

Lancaster City Council

Application for a 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.

We BAU PROPERTIES LETTING COMPANY LIMITED
(Insert name(s) of applicant)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description			
10-12 SPRINGFIELD STREET (THE CAVERN)			
Post town	MORECAMBE LANCASHIRE	Postcode	LA4 4HA

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£9000

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
- i. as a limited company please complete section (B)
- ii. as a partnership please complete section (B)
- iii. as an unincorporated association or please complete section (B)

- iv. other (for example a statutory corporation) 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) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales please complete section (B)
- 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 an independent hospital in England 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 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 <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)
Surname			First names	
I am 18 years old or over				<input type="checkbox"/> Please tick yes
Current postal address if different from premises address				
Post town			Postcode	
Daytime contact telephone number				
E-mail address (optional)				

SECOND INDIVIDUAL APPLICANT (if applicable)

M <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)
Surname			First names	
I am 18 years old or over				<input type="checkbox"/> Please tick yes
Current postal address if different from premises address				
Post town		Postcode		
Daytime contact telephone number				
E-mail address (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	BAY PROPERTIES LETTING COMPANY LIMITED
Address	70 BUCKINGHAM ROAD MORECAMBE LAK 1BD
Registered number (where applicable)	03176503
Description of applicant (for example, partnership, company, unincorporated association etc.)	COMPANY
Telephone number (if any)	[REDACTED]
E-mail address (optional)	[REDACTED]

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
01	11	2024

If you wish the licence to be valid only for a limited period, when do you want it to end?

DD	MM	YYYY

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick any that apply

- a) plays (if ticking yes, fill in box A)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)
- f) recorded music (if ticking yes, fill in box F)
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)

Provision of late night refreshment (if ticking yes, fill in box I)

Supply of alcohol (if ticking yes, fill in box J)

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both -- please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur					
Fri					
Sat			Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sun					

B

Films Standard days and timings (please read guidance note 6)			Will the exhibition of films take place indoors or outdoors or both -- please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue					
Wed			State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon			State any seasonal variations for indoor sporting events (please read guidance note 4)
Tue			
Wed			
Thur			Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list (please read guidance note 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
Day	Start	Finish				
Mon			<u>Please give further details here</u> (please read guidance note 3)			
Tue						
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)			
Thur						
Fri			<u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5)			
Sat						
Sun						

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) LIVE MUSIC WILL STOP BY 10 PM		
Mon	09.00	02.00			
Tue	09.00	02.00	State any seasonal variations for the performance of live music (please read guidance note 4)		
Wed	09.00	02.00			
Thur	09.00	02.00			
Fri	09.00	02.00	Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat	09.00	02.00			
Sun	09.00	02.00			

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place <u>indoors or outdoors or both</u> – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	06.00	02.00	Please give further details here (please read guidance note 3) THIS IS JUST BACKGROUND MUSIC	Both	<input type="checkbox"/>
Tue	06.00	02.00			
Wed	06.00	02.00	State any seasonal variations for the playing of recorded music (please read guidance note 4) NEW YEARS EVE - 06.00 - 03.00 CHRISTMAS EVE - 06.00 - 03.00		
Thur	06.00	02.00			
Fri	06.00	02.00	Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat	06.00	02.00			
Sun	06.00	02.00			

G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	09.00	02.00	Please give further details here (please read guidance note 3)	Both	<input type="checkbox"/>
Tue	09.00	02.00			
Wed	09.00	02.00	State any seasonal variations for the performance of dance (please read guidance note 4) NEW YEARS EVE – 09.00 – 03.00 CHRISTMAS EVE – 09.00 – 03.00		
Thur	09.00	02.00			
Fri	09.00	02.00	Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat	09.00	02.00			
Sun	09.00	02.00			

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)</p>			<p>Please give a description of the type of entertainment you will be providing</p>		
Day	Start	Finish	<p>Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)</p>	Indoors	<input checked="" type="checkbox"/>
Mon	09.00	02.00		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue	09.00	02.00	<p>Please give further details here (please read guidance note 3)</p>		
Wed	09.00	02.00			
Thur	09.00	02.00	<p>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)</p>		
Fri	09.00	02.00	<p>CHRISTMAS EVE - 09.00 - 03.00 NEW YEARS EVE - 09.00 - 03.00</p>		
Sat	09.00	02.00	<p>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list (please read guidance note 5)</p>		
Sun	09.00	02.00			

