



**SALE AND SUPPLY OF ALCOHOL REGULATIONS 2013**  
**Application for on-licence or renewal of on-licence**  
*Sections 100 and 127(2), Sale and Supply of Alcohol Act 2012*

Form 3

To the Secretary  
District Licensing Committee  
Stratford District Council  
PO Box 320  
Stratford 4352

Application for the issue/renewal of an on-licence is made in accordance with the details set out below:

**DETAILS OF APPLICANT**

Full legal name or names to be on licence

Postal address for service of documents

Day time contact name and telephone number

Does the applicant hold a current licence Yes  No

If yes, state kind of licence  Licence number

**STATUS OF APPLICANT**

Natural Person  Private Company  Public Company

Licensing Trust  Partnership  Department of state  
Other instrument of Crown

Territorial Authority  Trustee  Club

Limited partnership  Board, Organisation or  
other body  A manager under the  
protection of personal  
and property rights  
Act 1988

**WHERE THE APPLICANT IS A NATURAL PERSON OR PERSONS**

Full legal name

Any aliases

Residential address

Occupation

Date of birth

Place of birth

Male  Female

Preferred mode of contact

Internet site

Full legal name

Any aliases

Residential address

Occupation

Date of birth

Place of birth

Male  Female

Preferred mode of contact

Internet site

Full legal name

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Place of birth

Male  Female

Preferred mode of contact

Internet site

**WHERE THE APPLICANT IS A BODY CORPORATE**

Authority under which incorporation

**WHERE THE APPLICANT IS NOT A NATURAL PERSON OR PERSONS**

Contact person

Postal address

Telephone number

Fax number

Preferred mode of contact

Internet site

**BUSINESS DETAILS**

Describe principal business, any other businesses:

  

**CRIMINAL CONVICTIONS**

Has the applicant(s) been convicted of any offence? Yes  No

State all criminal convictions

*(other than convictions for offences against provisions of the Land Transport Act 1998 not contained in Part 6, and offences to which the Criminal Records (Clean Slate) Act 2004 applies) received since the certificate as issued or last renewal*

Nature of Offence	Date of Conviction
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

**WHERE THE APPLICANT IS A COMPANY**

*(whether incorporated un the Companies Act 1993 or equivalent foreign legislation*

Full legal names of Directors

  
  
  

**WHERE THE APPLICANT IS A PRIVATE COMPANY (incorporated under the Companies Act 1993)**

Authorised Capital

Paid-up Capital



## DETAILS OF CONVEYANCE

Type of conveyance

Tenure (**state whether to be held as**):

Owned by applicant  Charter  Lease  Under licence

If not owned by the applicant full please state:

Full legal name

Address

  
  

Registration number

Home base address

  

Whether name used or proposed for conveyance:

Is the licence conditional on completion of building work? Yes  No

If **Yes**, please state details:

  

## DETAILS OF MANAGERS

Full Legal name

Managers Certificate number

Expiry Date

Full Legal Name

Managers Certificate Number

Expiry Date

Full Legal Name

Managers Certificate Number

Expiry Date

## BUSINESS DETAILS

General nature of the business to be conducted by applicant in the premises if licence granted:

Hotel  Tavern  Restaurant  Entertainment/nightclub

Will the sale of alcohol intended to be the principal of business Yes  No

If **No**, intended principal purpose of business?

  

Whether applicant engaged, or intending to be engaged, in the sale or supply of any goods other than alcohol and food, or in the provision of any services other than those directly related to the sale or supply of alcohol and food?

Yes  No

If **Yes**, nature of other goods or service?


Days and hours proposed for sale of alcohol?


In the case only of a BYO restaurant, whether applicant wishes to have the licence endorsed under section 37 of the Act **Yes**  **No**

**CONDITIONS**

Experience and training of applicant?


Food intended to be available for purchase? *(describe type and range)*


Steps proposed to be taken to prevent the sale and supply of alcohol to prohibited persons?


Any other steps the applicant proposes to promote the responsible consumption of alcohol?


Non- Alcoholic beverages intended to be available for purchase? *(describe type and range)*


Low- Alcoholic beverages intended to be available for purchase? *(describe type and range)*


To what extent, and where, drinking water is intended to be freely available to patrons?


If no mains water supply, how is potable water intended to be available?


Steps intended to be taken to provide help with and information about transport options from the premises?


Other systems (including training systems), and staff in place (or to be in place) for compliance with the Act?


**ATTACHMENTS (If not conveyance)**

- Copy of planning consent
- Copies of all relevant building certificates consents
- Floor plan showing –
  - Each area to be designated as a supervised area or restricted area
  - The principal entrance
- For body corporate applicant, copy of certificate of incorporation (or equivalent document)

**ATTACHMENTS (Conveyance)**

- Floor plan showing each area to be designated as a supervised area or restricted area
- For body corporate applicant, copy of certificate of incorporation (or equivalent document)

**FURTHER DETAILS WHERE APPLICANT IS A COMPANY**

Full details of each person who holds 20% or more of the shares, or of any particular class of shares, issued by the company:

Name	<input type="text"/>
Residential Address	<input type="text"/> <input type="text"/>
Date of birth	<input type="text"/>
Place of birth	<input type="text"/>
Designations	<input type="text"/>

Name	<input type="text"/>
Residential Address	<input type="text"/> <input type="text"/>
Date of birth	<input type="text"/>
Place of birth	<input type="text"/>
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Name	<input type="text"/>
Residential Address	<input type="text"/> <input type="text"/>
Date of birth	<input type="text"/>
Place of birth	<input type="text"/>
Designations	<input type="text"/>

**FURTHER DETAILS WHERE APPLICANT IS A PARTNERSHIP**

Full details of each person who holds 20% or more of the shares, or of any particular class of shares, issued by the company:

Name <input type="text"/>	Name <input type="text"/>
Residential Address <input type="text"/> <input type="text"/>	Residential Address <input type="text"/> <input type="text"/>
Date of birth <input type="text"/>	Date of birth <input type="text"/>
Place of birth <input type="text"/>	Place of birth <input type="text"/>
Signature <input type="text"/>	Signature <input type="text"/>

  

Name <input type="text"/>	Name <input type="text"/>
Residential Address <input type="text"/> <input type="text"/>	Residential Address <input type="text"/> <input type="text"/>
Date of birth <input type="text"/>	Date of birth <input type="text"/>
Place of birth <input type="text"/>	Place of birth <input type="text"/>
Signature <input type="text"/>	Signature <input type="text"/>

**ADDITIONAL INFORMATION REQUIRED TO ACCOMPANY FORM**

1. This application must be accompanied by the required fee

Dated at Stratford this \_\_\_\_\_ day of \_\_\_\_\_ 20

Applicant \_\_\_\_\_

**Notes:**

Within 20 working days after filing this application with the District Licensing Committee (or 10 working days if it is an application for renewal), the applicant must give public notice of it in form 7. The notice must be given in compliance with regulation 36, 37, or 38 of the Sale and Supply of Alcohol Regulations 2013 (whichever applies to this application).

Except in the case of a conveyance, within 10 working days after filing this application with the District Licensing Committee, the applicant must ensure that notice of this application in form 7 is attached in a conspicuous place on or adjacent to the site to which this application relates (unless the Secretary of the District Licensing Committee agrees that it is impracticable or unreasonable to do so).