

This application must be accompanied by the appropriate fee and lodged with:

Licensing Section
The City Of Edinburgh Council
249 High Street, Edinburgh EH1 1YJ

T: 0131 529 3223 / 4206 F: 0131 529 4207

Office Hours:

Mon, Wed, Thu: 0830 – 1630
Tue: 1000 – 1630
Fri: 0830 – 1500

www.edinburgh.gov.uk/licensing

OFFICIAL USE ONLY Record of Application	
DATE	
TILL NO.	
RECEIPT NO.	
INITIALS	
FEE	

Licensing (Scotland) Act 2005, sections 33, 34 and 35

APPLICATION FOR TRANSFER OF PREMISES LICENCE/PROVISIONAL PREMISES LICENCE*

***Delete as appropriate**

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

Is this application made in terms of Section 33 of the Licensing (Scotland) Act 2005? YES/NO*
Is this application made in terms of Section 34 of the Licensing (Scotland) Act 2005? YES/NO*
Is the applicant applying for a variation with the transfer application YES/NO*

APPLICANT INFORMATION

Question 1

Please provide the name, address, postcode, date and place of birth, and contact telephone number of the current Licence Holder.

Question 2

Where the application is made by the current licence holder, “applicant” is the person(s) into whose name the licence is to be transferred.

2(a) *Where applicant is an individual, provide full name, date and place of birth, home address including postcode, telephone number and e-mail address.*

2(b) Where applicant is a partnership, please provide full name, and postal address of partnership.

2(c) Where applicant is a company, please provide name, registered office and company registration number and a contact address.

2(d) Where the applicant is a club or other body, please provide full name, and postal address of club or other body.

2(e) Where applicant is a partnership, company, club or other body, please provide the names, dates and places of birth, and home addresses of connected persons.*

* Connected person is defined in section 147(3) of the Licensing (Scotland) Act 2005.

Question 3

Previous applications

Has the applicant been refused a premises licence under section 23 of the Licensing (Scotland) Act 2005 in respect of the same premises?

YES/NO*

**If YES – provide full details*

Question 4

Previous convictions

Has the applicant or any connected person ever been convicted of a relevant or foreign offence¹ YES/NO*

*If YES – provide full details

For the purpose of this Act, a conviction for a relevant offence or foreign offence is to be disregarded if it is spent for the purpose of the Rehabilitation of Offenders Act 1974

Name & position (if applicable)	Date of conviction or sentence	Court	Offence	Penalty

Question 5

Has the licence holder: –

- *Died*
- *Become incapacitated*
- *Become Insolvent*
- *Been dissolved*
- *Transferred the business in the premises to another person*

Question 6

Please provide full name, address, postcode and licence number of the premises

If you do not wish to apply for a variation of the licence with the transfer application, please go to page 7 and date and sign the application form.

¹ In addition to any convictions held by the applicant at the time of application, applicants should also familiarise themselves with the contents of section 24(1) of the Licensing (Scotland) Act 2005 in respect of any convictions for relevant or foreign offences which they may receive during the period beginning with the making of the premises licence application and ending with determination of the application.

If you do wish to apply for a variation of the licence with the transfer application, please complete the rest of the application form.

MINOR VARIATIONS

Question 7

7(a) Do you consider the proposed variation to be a minor variation? YES/NO*
(If YES, please answer the rest of question 7. If NO please go to question 8)

7(b) Do you propose a variation to the layout plan which is not inconsistent with the operating plan for the Premises? YES/NO*
(If YES, please give details of the proposed variation below)

7(c) Do you propose to restrict the terms on which children and young persons are admitted to the premises? YES/NO*
(If YES, please give details of the proposed variation below)

7(d) Do you propose to vary the information contained in the licence relating to the premises manager, including a variation to substitute a new premises manager? YES/NO*
(If YES, please go to question 9 below)

7(e) Do you propose any other variation as prescribed by Section 29(6)(d) of the 2005 Act? YES/NO*
(If YES, please give details of the proposed variation below)

OTHER VARIATIONS

Question 8

8(a) Do you propose a variation to the conditions to which the licence is subject (other than those to which the licence is subject by virtue of Section 27(1))? YES/NO*
(If YES, please give details of the proposed variation below)

8(b) Do you propose to vary any of the information contained in the operating plan contained in the licence? YES/NO*
(If YES, please give details of the proposed variation below)

8(c) Do you propose a variation to the layout plan contained in the licence? YES/NO*
(If YES, please give details of the proposed variation below)

8(d) Do you propose to vary any other information contained or referred to in the licence, including an addition, deletion or other modification? YES/NO*
(If YES, please give details of the proposed variation below)

VARIATION TO SUBSTITUTE NEW PREMISES MANAGER

Question 9

Please provide details below of the name, address and personal licence number of the existing Premises Manager.

Proposed Premises Manager

9(a) *Name and telephone number*

9(b) *Date and place of birth*

9(c) *Contact address, including postcode*

9(d) *Email address*

9(e) *Personal licence*

Date of issue	Name of Licensing Board issuing	Reference no. of personal licence

9(f) *Is the variation to take effect during the application period?*

YES/NO*

If the answer to the above question is NO, please provide below the date from which the variation is to take effect.

DECLARATION BY APPLICANT OR AGENT ON BEHALF OF APPLICANT

If signing on behalf of the applicant please state in what capacity.

The contents of this Application are true to the best of my knowledge and belief.

Signature -----

**See note below*

Date -----

Capacity

**APPLICANT/AGENT
(delete as appropriate)**

**Telephone number
and email address of signatory**

<i>I have enclosed the relevant documents with this application – please tick the relevant boxes</i>	
<i>Premises Licence</i>	<input type="checkbox"/>
<i>Operating Plan**</i>	<input type="checkbox"/>
<i>Layout Plan **</i>	<input type="checkbox"/>
<i>Planning certificate</i>	<input type="checkbox"/>
<i>Building standards certificate</i>	<input type="checkbox"/>
<i>Food hygiene certificate</i>	<input type="checkbox"/>

*** 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.

*** Where the proposed variation affects the current layout plan, please submit 6 sets of plans showing the proposed new layout of the premises. Where the proposed variation affects the current operating plan, please submit an operating plan including the proposed variations.*

Variations involving structural alterations should submit the relevant Section 50 certificates with their application.