I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors
Day	Start	Finish		Outdoors
Mon	23.00	02.00	Please give further details here (please read guidance note 3)	<input checked="" type="checkbox"/>
Tue	23.00	02.00		<input type="checkbox"/>
Wed	23.00	02.00	State any seasonal variations for the provision of late night refreshment (please read guidance note 4) CHRISTMAS EVE - 23.00 - 03.00 NEW YEARS EVE - 23.00 - 03.00	<input type="checkbox"/>
Thur	23.00	02.00		<input type="checkbox"/>
Fri	23.00	02.00	Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list (please read guidance note 5)	
Sat	23.00	02.00		
Sun	23.00	02.00		

Bay Properties

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
Day	Start	Finish			
Mon	06.00	02.00	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Tue	06.00	02.00			
Wed	06.00	02.00			
Thur	06.00	02.00			
Fri	06.00	02.00			
Sat	06.00	02.00			
Sun	06.00	02.00			
			Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 5)		
			CHRISTMAS EVE - 06.00-03.00 NEW YEARS EVE - 06.00-03.00		

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor:

Name	[REDACTED]
Address	[REDACTED]
Postcode	[REDACTED]
Personal licence number (if known)	[REDACTED]
Issuing licensing authority (if known)	LANCASTER CITY COUNCIL

K

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8).

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	06.00	03.00	<p><u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 5)</p> <p>Not applicable</p> <p>CHRISTMAS EVE - 06.00 - 04.00</p> <p>NEW YEARS EVE - 06.00 - 04.00</p>
Tue	06.00	03.00	
Wed	06.00	03.00	
Thur	06.00	03.00	
Fri	06.00	03.00	
Sat	06.00	03.00	
Sun	06.00	03.00	

M Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b, c, d and e) (please read guidance note 9)

The DPS that will be going into this pub has held his licence for over 30 years with no bad marks. He is active member of the Pubwatch scheme attending every meeting. There will be the challenge 25 policy in place.

b) The prevention of crime and disorder

Door Supervisors after 10pm
CCTV

c) Public safety

CCTV
Door Supervisors after 10pm
No outside drinking

d) The prevention of public nuisance

Door Supervisors
Bar Staff training in drunk and drug none tolerance

e) The protection of children from harm

No children on the premises unless private function.

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee.
- I have enclosed the plan of the premises.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.
- I understand that I must now advertise my application.

- I understand that if I do not comply with the above requirements my application will be rejected.

IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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 APPLICATION.




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 confirm that I am entitled to work in the UK and I am not subject to conditions preventing me from doing work relating to a licensable activity. I enclose a copy of my proof of entitlement to work.

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

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 11). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	
Capacity	

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 12). 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 13)	
[REDACTED]	
Post town	MORECAMBE
Postcode	[REDACTED]
Telephone number (if any)	[REDACTED]
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, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies, you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

CAVERN CLUB, MORECAMBE
POLICE CONDITIONS

A documented Challenge 25 scheme will be operated at the premises. The Challenge 25 scheme shall be actively promoted and advertised at the premises and will ensure that any person purchasing alcohol, who appears to be under 25 years of age, shall be asked to provide acceptable identification to prove that they are 18 years of age or over. Failure to supply such identification will result in no sale or supply of alcohol to that person.

The Proof of Age Standards Scheme (PASS) will be actively promoted at the premises by the display of Challenge 25 posters bearing the PASS logo. A PASS accredited holographic proof of age card will be the main identification document accepted at the premises as proof of age. A PASS card must be accepted as proof of age if a purchaser possesses one. Where a purchaser does not possess a PASS accredited proof of age card, only the following alternative forms of alternative identification will be acceptable: -

- (a) Photo driving licence
- (b) Passport or
- (c) HM Forces Warrant Card

To utilise and fully record any refused sales or challenges made to patrons and such records be kept in an appropriate form and be made available on inspection to the police or other authorised agency.

All staff involved with the provision of alcohol will successfully complete training in age related products prior to operating a till. Refresher training will also be successfully completed not more than every 6 months, this will be fully documented and be available for inspection to police officers or other authorised persons.

CCTV equipment shall be installed and be maintained in good working order in accordance with the manufacturer's instructions. Training should be provided for staff members in the usage of the CCTV equipment. CCTV footage recorded must, as a minimum, cover each entry/exit point of the premises and be recording at all times when the premises is conducting licensable activities.

