Bedford Borough Council
To:    Chief Officer for Democratic & Registration Services
Bedford Borough Council
3rd Floor Borough Hall
Cauldwell Street
BEDFORD MK42 9AP

Application for a premises licence under the Gambling Act 2005 (standard form)

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

If you are completing this form by hand, please write legibly in block capitals using ink. Use additional sheets if necessary (marked with the number of the relevant question). You may wish to keep a copy of the complete 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 Gambling Act 1968,

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

<table>
<thead>
<tr>
<th>Part 1 – Type of premises licence applied for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional Casino □</td>
</tr>
<tr>
<td>Bingo □</td>
</tr>
<tr>
<td>Betting (Track) □</td>
</tr>
</tbody>
</table>

Do you hold a provisional statement in respect of the premises? Yes □ No □

If the answer is ‘yes’, please give the unique reference number for the provisional statement (as set out at the top of the first page of the statement):

<table>
<thead>
<tr>
<th>Part 2 – Applicant Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
</tr>
</tbody>
</table>

**Section A**

**Individual applicant**

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

2. Surname: Other names(s):

[Use the names given in the applicant’s operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence]
3. Applicant’s address (home or business – [delete as appropriate]):

Postcode:

4(a) The number of the applicant’s operating licence (as set out in the operating licence):

4(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:

5. Tick the box if the application is being made by more than one person. ☐

[Where there are further applicants, the information required in questions 1 to 4 should be included on additional sheets attached to this form, and those sheets should be clearly marked “Details of further applicants.”]

Section B
Application on behalf of an organisation

6. Name of applicant business or organisation:

[Use the names given in the applicant’s operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence.]

7. The applicant’s registered or principal address:

Postcode:

8(a) The number of the applicant’s operating licence (as given in the operating licence):

8(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:

9. Tick the box if the application is being made by more than one organisation. ☐

[Where there are further applicants, the information required in questions 6 to 8 should be included on additional sheets attached to this form, and those sheets should be clearly marked “Details of further applicants.”]

Part 3 – Premises Details

10. Proposed trading name to be used at the premises (if known):
11. Address of the premises (or, if none, give a description of the premises and their location):

Postcode:

12. Telephone number at premises (if known):

13. If the premises are in only a part of a building, please describe the nature of the building (for example, a shopping centre or office block). The description should include the number of floors within the building and the floor(s) on which the premises are located.

14(a) Are the premises situated in more than one licensing authority area?
Yes/No [delete as appropriate]

14(b) If the answer to question 14(a) is yes, please give the names 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 – Times of operation

15(a) Do you want the licensing authority to exclude a default condition so that the premises may be used for longer periods than would otherwise be the case? Yes/No [delete as appropriate].
[Where the relevant kind of premises licence is not subject to any default conditions, the answer to this question will be no.]

15(b) If the answer to question 15(a) is yes, please complete the table below to indicate the times when you want the premises to be available for use under the premises licence.

<table>
<thead>
<tr>
<th>Start</th>
<th>Finish</th>
<th>Details of any seasonal variation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mon</td>
<td>hh:mm</td>
<td>hh:mm</td>
</tr>
<tr>
<td>Tue</td>
<td></td>
<td></td>
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<tr>
<td>Sat</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sun</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
16. If you wish to apply for a premises licence with a conditions restricting gambling to specific periods in a year, please state the periods below using calendar dates:

Part 5 – Miscellaneous

17. Proposed commencement date of licence (leave blank if you want the licence to commence as soon as it is issued): (dd/mm/yyyy)

18(a) Does the application relate to premises which are part of a track or other sporting venue which already has a premises licence? Yes/No [delete as appropriate]

18(b) If the answer to question 18(a) is yes, please confirm by ticking the box than an application to vary the main track premises licence has been submitted with application. □

19(a) Do you hold any other premises licences that have been issued by this licensing authority? Yes/No [delete as appropriate]

19(b) If the answer to question 19(a) is yes, please provide full details:

20. Please set out any other matters which you consider to be relevant to you application:

Part 6 – Declarations and Checklist (Please tick)

