

SEXUAL ENTERTAINMENT VENUE LICENCE

Application for grant or renewal of a Sexual Entertainment Venue Licence

We only accept electronic application forms and payments. You should upload your fully completed application form together with any required supporting documentation and make payment, by debit or credit card only, using the link below

Civic & Miscellaneous licence submission form

PLEASE REFER TO THE GUIDANCE NOTES AND OUR SEXUAL ENTERTAINMENT VENUE POLICY BEFORE COMPLETING THIS FORM

THE CHECKLIST AT THE END OF THIS FORM MUST BE FULLY COMPLETED AND SIGNED BEFORE SUBMITTING THE APPLICATION

APPLICATION TYPE - please tick one box only✓									
	NEW LICENCE ☐ RENEWAL OF AN EXISTING LICENCE ☐*								
	*Current licence no	- if renewal: *Expiry date:							
AP	APPLICANT DETAILS								
Wh	o will the licence hold	der be	- please tick √ :						
	Company*								
	Limited Company*		incorporated in the UK'. You must provide all information requested in Parts B, C and also Part D below. Please also note that when the licence is to be held in the name of a company or partnership, <u>documentary proof</u> of the existence of the company/partnership <u>must</u> accompany the application form						
	Partnership*								
	Individual		You must provide all the information requested in Part A below. Part D should only be completed if you have appointed someone to manage the activity on a day to day basis for you.						
Pa	Part A								
First name/s									
Surname									
Ма	iden/Previous name								
	Date of Birth	Place of Birth							

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Home addre	ess						
Postco	de						
Contact phone	no						
Contact email addres	ss						
Have you been resapplication - please		the UK th	hrough	out th	ne 6	month period prior to making this	
	Yes		No		licer thro	licensing authority cannot grant a nce to a person who was not resident ughout the 6 month period prior to the this application is made	
Part B							
Company Number							
Company/Partnership	name						
Registered/Company	Address						
C	Contact no						
Contact ema							
PART C - Please pr	ovide det	ails of <u>all</u>	Direct	ors or	Part	ners	
First na	ame(s)						
Su	irname						
Maiden / Previous	Name						
Desiç	gnation						
Date of birth		Place of birth					
Home A	ddress						
Ро	stcode						
Contact Pho	one No						
Contact email ad	ldress*						

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First name(s)	
Surname	
Maiden / Previous Name	
Designation	
Date of birth	Place of birth
Home Address	
Postcode	
Contact Phone No	
Contact email address*	
First name(s)	
Surname	
Maiden / Previous Name	
Designation	
Date of birth	Place of birth
Home Address	
Postcode	
Contact Phone No	
Contact email address*	
Please provide details of ar	ny further directors/partners/trustees on a separate sheet
	ANAGER – please provide details of anyone appointed to manage basis. (this person will also be named on the licence document)
First name(s)	
Surname	
Maiden / Previous Name	
Designation	
Date of birth	Place of birth

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Home Address							
Postcode							
Contact Phone No							
Contact email address*							
PREMISES FOR WHICH THI	E LICI	ENCE	IS REC	QUIRE	E D - please	√	
Please specify the type of Pre	emises	s Bu	ıilding		Vehicle		Private dwelling
		Ve	ssel		Stall		
Are the premises currently licer	nced ι	ınder t	he Lice	nsing	(Scotland) A	ct 200	05 - please tick ✓
	Yes		Premi	ses lic	ence numb	er	
	No						
Name of premises/Trading n	ame						
Address of prem	nises						
Posto	code						
Contact phon	e no						
Contact email add	dress						
Brief description of prem	nises						
Are the whole premises t	to he						
included in the licer		Yes	Ш				
		No	□ *				et detail which parts of be licensed
Description of activities to carried on the premises e.g.							
dancing, pole dancing	-						

TIMES FOR WHICH THE SEXUAL ENTERTAINMENT LICENCE IS REQUIRED										
	С	ay			ening t		Terminal hour (24hr format)			
•	at the licensable permitted at aranted	Monday			•		•			
these times if g		Tuesd	ay							
		Wedn	esday							
		Thurse	day							
		Friday	r							
		Saturo	lay							
		Sunda	ıy							
Has the applicant previously held a Sexual Entertainment Venue Licence in any area of the uk *please provide details of the area of the UK the licence was held, the duration and reasons for no longer being licenced below										
*Perio	od previous licen	ce held	From				Until			
Rea	Reasons no longer licenced									
	int ever been refu nment Venue Lic	No	Yes* *please provide the reasons for refusal and date of refusal below							
Reasons for refusal										
			•							
DETAILS OF	CONVICTIONS									
Subject to the Rehabilitation of Offenders Act 1974 if the applicant, the day-to-day manager, or any director or partner named in this application has been convicted of any crime or offence in any court in the United Kingdom, please provide details below. Please note that it is an offence if you fail to disclose a conviction against you NOTE - If you have no convictions, you must write "NONE"										
Date*	Court*				Offence	e*		Sentence*		
* Continue on	a separate she	et if ne	cessar	<i>y</i>						

DECLARATION

Any person who, or in connection with, the making of this application makes any statement which he knows to be false, or recklessly makes any statement which is false in a material, shall be guilty of an offence and liable, on summary conviction, to a fine not exceeding £2,500

I/We confirm that that in submitting this application I consent to the information supplied by me in making this application ("data") being held and processed by the City of Edinburgh Council ("the Council") for its purposes as licensing authority. I understand that data will be disclosed to the Police and other public bodies involved with licensing processing and enforcement, Immigration/Home Office, or National Fraud Initiatives. I understand that the Council is required to enter the data on to its electronic Register of Applications which may be inspected by members of the public

I/We hereby make application for a licence and confirm that:

- (a) The particulars given by me/us on this form are true to the best of my/our knowledge and belief
- (b) I/We have read and understand the standard conditions of licence and acknowledge that these will be attached to any licence granted to me/us
- (c) I/We further certify that I/We will comply with paragraph 7 of schedule 2 of the Civic Government (Scotland) Act 1982

I confirm the above declaration is true

ENCLOSURES								
I confirm that I have enclosed the following as required - please ✓								
A layout plan of the premises								
Pictures of the exterior design of								
A copy of the 'house rules' for p								
A copy of the code of conduct f								
Advertisement								
I confirm that within seven days of the date of this application a public notice advertising this application will be publicised in the local press, and a copy submitted to the Licensing service within three days of publication								
SIGNATURE OF APPLICANT OR SOLICITOR/AGENT (delete as appropriate)								
		Date						
Print name								
Address of solicitor/Agent (if signed by Solicitor/Agent)								
CORRESPONDENCE DETAILS								
Correspondence name								
Address								
Postcode								
Contact phone no								
email address								

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