The images recorded by the CCTV system shall be retained in unedited form for a period of not less than 30 days.

The Data Controller will make footage available within a reasonable time to a Police Constable or Authorised Officer, where such request is made in accordance with, and which satisfies, the Data Protection Act 1998.

A zero tolerance approach to drugs will be promoted via appropriate signage in the premises. Any person found to be in possession of drugs must be reported to the police immediately upon being apprehended.

On Friday & Saturday, a minimum number of 2 members of door staff registered with the SIA will be on duty from 22:00 for the first 100 customers and, thereafter, one for every 100 or part thereof, to close.

Door supervisors registered with SIA shall be equipped with an appropriate method of keeping an accurate record of the capacity levels, including any separate capacity levels for individual rooms or levels.

The designated premises supervisor will maintain a daily record comprising of the start time and finish time of each door supervisor. The door supervisor will record their SIA badge number and will sign and print their name in a legible form at the beginning and end of each tour of duty. The record shall be kept securely on the premises for at least 6 months and shall be produced on request to the police or other authorised person.

Any other requirement for SIA Door Staff to be on a risk assessment basis such as:

Music Festivals, St Patrick's Day, Bank Holidays, last Friday before Christmas known as 'Black Eye Friday', Any showing of major sporting events including Boxing, Football (World Cup, European Championships, Premier League), Wrestling etc,

Where there is information from Police where security is needed such as a wake, funeral or high tensions in the area and community.

Also, consideration for SIA Door Staff for Private Bookings or events such as Christenings, Birthdays, Funeral Wakes where there is a possibility of large numbers of patrons.

The DPS must risk assess these events and have in place sufficient SIA Door Staff cover to manage the premises and ensure the Licensing Objectives are being promoted.

Any bookings, events etc where large numbers expected (large numbers being in excess of what the DPS usually expects on any given day of trading) then the DPS is requested to email Police Licensing.

Management are welcome to contact Police Licensing for any advice on these matters.

Guidelines for SIA Door Staff are 2 x SIA Door Staff cover for the first 100 patrons then a further 1 x SIA Door Staff cover for each 100 patrons therein.

All private bookings should only be taken by a manager and risk assessed by management. Records of the booking should be kept and any concerns passed to Police Licensing. These records should be available for inspection by Police or any other responsible authority.

All children must be accompanied by a responsible adult. There will be a limited number of alcoholic drinks supplied to adults with children. From 21:00 hours no children must be allowed on the premises.

A personal licence holder shall be on the premises at all times during which intoxicating liquor is being sold/supplied to customers or being consumed by customers except in the case of emergency.

Whenever the designated premises supervisor is not at the premises another personal licence holder will normally be nominated by the designated premises supervisor as being the responsible person to manage the premises and will have the contact details of the designated premises supervisor. The details of such person to be on prominent display.

The provision of off-sales to terminate at 23.00 hours

All external doors and windows shall be kept closed when regulated entertainment is being provided except in the event of an emergency

The premises licence holder or his representative shall conduct regular assessments of the noise coming from the premises on every occasion the premises are used for regulated entertainment and shall take steps to reduce the level of noise where it is likely to cause a disturbance to local

residents. A written record shall be made of those assessments in a log book kept for that purpose and shall include, the time and date of the checks, the person making them and the results including any remedial action

There shall be placed at all exits from the premises in a place where they can be seen and easily read by the public, (or member and their guests) notices requiring customers to leave the premises and the area quietly (Note: this may also include a reference to vehicles)

Refuse such as bottles shall be disposed of from the premises at a time when it is not likely to cause a disturbance to residents in the vicinity of the premises