I/We confirm that, to the best of my/our knowledge, the information contained in this application is true. I/We understand that it is an offence under section 342 of the Gambling Act 2005 to give information which is false or misleading in, or in relation to, this application □

I/We confirm that the applicant(s) have the right to occupy the premises. □

Checklist:

- Payment of the appropriate fee has been made/is enclosed □
- A plan of the premises is enclosed □
- I/we understand that if the above requirements are not complied with the application may be rejected □
- I/we understand that it is now necessary to advertise the application and give the appropriate notice to the responsible authorities □

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### Part 7 – Signatures

21. Signature of applicant or applicant’s solicitor or other duly authorised agent. If signing on behalf of the applicant, please state in what capacity:

<table>
<thead>
<tr>
<th>Signature</th>
</tr>
</thead>
</table>

Print Name: ____________________________  
Date: ____________________________ (dd/mm/yyyy)  
Capacity: ____________________________

22. For joint applications, signature of 2\textsuperscript{nd} applicant, or 2\textsuperscript{nd} applicant’s solicitor or other authorised agent. If signing on behalf of the applicant, please state in what capacity:

<table>
<thead>
<tr>
<th>Signature</th>
</tr>
</thead>
</table>

Print Name: ____________________________  
Date: ____________________________ (dd/mm/yyyy)  
Capacity: ____________________________

[Where there are more than two applicants, please use an additional sheet clearly marked “Signature(s) of further applicant(s)”. The sheet should include all the information requested in paragraphs 21 and 22.]

[Where the application is to be submitted in an electronic form, the signature should be generated electronically and should be a copy of the person’s written signature.]

### Part 8 – Contact Details

23(a) Please give the name of a person who can be contacted about the application:

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
</table>

23(b) Please give one or more telephone numbers at which the person identified in question 23(a) can be contacted:

<table>
<thead>
<tr>
<th>Telephone Numbers</th>
</tr>
</thead>
</table>

24. Postal address for correspondence associated with this application:

<table>
<thead>
<tr>
<th>Address</th>
</tr>
</thead>
</table>

Postcode: ____________________________

25. 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 to be sent:

<table>
<thead>
<tr>
<th>E-mail Address</th>
</tr>
</thead>
</table>
Data Protection Privacy Advice

Through the relevant application/notice forms, accompanying documentation and payment facilities associated with this licensing function the Council (the data controller) collects personal data. Personal data may also be collected in respect of further related requests for information from the applicant/person submitting the notice. This is necessary for the performance of legal obligations on it in respect of the relevant licensing function or otherwise necessary for the performance of a task carried out in the public interest or in the exercise of official authority. These also form the basis for the further processing of the personal data by the Council in connection with the application/notice, any determination of the same and any subsequent authorisation/appeal and issues that arise during the period of the authorisation/appeal. Beyond that, the Council will retain the records for 5 years and then destroy them securely. The Council will maintain and retain public registers and these are not destroyed. The Council may from time to time extract information itself from those public registers. The Council will share with and receive information from the following:

- Statutory Consultees as defined by legislation
- Public & Site Notice
- Ward Councillors
- Parish Councils

in respect of data subjects who are applicants/notice givers and those who hold authorisations. It holds the personal data in a way designed to secure it from unauthorised use, loss or destruction. These measures include recruitment and training of staff, procurement of services and physical/cyber security. The Council’s privacy statement for this function is available at www.bedford.gov.uk or upon request from the Council using the address and telephone contact details elsewhere on this form. The Council will update its privacy statement from time to time and you are urged to read that statement. You have information rights that are explained at https://tinyurl.com/y7uccndm. You can exercise your information rights by contacting the Council’s Data Protection Officer at dpo@bedford.gov.uk or writing to Information Governance, Bedford Borough Council, Borough Hall, Cauldwell Street, Bedford MK42 9AP (Telephone (01234) 267422). If you believe that the Council has failed to comply with its data protection obligations you may contact the ICO at 0303 123 1113 or at www.ico.org.uk. Further contact details are available upon request.