

- ii. any other persons responsible for management of the business carried on, or to be carried on at the premises to be licensed:

- e) Full names and addresses of person(s) who benefit ultimately from the profits made by the Company and the proportion in which they benefit.
Please therefore give details of:

- i. Amount of issued shares.

- ii. Full name and addresses of each shareholder and the amount of shares held by each person:

- iii. Are any of the shareholders nominees of any other person? Yes/No

If so, please give details of persons who may control the exercise of rights conferred by the shares:

- iv. In the case of the shareholder(s) which are Limited Companies, please give details of the names and addresses of the shareholders in that Company or Companies:

3. If the applicant is an Unincorporated Body please state:

a) Full name of applicant:

b) Principal office of Body:

.....
.....
.....

c) Full names and private address of all persons responsible for management of the business:

4. a) Please state full address of the premises to be licensed:

b) Are the premises owned by the applicant? Yes/No
If **NOT** please state:

i. Full name of owner

ii. Principal office of Body

.....
.....
.....

iii. Is the property sub-let or is any other person in occupation of/entitled of the premises or any part thereof? Yes/No
If **YES** give details:

If applicant is an individual, please answer questions 5 and 6 below. Companies or Unincorporated Bodies need not answer these questions.

5. a) Is the business carried on by you on the premises carried on other than solely and exclusively for your own benefit? Yes/No
- b) Is there any other person entitled to share in the profits of the business. Yes/No

If the answer to any of the above questions is **YES** please give the following details:

- i. Name and address of person(s)/Company entitled to benefit/share profits:

- ii. Arrangements in force, i.e. is there a formal partnership? Are you an employee of the other person?

6. Is the business carried on on the premises to be managed by any person in addition to yourself? If **YES**, please give name and address of person involved.

The attached declaration of convictions **must** be completed by the following persons:

- a) The applicant
- b) Every person whose name appears in the answers to questions 5 and 6.
- c) Every person whose name appears in the answers to questions 2 and 3.

Additional copies of the declaration are available on request.

An applicant for the grant, renewal or transfer of a licence under this Schedule shall, not later than 7 days after the date of the application, send a copy of the application to the chief officer of police.

**Declaration of Convictions, Forming Part of an Application to Use
Premises as a Sex Establishment.
- Rehabilitation of Offenders Act 1974
- Local Government (Miscellaneous Provisions) Act 1982**

1. Have you been convicted of any offence(s) whatever, for which you received:
 - a) a sentence of imprisonment for life
or
 - b) a sentence of imprisonment or corrective training for a term exceeding 30 months
or
 - c) a sentence of preventative detention.

If so, please give full particulars including date of conviction, Courts, nature of offence(s), term of imprisonment imposed: *[please use separate sheet for additional cases if appropriate]*

2. Have you been convicted of any offence(s) whatever, within the past **TEN YEARS**, for which you received:
 - a) a sentence of imprisonment for a term exceeding **SIX MONTHS** but **NOT** exceeding **THIRTY MONTHS**
or
 - b) a sentence of cashiering, discharge with ignominy OR dismissal with disgrace from HM forces.

If so, please state: *[use separate sheet for additional cases where appropriate]*

- i. Nature of Offences:

ii. Date of sentence(s)

iii. Court of convictions(s)

iv. Punishment imposed

3. Have you been convicted of any offence(s) whatever, within the past **SEVEN YEARS**, for which you received:

- a) a sentence of imprisonment for a term **NOT** exceeding **SIX MONTHS**.
or
- b) a sentence of Borstal Training
or
- c) a sentence of dismissal from HM Service on other than medical grounds.

