



**SOLIHULL METROPOLITAN BOROUGH COUNCIL**  
Licensing, Central Depot, Moat Lane, Solihull, B91 3DZ  
Telephone No. 0121 704 6830

**APPLICATION FOR A PREMISES LICENCE UNDER THE GAMBLING ACT 2005**

**PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST**

When completing this form please refer to the guidance notes in Part 7.

If you are completing this form by hand please write legibly in block capitals using ink. Use additional sheets if necessary. You may wish to keep a copy of the completed form for your records.

Where the application is –

- In respect of a vessel, or
- To convert an authorisation granted under the Betting, Gaming and Lotteries Act 1963 or the Gaming Act 1968.

the application should be made on the relevant form for that type of premises or application.

**Part 1 – Type of premises licence applied for**

Regional Casino <input type="checkbox"/>	Large Casino <input type="checkbox"/>	Small Casino <input type="checkbox"/>
Bingo <input type="checkbox"/>	Adult Gaming <input type="checkbox"/>	Family Entertainment Centre <input type="checkbox"/>
Betting (in respect of premises other than a track) <input type="checkbox"/>	Betting (track) <input type="checkbox"/>	
Do you hold a provisional statement in respect of these premises? Y <input type="checkbox"/> N <input type="checkbox"/>		

**Part 2 – Applicant Details**

If you are an individual, please fill in section A

If the application is being made on behalf of an organisation (such as a company or partnership), please fill in section B

**Section A  
INDIVIDUAL APPLICANT**

1. Title: Mr  Mrs  Miss  Ms  Dr  Other (please specify) \_\_\_\_\_

2. Surname: \_\_\_\_\_ Other name(s): \_\_\_\_\_  
(as on operating licence/application) (as on operating licence/application)

3. Address (home or business – please specify) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_

4. Telephone number (inc. STD code): Evening \_\_\_\_\_ Daytime \_\_\_\_\_

5. Email address (optional): \_\_\_\_\_
6. Operating licence number (or, if unknown, application number): \_\_\_\_\_
7. Date of Birth (dd/mm/yyyy): \_\_\_\_\_

**Section B**  
**Application on behalf of an organisation**

8. Type of organisation:

limited company           partnership           unincorporated association

other (please specify) \_\_\_\_\_

9. Name of applicant business/organisation: \_\_\_\_\_

10. Registered address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

11. Company registration number (if applicable): \_\_\_\_\_

12. Company operating licence number (or, if unknown, application number): \_\_\_\_\_

13. Please state your position in the company: \_\_\_\_\_

14. Please give your date of birth (dd/mm/yyyy): \_\_\_\_\_

***I confirm that I am authorised to make this application on behalf of the organisation***   
(please tick)

**Part 3 – Premises Details**

15. Proposed trading name for premises: \_\_\_\_\_

16. Address (or, if none, ordinance survey map reference and description): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

17. Telephone number at premises (if known): \_\_\_\_\_

18. Brief description of the layout and location of the premises. *(Please refer to note 1 at the end of this form for details of what would be included here. Continue on a separate page if necessary):*

\_\_\_\_\_

\_\_\_\_\_

19(a). Do the premises lie within more than one licensing authority area? \_\_\_\_\_

19(b). If the answer to 19(a) is yes, please give details of all the licensing authorities within whose area the premises are partly located, **other than the licensing authority to which this application is made:**

**Part 4 – Other details about the business  
(provisional statement holders should go straight to part 5)**

20(a). Proposed gambling hours: \_\_\_\_\_  
*(if less than 24 hours, use table below to give start time and finish time. In the case of a bingo licence, please give proposed gaming hours other than on a gaming machine. See note 2)*

Day	Start	Finish	Details of any seasonal variation
Mon			
Tue			
Wed			
Thurs			
Fri			
Sat			
Sun			

20(b). Proposed opening hours (if different). \_\_\_\_\_  
*(if less than 24 hours, please use table below to give opening and closing times)*

Day	Start	Finish	Details of any seasonal variation
Mon			
Tue			
Wed			
Thurs			
Fri			
Sat			
Sun			

21. Proposals for the supervision of gaming machines in Bingo premises or Family Entertainment Centres (*see note 3*):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

22. Proposals for the supervision of bet receipt terminals on tracks (*see note 4*):

\_\_\_\_\_  
\_\_\_\_\_

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23. **In respect of track premises licences only**, the days on which the public will be admitted to the premises for the purpose of attending sporting events:

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**Part 5 – Miscellaneous**

24. Proposed commencement date of licence (unless this is as soon as the licence is granted):

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (dd/mm/yyyy)

25. Contact name (where none of the names given above [see note 5]): \_\_\_\_\_

26(a). Address for correspondence (where none of the addresses given above): \_\_\_\_\_

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\_\_\_\_\_ Postcode: \_\_\_\_\_

26(b). If you are happy for correspondence in relation to your application to be sent via e-mail, please give the e-mail address to which you would like correspondence sent:

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27(a). **Except in relation to tracks**, are you aware of any existing premises licences that have effect in relation to the premises?

