

GAMBLING ACT 2005

This form is prescribed by Regulation 3(1)(a) of the Small Society Lotteries (Registration of Non-Commercial Societies) Regulations 2007

APPLICATION FORM FOR REGISTRATION OF NON-COMMERCIAL SOCIETY

If you are completing this form by hand, please write legibly in block capitals using ink.

**To: Licensing Section
Falkirk Council
Municipal Buildings
Falkirk. FK1 5RS
Telephone: 01324 501575
Fax: 01324 501588
e-mail: licensing@falkirk.gov.uk
LP1 Falkirk-2**



FALKIRK COUNCIL LICENSING BOARD

SECTION A – Details of Society applying for registration

1. Name of Society

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2. Address (including postcode) of office or head office of Society

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3. Telephone number of Society

4. Please state the purpose(s) for which the Society is established and conducted

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5. If the Society is a registered charity, please give the Society's unique charity registration number

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6. Has the Society held an operating licence under the Gambling Act 2005 in the period of five years ending with the date of this application?

Yes No

7. If the answer to question 6 is 'yes', has the operating licence been revoked in the period of five years ending with the date of this application?

Yes No

8. If the answer to question 7 is 'yes', please state the reasons for revocation and enclose a copy of the notice of revocation if one is available

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9. Has the Society applied for and been refused an operating licence in the period of five years ending with the date of this application?

Yes No

SECTION B – General information about person applying on behalf of Society

10. Name

11. Capacity

12. Address (including postcode)

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13. Date of Birth

14. Daytime telephone number

SECTION C – Contact details for correspondence associated with this application

15. Please tick one box as appropriate to indicate address for correspondence in relation to this application

Address in section A Address in Section B Address below

Address (including postcode)

.....

.....

.....

Telephone number

Email address (if the applicant is happy for correspondence in relation to this application to be sent via email)

.....

SECTION D – Declaration

16. Please complete the following declaration and checklist

I (full name)

(a) make this application on behalf of the Society referred to in Section A and have authority to act on behalf of that Society;

(b) enclose payment of the registration fee of £40;

(c) confirm that, to the best of my knowledge, the information contained in this application is true. I understand that it is an offence under Section 342 of the Gambling Act 2005 to give information which is false or misleading in, or in relation to, this application.

Signature

Date

Capacity

Note to Societies applying for registration:

The application will be refused if in the period of five years ending with the date of the application:

- (a) an operating licence held by the Society has been revoked under Section 119(l) of the Gambling Act 2005; or
- (b) an application for an operating licence made by the Society has been refused.

The application may be refused if the local authority think that:

- (a) the Society is not a non-commercial society;
- (b) a person who will or may be connected with the promotion of the lottery has been convicted of a relevant offence; or
- (c) information provided in or with the application is false or misleading.

FEES

The fee payable in respect of an application under section 29(1) of the Act to change the Permit/Licence Holder's details is £20.

Data Protection Act 1998

The information on this form may be held on an electronic public register which may be available to members of the public on request.

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/>

For use by the Licensing Board only Application checklist	
Date received	
Fee amount	
Receipt number	
Received by (<i>INITIALS</i>)	
Date granted/refused (delete as appropriate)	