

**Application for Grant/Renewal/Transfer/Variation  
of Licence for a Sex Establishment.**

If application is made on behalf of an individual please state:		
Full Name:		
Permanent address:		
Age:	D.O.B:	Place of Birth:
If application is made on behalf of a corporate or unincorporated body please state:		
Full name of body:		
Address of Registered or Principal Office:		
Give full names and private addresses of all Directors or other persons responsible for management of the establishment:		
Name:		
Address:		
Age:	D.O.B:	Place of Birth:
Name:		
Address:		
Age:	D.O.B:	Place of Birth:
Have you any convictions recorded against you? Or, if a body corporate or unincorporated body, that body or any of its Directors, or other persons responsible for its Management?		
Yes / No		
If Yes please state: (for Renewals, since you last applied for a licence). <b>All Convictions must be Disclosed.</b>		
Date of Conviction	Offence	Sentence (including Suspended Sentence)
Spent Convictions, as defined below, should not be included.		
<b>Sentence:</b>		<b>Becomes Spent after:</b>
Imprisonment of up to 6 months and 2 ½ years		10 years

Imprisonment of up to 6 months	7 years
Borstal Training:	7 years
A fine or other sentence not otherwise covered in this table	5 years
Absolute Discharge	6 months
Probation order, conditional discharge or bound over	1 year (or until order expires, whichever is the longer)
Detention Centre Order	3 years
Remand Home, Attendance Centre or Approved School Order	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 the Order expires
Cashiering discharge with ignominy or dismissal with disgrace from Armed Forces	10 years
Dismissal from Armed Forces	7 years
Detention	5 years
NOTE: i) A sentence of more than 2 ½ years' imprisonment can never become spent. ii) If you were under 17 years of age on the date of conviction, please halve the period shown in the right-hand column.	
Have you been resident in the United Kingdom throughout a period of 6 months immediately preceding the date of this application?	<b>Yes / No</b>
If the application is made on behalf of a body corporate is that body corporate in the United Kingdom?	<b>Yes / No</b>
Full Name and Address of premises desired to be used as a Sex Establishment:  If this application relates to a vehicle/vessel/stall give description and state whether it is to be used as a sex establishment.	
During which hours do you wish to trade?	
On which days do you wish to trade?	
Are the premises to be used as a Sex Shop?	<b>Yes / No</b>
Are the premises to be used for a Sex Cinema?	<b>Yes / No</b>
Are the premises to be used as Sex Encounter Establishment?	<b>Yes / No</b>
Are you (or, if a corporate or unincorporated body, that body) disqualified from holding a licence for a Sex Establishment?	<b>Yes / No</b>
Have you ever been refused a licence for a Sex Establishment?	<b>Yes / No</b>
If Yes, please give details	
I declare that I have checked the information given on this application form and to the best of my knowledge and belief it is correct.	
Date :	Signature:

