

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

SCHEDULE 3

Regulation 4(2)

Notification of an interest in premises under section 178 of 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.

I/We
(Insert name(s) of notifier)
hereby give/gives notice of my/our interest in the premises identified below for the purposes of section 178 of the Licensing Act 2003

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description	
Post town	Post code

Name of applicant for, or holder of, premises licence or club applying for, or holding, club premises certificate (if known)

--

Premises licence / club premises certificate number (if known)

--

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Part 2 - Details of my/our interest in the premises

- | I/we | Please tick |
|---|--------------------------|
| a) have a legal interest in the premises as freeholder or leaseholder | <input type="checkbox"/> |
| b) am/are the legal mortgagee in respect of the premises (within the meaning of the Law of Property Act 1925) | <input type="checkbox"/> |
| c) am/are in occupation of the premises | <input type="checkbox"/> |

I /we are

- | | | |
|---|--------------------------|-----------------------------|
| a) an individual(s) | <input type="checkbox"/> | please complete section (A) |
| b) a company | <input type="checkbox"/> | please complete section (B) |
| c) a partnership | <input type="checkbox"/> | please complete section (B) |
| d) an unincorporated association | <input type="checkbox"/> | please complete section (B) |
| e) other (for example, a statutory corporation) | <input type="checkbox"/> | please complete section (B) |

(A) DETAILS OF INDIVIDUAL

Please tick
Mr Mrs Miss Ms Other title
(for example, Rev)

Surname **First names**

Current postal address if different from premises address

Post Town **Postcode**

Contact phone number in working hours (if any)

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

E-mail address (optional)

DETAILS OF SECOND INDIVIDUAL

Please tick

Mr Mrs Miss Ms Other title (for example, Rev)

Surname **First names**

Current postal address if different from premises address

Post Town **Postcode**

Contact phone number in working hours (if any)

E-mail address (optional)

(B) DETAILS OF NON-INDIVIDUAL

Please provide name and registered address of notifier 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
Address

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Registered number (where applicable)
Description of applicant (for example partnership, company, unincorporated association etc)
Telephone number (if any)
E-mail address (optional)

- I have made or enclosed payment of the fee Please tick yes

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

Part 3 – Signatures (please read guidance note 1)

Signature of notifier or notifier’s solicitor or other duly authorised agent (See guidance note 2). If signing on behalf of the notifier please state in what capacity.

Signature
.....

Date
.....

Capacity
.....

For joint notifiers signature of 2nd notifier 2nd notifier’s solicitor or other authorised agent (please read guidance note 3). If signing on behalf of the notifier please state in what capacity.

Signature
.....

Date
.....

Capacity
.....

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Contact name (where not previously given or where it differs from the notifier) and address for correspondence associated with this notification (please read guidance note 4)	
Post town	Post Code
Telephone number (if any)	
E-mail address (optional)	

Notes for Guidance

1. The form must be signed.
2. A notifier's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
3. Where there is more than one notifier, both notifiers or their respective agents must sign the form.
4. This is the address which we shall use to correspond with you about this notification and if a change is made to the register.

Acknowledgement by
[insert name of relevant licensing authority]
of receipt of this notification of an interest in the premises described in
the
notice by the person/persons identified in the notice dated this
day of
..... **20 []**.
Signed for and on behalf of the authority