Yes  No

27(b). **In relation to tracks**, is this an application in relation to premises that are already subject to a premises licence? (see note 6)

Yes  No

27(c) Are you aware of any existing permits that have effect in relation to the premises?

Yes  No

28. Do you hold any other premises licences that have been issued by this licensing authority?

Yes  No

29. Have you ever had a premises licence application rejected or a premises licence revoked?

Yes  No

30. If the answers to any of questions 27 – 30 above are yes, please provide full details:

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**Part 6 – Declaration, Signatures and Checklist**

**I confirm that, to the best of my knowledge, the information contained in this application is true. I understand that it is an offence, liable on conviction, to imprisonment for a term not exceeding 51 weeks; a fine up to level 5 on the standard scale; or both, to give information which is false or misleading in, or in relation to, this application.**

**I confirm that I have right to occupy the premises**

**I confirm that I am aware of the mandatory conditions that will apply to this premises licence, should it be granted, and that my premises will be operated in accordance with those mandatory conditions, as well as any default or individual conditions that may also apply to this licence.**

*For provisional statement holders only:*

**I confirm that I have constructed/alterd the premises in accordance with my application for a provisional statement**

31. Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_ Capacity: \_\_\_\_\_

32. Checklist:

- I have made/enclosed payment of the correct fee
- I have enclosed a plan of the premises marked up accordingly
- I understand that if I do not comply with the above requirements, my application may be rejected
- I understand that I must now advertise this application and give correct notice to responsible authorities

*If you hold a provisional statement in respect of the premises:*

- I have enclosed the notice of grant of my provisional statement

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 <b>Data Protection</b>	<b>The information you supply will be used by Licensing to assess and administer your application for a premises licence. It may be shared with other Divisions of the Council and external organisations including the Police for this purpose. Your name and address will be included on a Register of Applications available for public inspection and published on Solihull MBC's website. Your information may also be shared with other council services and partner organisations to ensure your records are kept accurate and help us to identify services you may be entitled to or interested in. For further details of how we may use your information contact Licensing on tel: 0121 704 8003</b>
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**Part 7 – Guidance notes**

1. The description of the premises must include the following information:
  - Where the premises are a building, or part of a building (this is likely to exclude tracks): whether the whole building is subject to the premises licence, or only part of it (with a description of the uses to which the rest of the building is put); the nature of the building (e.g. whether it is detached, multi-level, part of a shopping centre or service station etc.)
  - The nature of the area in which the premises are located (e.g. primarily residential, for business or retail use etc.)
  - The name or nature of any immediate neighbours (immediate neighbours mean those on either side of the premises; those opposite any entrance or exit to the premises; and where the premises are part of a multi-level building, those above and below the premises.)
  - The nature of the street on which any entrance or exit to the premises is located. This information should describe whether the street is pedestrianised, is a main road, a cul-de-sac, a side road etc.
  - Access to the premises – in particular give details of any direct access that will be permitted from other types of premises with details of the nature of that other type of premises.
  - Whether the premises have already been constructed and are ready for occupation/operation as a gambling premises. If the answer to this is “no”, please give details of the nature of the work still to be done to the premises before it will be suitable for occupation/operation.
  - The current use of the premises.

2. If using the table, please use the 24-hour clock. Only give times in respect of those days when the premises will be open. Please note that these may not be the hours during which your premises licence will permit you to operate/open, and that you will be bound to the hours set out on your premises licence.
3. If your application is in respect of a Bingo premises to which children or young persons will have access, or Family Entertainment Centre, you must enter details here of how the over 18 area within the premises will be supervised. The details given must include the location of any desk or position from which the area in which gaming machines of Category C (in Bingo premises and FEC's), or Category B (in Bingo premises) are, or may be, sited will be supervised. Note that it is a mandatory condition that these areas are supervised and you are advised to familiarise yourself with the mandatory supervision requirements before filling in this section. If your application is in respect of any other types of premises, you may write 'not applicable' here.
4. If your application is for a betting premises licence in respect of a track, please give details of how bet receipt terminals on the premises will be supervised at any time during which children or young persons have access to the premises. Note that it is a mandatory condition that bet receipt terminals are supervised and you are advised to familiarise yourself with the mandatory supervision requirements before filling in this section. If your application is in respect of any other types of premises, you may write 'not applicable' here.
5. If a name and address is given here, it will be the one used on all correspondence. Otherwise it will be the name and address given in part 2 of the application.
6. If this is an application in relation to a track, and there is already a premises licence which has effect in relation to that track ('the main premises licence'), this premises licence application must be accompanied by an application under section 187 to vary the main premises licence so that the main premises licence will not have effect in relation to the area covered by this premises licence application.
7. The applicant's agent may sign the form if they have actual authority to do so. Electronic signatures may be used.