Council of the Isles of Scilly

Town Hall St Mary's Isles of Scilly TR21 OLW

Tel: 01720 424000 Fax: 01720 424017

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APPLICATION FOR WAIVER OF REQUIREMENT FOR SEX ESTABLISHMENT LICENCE

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982 (PART II AND SCHEDULE 3, AS AMENDED BY THE POLICING AND CRIME ACT 2009)

1. If application is made on behalf of an individual please state:-

Full Name
Permanent Address
Age, Date of Birth and Place of Birth
Please provide address and telephone number for correspondence in respect of this application if different from above.

Full Name of Body			
Address of Registered or Principle Office			
	l private addresses of all one of the e		
Name	Age, Date of Birth and Place of Birth	Private Address	

If application is made on behalf of a corporate or unincorporated body please state:-

2.

4. Have you any convictions recorded against you? Or if body corporate or unincorporated body that body or any of its directors or other persons responsible for its management? If so please state:-

Name	Offence	Date of Conviction	Sentence

N.B. All convictions must be disclosed. Spent convictions, as defined below, should not be included.

Sentence		Becomes spent
Imprisonment of between 6 months and 2½ years		10 years
Imprisonme	ent of up to 6 months:	7 years
Borstal train	ning	7 years
A fine or oth	ner sentence not otherwise covered in	5 years
this table		
Absolute dis	•	6 months
Probation or	rder, conditional discharge or bind over	1 year (or until order expires, whichever is the longer)
Detention c	entre order	3 years
Remand hor school orde	me, attendance centre or approved r	The period of the order and a further year after the order expires
Hospital order under the Mental Health Act		The period of the order and a further 2 years after it expires
Cashiering, discharge with ignominy or dismissal with disgrace from the armed forces		10 years
Dismissal fr	om armed forces	7 years
Detention		5 years
NOTE:		
(i)	A sentence of more than 2½ years' implecome spent.	prisonment can never
(ii)	If you were under 17 years of age on to please halve the period shown in the ri	

5. Have you been resident in the United Kingdom throughout a period of six months immediately preceding the date of this application?

YES / NO

7.	Full address of premises desired to be used as a sex establishment together with the proposed name for the business.
Lic	ensed Name:
Ful	l address:
8.	If this application relates to a vehicle / vessel / stall give description and state where it is to be used as a sex establishment.
9.	During which hours do you wish to trade?

If the application is made on behalf of a body corporate is that body incorporated in the United Kingdom?

YES / NO

6.

10.	On which days do you wish to trade ?	
11.	Are the premises to be used as a sex shop?	YES / NO
12.	Are the premises to be used as a sex cinema?	YES / NO
13.	Are the premises to be used as a sexual entertainment venue?	YES / NO
14.	Are you (or, if a body corporate or unincorporated body, that body) disqualified from holding a licence for a sex establishment?	
	establishment:	YES / NO
15.	Have you ever been refused a licence for a sex establishme	ent?
	If yes please give details:-	YES / NO
16.	On what grounds to you believe it would be unreasonable of inappropriate to require a sex establishment licence?	or

DECLARATION

Data Protection Act 1998

I am aware that this information is required for the processing of applications and that information provided on the application forms will be shared with the relevant consultees, including the Police, Council Members, Members of the Council's Licensing Committee and other organisations as the law allows (these other organisations include government departments and local authorities, for the purposes of preventing or detecting crime or to protect public funds). Information will be held both manually and electronically and will not be kept for longer than is necessary.

I declare that I have checked the information given on this application form, and any additional application form relating to the previous paragraph, and to the best of my knowledge and belief it is correct. I understand that, if I make a false statement which I know to be false in any material respect of which I do not believe to be true, I shall be guilty of an offence the penalty for which on summary conviction is a fine not exceeding £1000.

Signature	Print Name	Date