|  |  |
| --- | --- |
|  | 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 the grant/renewal of a Late Hours Catering Licence**

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.

**Before completing the application please read the guidance notes on:-**

**(i) Applying for a Late Hours Catering Licence**

**(ii) Completing an application form for a Late Hours Catering Licence**

**SECTION 1**

|  |  |
| --- | --- |
| Is the application in respect of a new grant or renewal? | NEW/RENEWAL\* |
| If existing give details: | Licence No.:    Expiry Date: |

**SECTION 2**

**2**. 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 |  |

**3.**

|  |  |
| --- | --- |
| 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

**4.** 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 |  |

(f) 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 |
|  |  |  |
|  |  |  |
|  |  |  |

**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 |  |

**6**.

|  |  |
| --- | --- |
| Does any of the persons named in questions 2, 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 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**7.**

|  |  |
| --- | --- |
| Has any person named in questions 2, 4 or 5 lived outwith the United Kingdom for a period of six months or more within the last 10 years? In the case of renewal application, it applies to any person living outwith the United Kingdom since last grant of licence. | YES/NO\* |

\* If yes you are required to provide a Criminal Record Check/ verification from the Embassy of the country you resided in. Information on how to obtain this is contained within the guidance notes.

**8.**

|  |  |
| --- | --- |
| (a) Has any person named in questions 2, 4, or 5 above previously held or currently holds a Late Hours Catering Licence issued by this or any other authority? | YES/NO\* |
| (b) if yes which authority granted the licence? |  |
| (c) When was it granted? |  |
| (d) When does it expire? |  |

**9.**

|  |  |
| --- | --- |
| (a) Has any person named in questions 2, 4 or 5 above ever applied for and been refused a Late Hours Catering Licence by this or any other authority? | YES/NO\* |
| (b) If yes which authority refused the licence? |  |
| (c) When was it refused? |  |

**If an application for a late hours catering licence was refused by this authority within the last year a further application will only be accepted if there has been a material change in circumstance. This information must be provided with the application.**

**SECTION 3**

**10**. 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) |  |
| (d) Has the business been registered as food establishment with Environmental Health, Falkirk Council? | YES/NO\* |
| (e) Has there been any previous alternations carried out on the property? | YES/NO\* |
| \*If yes give details including dates |  |
| (f) List any proposed alterations to the premises |  |

**11.** Hours and days the licence is required between 11.00 pm and 5.00 am.\*

\***Please refer to the Council’s Late Hours Catering Policy for details of generally permitted trading hours.**

**Please note if the application is for the renewal of a licence additional hours cannot be sought. A separate application to vary the licence will require to be submitted.**

|  |  |  |
| --- | --- | --- |
| Day | From | To |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |
| Saturday |  |  |
| Sunday |  |  |

**SECTION 4**

**14.** 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) Application Fee. |  |
| (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. |  |
| (g) Completed form for arrangements for disposal and presentation of waste/recycling. |  |
| (h) Copy of controlled waste transfer note. |  |

**SECTION 5**

TO BE COMPLETED BY INDVIDUAL, PARTNERSHIP OR COMPANY

Complete (A) or (B) as appropriate. Where declaration (A) is made there must be produced in due course a Certificate of Compliance with Paragraph 2 of Schedule 1 to the Civic Government (Scotland) Act 1982.

1. I/We declare that I/We shall for a period of 21 days commencing with the date hereof, display at or near the premises location so that it can conveniently be read by the public, a notice complying with the requirements of Paragraph 2 of Schedule 1 to the Civic Government (Scotland) Act 1982.

Or

1. I/We declare that I am/we are unable to display a notice of this application at or near the premises location because I/we have no rights of access or other rights enabling me/us to do so, but that I/we have taken the following steps to acquire the necessary rights, namely: (Here specify steps taken)

…………………………………………………………………………………………………

…………………………………………………………………………………………………

But have been unable to acquire those rights.

**SECTION 6**

**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 Licence.

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 Licence

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)

**DO NOT DISPLAY THE NOTICE UNTIL YOU ARE SURE THE LICENSING OFFICE HAS ACCEPTED THE APPLCATION.**

|  |
| --- |
| 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/>

**OFFICE USE ONLY**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **DATE RECEIVED** | **ACCEPTED/REFUSED AND REASON** | **DATE PASSED TO** | **DATE RESPONSE RECEIVED** | **DATE OF DECISION** | **DECISION** |
|  |  | Police  Fire  BC  EH  DC  Waste  CLEF |  |  |  |

|  |  |
| --- | --- |
| **Proof of address** | **Checked by -**  **Destroyed by -** |