|  |  |
| --- | --- |
|  | Falkirk Council Licensing Unit  Foundry  4 Central Park  Central Boulevard  Larbert  FK5 4RU  Telephone: 01324 501575  E- mail: licensing@falkirk.gov.uk |

**Civic Government (Scotland) Act 1982**

**Application for Late Hours Catering Exemption**

1. All relevant questions must be answered in block letters or typescript. If you are providing an e-mail address this should be done in the required format for sending an e-mail.
2. Failure to fully and accurately complete any section (in particular question 6) of the application form and failure to submit the necessary supporting documentation may render it void.

**SECTION 1**

**Question 1**

To be completed only if the application is being made by a natural person (i.e., individual)

|  |  |
| --- | --- |
| (a) Full name of applicant |  |
| (b) Home Address (including postcode) |  |
| (c) Date of Birth |  |
| (d) Town and Country of Birth |  |
| (e) E-mail Address |  |
| (f) Mobile Telephone Number |  |
| (g) Home Telephone Number |  |
| (h) Works Telephone Number |  |

**Question 2**

|  |  |
| --- | --- |
| Do you intend to carry out the day to day management of the business? | YES/NO\* |

\*If you have answered NO you must complete question 5

**Question 3**

To be completed only if the application is by a non-natural (i.e., partnership or company)

|  |  |
| --- | --- |
| (a) Full name of partnership or company.  (if a partnership a copy of the agreement must be submitted with the application) |  |
| (b) Address of principal/registered office (including postcode) |  |
| (c) Telephone number of principal/registered office |  |
| (d) Registered Company Number |  |
| (e) E-mail Address |  |

**Question 4**

Names, private addresses and place and date of birth of its directors, partners, or other persons responsible for its management. (Continue on a separate sheet if necessary)

|  |  |  |
| --- | --- | --- |
| Full name | Private Address | Date and Place of Birth |
|  |  |  |
|  |  |  |
|  |  |  |

**Question 5**

To be completed in respect of the employee or agent who is to carry on the day-to-day management of the activity in relation to which the application is made.

|  |  |  |
| --- | --- | --- |
| Full name | Private Address | Date and Place of Birth |
|  |  |  |

|  |  |
| --- | --- |
| E-mail Address |  |
| Home Telephone number |  |
| Work Telephone Number |  |
| Mobile Telephone Number |  |

**Question 6**

|  |  |
| --- | --- |
| Does any of the persons named in questions 1, 4 or 5 above have any current convictions, conditional offers and or fixed penalties recorded against them **within or outwith the UK?** In the case of a renewal application, this refers only to such convictions, conditional offers and or fixed penalties since the licence was last granted. | YES/NO\* |

If yes, disclose all such unspent convictions or, conditional offers and or fixed penalties.

Failure to disclose may result in the application being returned to the applicant. (Continue on a separate sheet if necessary).

**Section (a) Convictions**

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Offence | Court or Country (outwith UK) | Sentence/Penalty |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Section (b) – Conditional Offers and Fixed Penalties**

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Offence | Country (outwith UK) | Sentence/Penalty |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**SECTION 2**

**Question 7**

Details of premises to be licensed.

|  |  |
| --- | --- |
| (a) Full postal address, including trading name of premises to be licenced. |  |
| (b) Telephone Number of premises |  |
| (c) Explain the nature of the premises (i.e., Indian take, Chinese takeaway, fish and chip shop etc) and type(s) of food. |  |
| (d) Reason for exemption |  |
| (e) Period | From: / / To: / / |
| (f) Proposed opening hours (24 hours format) |  |

**SECTION 3**

**Question 8**

CHECKLIST OF PAPERWORK SUPPORTING THIS APPLICATION

The following relevant documentation must be submitted with the application if required otherwise the application will not be accepted.

|  |  |
| --- | --- |
| **I confirm that I have enclosed the following** | **Submitted** |
| (a) Fee Paid |  |
| (b) Photographic Identification (new applications submitted by individual only). |  |
| (c) Proof of address (new applications submitted by individuals only) |  |
| (d) Criminal Record Check/Verification from Embassy. This applies to all persons named on the application who have lived outwith the UK for any period of at least 6 months within the last 10 years. |  |
| (e) Copy of partnership agreement if required. |  |
| (f) Location plan showing at least two named roads and surrounding buildings or the situation of the application site in relation to the locality. The application site must be clearly marked and include all of the land relating to the area to be licensed. |  |

**SECTION 4**

**INDIVIDUAL PERSON**

I declare that the particulars given by me on this form are true and I hereby make application to Falkirk Council for the grant of a Late Hours Catering Exemption.

Date:

Signature of applicant/or agent:

Or agents address:

**COMPANY, PARTNERSHIP (\*Insert company / partnership name)**

On behalf of\*

.

I declare that the particulars given by me on this form are true and I hereby make application to Falkirk Council for the grant of a Late Hours Catering Exemption

Date:

Signature of person authorised to sign on behalf of company/partnership:

Address of Signatory (if not already specified in Sections 3 or 4 above)

|  |
| --- |
| Please indicate where all correspondence should be sent to applicant/agent/manger. Also, where possible provide an e-mail address for correspondence where appropriate.  Applicant □ Employer □ Manager □  E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form within this authority for the prevention and detection of fraud.  It may also share this information with other bodies administering public funds solely for these purposes.**

N.B. Any person who in, or in connection with, the making of this application makes any statement which he/she knows to be false or recklessly makes any statement which is false in a material matter shall be guilty of an offence and liable, on summary conviction, to a fine.

Your privacy is important to us. You can find out how we deal with your personal information here <http://www.falkirk.gov.uk/privacy/law-licensing/licensing/>