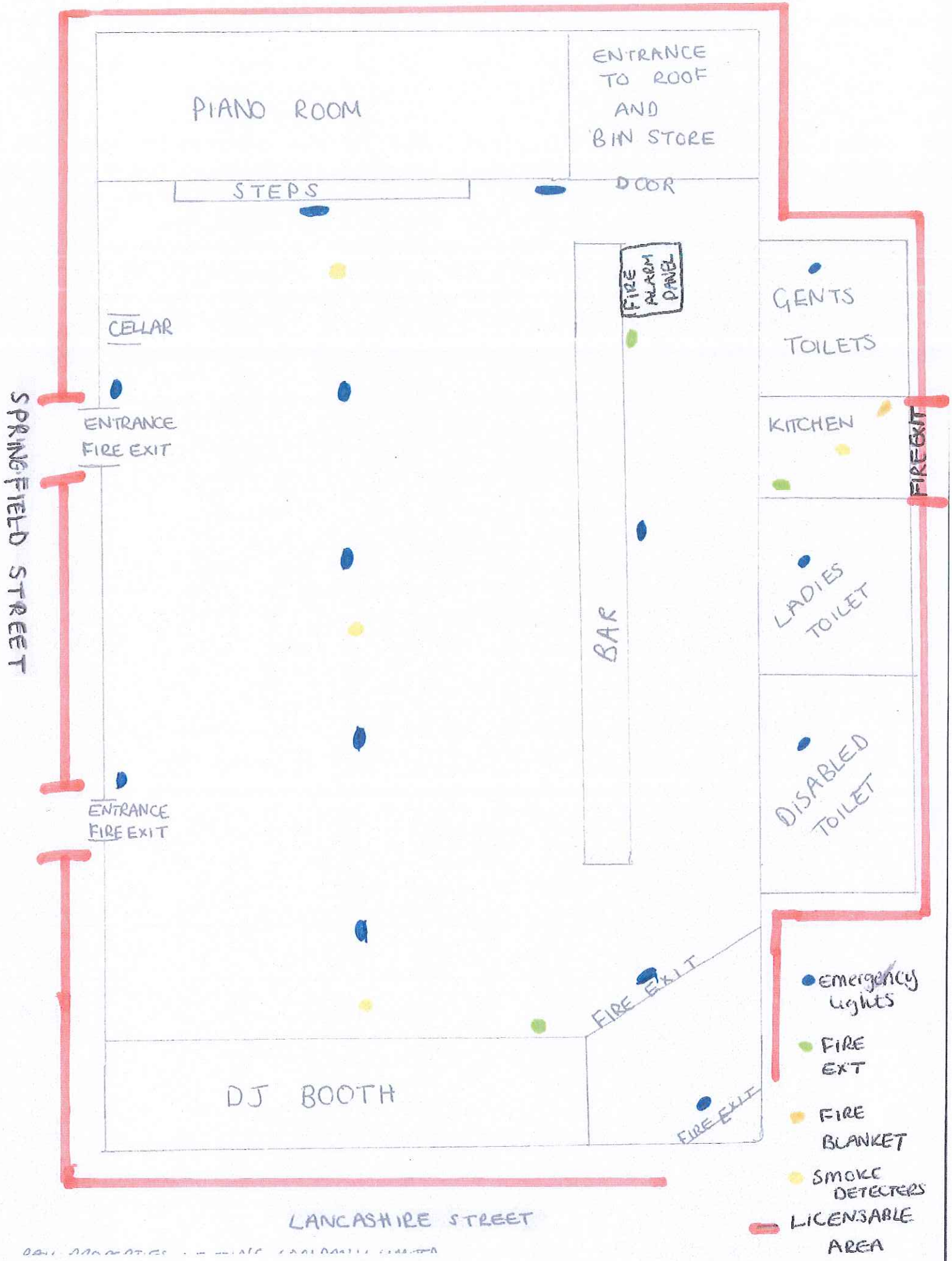
There will be no irresponsible drinks promotions.

There will be no adult entertainment services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children.

An emergency lighting system will be installed with comprehensive signage indicating the emergency exit points. There must be first aid facilities at the premises with all incidents recorded in an accident book kept on site. A Health & Safety policy will be in place.



PLAN FOR 10-12 SPRINGFIELD STREET LA4 4HA



Consent of individual to being specified as premises supervisor

I

[Redacted]

of

[Redacted]

[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

THE CAVERN
[type of application]

by

BAY PROPERTIES LETTING COMPANY LTD
[name of applicant]

[Redacted]

relating to a premises licence

[Redacted]

for

THE CAVERN
10-12 SPRINGFIELD STREET
MORECAMBE
LA4 4HA

[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by

BAY PROPERTIES LETTING COMPANY LIMITED
[name of applicant]

concerning the supply of alcohol at
THE CAVERN
10-12 SPRINGFIELD STREET
MORECAMBE
LA4 4HA

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

[Redacted]

[insert personal licence number, if any]

Personal licence issuing authority

[Redacted]

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed

[Redacted]

Name (please print)

[Redacted]

Date

[Redacted]