If so, please state: *[use separate sheet for additional cases where appropriate]*

i. Nature of Offences.

ii. Date of sentence(s)

iii. Court of convictions(s)

iv. Punishment imposed

4. Have you been convicted of any offence(s) whatever, within the past **FIVE YEARS**, for which you received:
- a) a sentence or a fine
or
 - b) a sentence subject to rehabilitation such as a **community service order**
or
 - c) a sentence subject to a Hospital Order under Part Five of the Mental Health Act 1959
or
 - d) any sentence of **detention** in respect of a conviction in Service disciplinary proceedings.

If so, please state: *[use separate sheet for additional cases where appropriate]*

i. Nature of Offences.

ii. Date of sentence(s)

iii. Court of convictions(s)

iv. Punishment imposed

5. a) Are you at the present time the subject of a **Probation Order, Bind Over of Conditional Discharge**.

if so, please state:

If so, please state: *[use separate sheet for additional cases where appropriate]*

i. Date of Order.

ii. Court of convictions(s)

iii. Period of Order

iv. Nature of offence in respect of which Order was made

OR

b) Have you been convicted of any offence(s) whatever, during the past **SIX MONTHS**, for which you received an **ABSOLUTE DISCHARGE**.

If so, please state: *[use separate sheet for additional cases where appropriate]*

i. Date of Conviction(s)

ii. Court of convictions(s)

iii. Nature of offence(s)

6. Are you the subject of any outstanding charge(s) OR Summons?

If so, please state: *[use separate sheet for additional cases where appropriate]*

a) Nature of alleged offence(s)

b) Date of Court Hearing, if known

7. a) Are you, or have you been:

- i. a director of a Limited Company
or
- ii employed by any Limited Liability Company
or
- iii involved in the running of a Company which Company has, as any time when you have been associated with the Company, been convicted of **any** offence in relation to the use of any premises as a sex establishment or the sale or possession of sexually arousing material.

if so, please give the following details:

i. Name of Company.

ii. Nature of Offence(s)

iii. Date of Conviction(s)

iv. Penalty imposed

NOTE:

If you have any doubt as to whether a particular offence is relevant, you should declare it. For guidance only, offences under the Obscene Publications Act 1959 to 1964, the Sexual Offences Act 1956, the Indecent Displays Act 1981 or the Town Police Clauses Act 1847 would automatically merit disclosure.

- b) At any time when you have been associated with any Limited Company has any material or articles held on premises used by the Company been seized or removed by any person or body, whether under Section 3 of the Obscene Publications Act or otherwise?

If yes, please give details of the materials seized and the outcome of any Court decision in respect of the seizure.

This Declaration is included in, and forms part of, the application dated

made by

In respect of

Signed:

Dated:

Print Name:

Please complete fees boxes below.

Fees

These may be paid by card or cheque as follows:

To make a card payment:

To make a payment and to obtain the payment authorisation code and reference number for your licence, please call our Customer Services on 0300 126 7000

When making the call, listen to the options and press the relevant number(s) for Licensing for the Daventry area. Then wait on the line for a Customer Service Advisor:

- your name;
- your address;
- the type of licence / permit you wish to renew; and,
- your debit or credit card details.

You will receive a payment authorisation code and reference number over the phone on completion, which will be confirmed by email or letter. You need to record the authorisation code and reference number on your application form.

Your licence / permit / certificate application will not be deemed complete without the authorisation code and reference number being recorded in the boxes provided for on the application / renewal form.

To make a cheque payment:

If paying by cheque please enclose your cheque with your application, made payable to: West Northamptonshire Council, crossed a/c payee.

We **do not** accept cash payments by post or at our offices.

If you have made a payment by phone / card, please complete the boxes below:

Authorisation code:	Reference number:	Amount (£):

If you have enclosed a cheque please complete this box:

Amount (£):

Please **post** this form and accompanying documents to:

West Northamptonshire Council
Licensing Team
Lodge Road
Daventry
NN11 4FP

Please be aware that a licence lasts for a maximum of one year only.

You are reminded that in order to avoid the possibility of a period for which you are not licensed your application should be received by us no later than 28 days before your current licence expires.