option		

Part 2 - Details of my/our interest in the premises

Mr Mrs Miss Ms Other title (for example, Rev) Surname First names Current postal address if different from premises address Post Town Post Town Contact phone number in working hours (if any) E-mail address (optional)	DETAILS OF SECO	ND INDIVIDUAI	L (if applicable)		
Current postal address if different from premises address Post Town Post Town Contact phone number in working hours (if any) E-mail address		Mrs	Miss		
address if different from premises address Post Town Postcode Contact phone number in working hours (if any) E-mail address	Surname			First names	
address if different from premises address Post Town Postcode Contact phone number in working hours (if any) E-mail address					
address if different from premises address Post Town Postcode Contact phone number in working hours (if any) E-mail address	Commentered				
different from premises address Post Town Post Town Contact phone number in working hours (if any) E-mail address					
Post Town Contact phone number in working hours (if any) E-mail address					
Contact phone number in working hours (if any)	premises address				
Contact phone number in working hours (if any)					
Contact phone number in working hours (if any)					
Contact phone number in working hours (if any)					
E-mail address	Post Town			Postcode	
E-mail address					
	Contact phone nu	mber in workin	g hours (if any)		
(optional)	E-mail address				
	(optional)				

(B) DETAILS OF NON-INDIVIDUAL

Please provide name and registered address of notifier 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)

Please tick ♥ yes

• I have made or enclosed payment of the fee

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 NOTIFICATION

Part 3 – Signatures (please read guidance note 1)

Signature of notifier or notifier's solicitor or other duly authorised agent (see guidance note 2). If signing on behalf of the notifier please state in what capacity.

Signature	
Date	
Capacity	

.....

For joint notifiers' signature of 2nd notifier 2nd notifier's solicitor or other authorised agent (please read guidance note 3). If signing on behalf of the notifier please state in what capacity.

Signature	
Date	
Capacity	

Contact name (where not previously given or where it for correspondence associated with this notification (p	
Post town	Post code
Telephone number (if any)	
E-mail address (optional)	

Notes for Guidance

- 1. The form must be signed.
- 2. A notifier'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 notifier, both notifiers or their respective agents must sign the form.
- 4. This is the address which we shall use to correspond with you about this notification and if a change is made to the register.

Acknowledgement by

[insert name of relevant

<u>licensing authority</u>] of receipt of this notification of an interest in the premises described in the notice by the person/persons identified in the notice dated this day of 20[].

Signed for and on behalf of the authority