

Fair Processing Statement – Norwich City Council is legally required to protect the public funds it administers. This means we may share information provided to us with other bodies responsible for auditing or administering public funds, or where undertaking a public function, in order to prevent and detect fraud. For further information please visit www.norwich.gov.uk/nfi

Norwich City Council

SCHEDULE 3 OF THE LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982

Application for a licence to use any premises, vehicle, vessel or stall as a Sex Shop / Sex Cinema / Sexual Entertainment Venue (Delete as applicable)

All questions must be answered, save where otherwise stated. If relevant questions are not answered, the application will be deemed incomplete and will be returned to the applicant.

Section 1

Application details:

Is this an application for: Grant Renewal Transfer Variation

Is the application made by: an individual a partnership or other unincorporated body
a company or other corporate body

Section 2

Answer only if applicant is an individual

What is the full name of the individual?.....

Permanent residential address.....
.....

Any former names

Date of birth Place of birth.....

Date became resident in the UK.....or E.U Member State

National Insurance Number or E.U Member State Equivalent.

Telephone number (during normal office hours)

Email address:.....

Name and address to which correspondence to be sent (if different from above)

.....

.....

Has the applicant a financial interest in the business which is the subject of this application?

Yes No If yes, to what extent?

Is the whole business owned by the applicant? Yes No

Section 3

Answer only if the applicant is an unincorporated body or a partnership

Full name of applicant

What are the names of the applicant's partners? Please complete the table below:

Name (in full): Mr/Mrs/Miss/Other	Date of birth	Address of permanent residence throughout 6 months immediately preceding this application	Date became resident of United Kingdom or other EU member state

Are there persons responsible for the management of the applicant other than the partners?
If so state their names.

.....

.....

.....

Please confirm if the whole of the business is owned by the applicant? Yes No

Section 4

What is the name of the Applicant?

Has the Applicant previously been known by any other name and if so what name?

.....

If the Applicant is a company, what type of company is it (eg public or private, limited by share or guarantee, etc.)?

.....

What is the registered number of the Applicant?

What is the registered office address?

.....

In which country is the company incorporated?

What is the date of incorporation of the company?

Please complete the table in respect of each of the Directors, the Company Secretary or other persons responsible for the management of the body.

Name (in full): Mr/Mrs/Miss/Other	Date of Birth	Address of permanent residence throughout six months immediately preceding this application	Date became resident of United Kingdom or other E.U member State

Does the Applicant use any other trading names? If so, please state the trading name(s).

.....

What is the Applicant's trading address?.....

.....

.....

Please confirm if the whole of the business is owned by the applicant? Yes No

Section 5

All Applicants

Please give details of the person (if any) who is to be responsible for the management of the premises in the absence of the licence holder:

First Name..... Surname.....

Former Name (if any)

National Insurance Number or E.U Member State Equivalent.....

Permanent Address:

.....

Date of Birth: Place of Birth.....

Has any person named at any place in this application been associated in any way with any other application for a licence for a sex establishment? Yes No

If "yes" give full details.....

.....

Section 6

Premises details:

Is this application in respect of: Premises Vehicle Vessel Stall

Is the premises, vehicle, vessel or stall in use as a sex establishment at the date of this application? Yes No

If the answer is yes, state the name and address of the person or body currently operating the Business

.....
.....

What is full address of the premises for which a licence is sought?

.....
.....

If the application is in respect of a vehicle, vessel or stall, please state where it is to be used as a sexual entertainment venue.....

.....

Under what name is, or will the premises be known?.....

.....

Is the whole of the premises to be used under the licence? Yes No

If no, please state:

a) which part of the premises is to be used for the purposes of the licence

.....

b) the use to which the remainder of the premises are to be put

.....

c) the names of those responsible for the management of the remainder of the premises

.....

If the Applicant's interest in the premises is a leasehold one, please state:

a) Head-lease Sub-lease

b) the name and address of the landlord and of the superior landlord where applicable

.....
.....

c) the length of the unexpired term

Section 7

Proposed operation times and activities

Give the times it is proposed to operate the premises for the purpose of this licence:

<u>Day</u>	<u>Start</u>	<u>Finish</u>	State any seasonal variations or non standard timings where you intend to use the Premises, which are different to those listed in the column on the left.
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Please give full details of the nature of the relevant activity eg lap-dancing, pole-dancing, stage strip show, selling of sex articles, showing sex films etc

.....

.....

.....

.....

.....

Please confirm if the relevant entertainment involves full nudity Yes No

Variation of an Existing Licence

If the application is for a variation of an existing licence please give details of the variation sought, and include the new premises plan where applicable.

.....

.....

.....

.....

.....

Section 8

If the application is for the Transfer of a Premises Licence

Name of current Premises Licence Holder

.....

Please give the reason/s for the transfer application

.....

.....

.....

Section 9

Has the Applicant or any persons named in this form been convicted of a criminal offence whether in the UK or elsewhere? Yes No

If so, please give details of unspent convictions below:

Convictions:

Forenames	Surname	Former Name (if any)	Court	Date	Offence	Penalty or Sentence

Has the Applicant or any persons named in this form been cautioned whether in the UK or elsewhere? Yes No

If so, please give details below:

Cautions:

Forenames	Surname	Former Name (if any)	Offence	Date of Caution	Where caution administered

Has any person or the corporate or unincorporated body referred to in this application: -

Been disqualified from holding a licence for a sex establishment?	
Been refused the grant / renewal / transfer of a licence for a sex establishment?	
Been the holder of a sex establishment licence when that licence has been revoked?	
Been associated in any way with any other application for a sex establishment licence?	

If 'Yes' to any of the above please provide details:

Is there any information in this application which you would **not** wish to be seen by members of the public?

Yes No

If yes, state which information and the reasons why you would **not** wish it to be seen

.....
.....
.....

Is there any further information which the Applicant would wish the council to take into account when considering this application?

.....
.....
.....
.....

(If necessary, please continue on a separate sheet)

Please read the checklist below and tick to confirm you have enclosed all of the required information/documents:

I have made or enclosed payment of the fee

I have enclosed a plan showing the interior layout of the premises (which is clearly marked to indicate where relevant activity will take place) for consideration by the Licensing Authority

(For sexual entertainment venues only) I have enclosed a copy of the "club rules". Such club rules must contain the required conduct of performers which shall include for example, no sex acts, no giving or taking phone numbers (including exchange of business cards).

I have enclosed a scheme showing the exterior design for consideration by the Licensing Authority

I understand and agree that I must send a copy of my completed application to the Chief Officer of Police no later than seven days after the date of the application. I also understand that I must produce evidence of due service of the Notice of Application upon the Chief Officer of Police as required by paragraph 10(14) of the Third Schedule of the Local Government (Miscellaneous Provisions) Act 1982.

I understand that I must now advertise my application on or near the Premises for 21 days starting with the date of the application.

I understand that I must advertise the application in a local newspaper within seven days after the date of the application and that a copy of the notice of application which has been published must be given to the Licensing Authority in accordance with paragraph 10 (8) of the Third Schedule of the Local Government (Miscellaneous Provisions) Act 1982.

DECLARATION: I declare that the details in this application are true to the best of my knowledge and belief and acknowledge that if there are any omissions or incorrect statements of a serious nature this may result in the application being refused. I further declare that I have read and agree to abide by the conditions for the relevant sex establishment licence made by Norwich City Council in accordance with Section 2 Schedule 3 of the Local Government (Miscellaneous Provisions) Act 1982 should my application be granted.

APPLICANTS ARE INFORMED 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, IS GUILTY OF AN OFFENCE AND LIABLE, ON SUMMARY CONVICTION, TO A FINE NOT EXCEEDING £20,000.

Signature

Name of Signatory

Designation of Signatory

Date

NOTE:

1. In the case of an incomplete application, the Licensing Section will contact you for additional information to enable the application to be processed. The application will not be progressed until the application is complete.
2. Tacit Consent will not apply as it is in the public interest that the authority must process your application before it can be granted. If you have not heard from the Council within a reasonable period of time, please contact us using the contact details below.
3. THE NOTICE OVERLEAF MUST BE PUBLISHED IN A LOCAL NEWSPAPER CIRCULATING WITHIN NORWICH, NO LATER THAN 7 DAYS AFTER THE DATE OF YOUR APPLICATION.
4. THE NOTICE OVERLEAF, OR ONE IN A SIMILAR FORM, MUST BE DISPLAYED CONTINUOUSLY, ON THE PREMISES TO BE LICENSED, FOR A PERIOD OF 21 DAYS BEGINNING WITH THE DATE OF YOUR APPLICATION ON OR NEAR THE PREMISES AND IN A PLACE WHERE THE NOTICE MAY CONVENIENTLY BE READ AT ALL TIMES BY THE PUBLIC PASSING BY.

**Norwich City Council
Citywide Services
Public Protection (Licensing)
City Hall
St Peters Street
Norwich NR2 1NH**

01603 212761

licensing@norwich.gov.uk

Certificate

(To be completed by all applicants)

I certify that a copy of the notice overleaf was displayed on the premises to be licensed, on or near the premises, in a place where the notice may conveniently be read by the public, for a period ofdays,

From (date) to (date)

Signature of applicant

Date

NOTE: AFTER THE NOTICE HAS BEEN DISPLAYED FOR 21 DAYS, THIS FORM MUST BE COMPLETED, SIGNED AND RETURNED TO THE LICENSING TEAM, AT THE ADDRESS OVERLEAF.

YOU SHOULD ALSO ATTACH A COPY OF THE NOTICE WHICH APPEARED IN A LOCAL NEWSPAPER, CIRCULATING WITHIN NORWICH, TO THIS FORM.

**LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982
SECTION 2, SCHEDULE 3: CONTROL OF SEX ESTABLISHMENTS**

Notice of Application for a Licence for a Sex Establishment

NOTICE IS HEREBY GIVEN THAT I,

..... (full name)

APPLIED ON (date)

TO NORWICH CITY COUNCIL, IN RESPECT OF THE PREMISES KNOWN AS

.....

OF (address)

UNDER THE LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982, FOR THE GRANT
OR RENEWAL OR TRANSFER (Delete as applicable) OF A SEX ESTABLISHMENT LICENCE FOR A:

SEXUAL ENTERTAINMENT VENUE / SEX SHOP / SEX CINEMA (Delete as applicable)

FOR THE INTENDED DAYS AND OPENING HOURS OF

.....

.....

ANYONE WISHING TO MAKE **OBJECTIONS** TO THIS APPLICATION MUST DO SO IN WRITING TO:

Norwich City Council
Citywide Services
Public Protection (Licensing)
City Hall
St Peters Street
Norwich NR2 1NH

NO LATER THAN 28 DAYS AFTER THE DATE OF THE APPLICATION, STATING THE GROUNDS FOR
OBJECTION.