

THE CITY AND DISTRICT OF ST ALBANS

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982

LICENSING OF SEX ESTABLISHMENT

To: Licensing Officer
District Council Offices
Civic Centre St Peter's Street
St Albans, Herts, AL1 3JE

Direct Tele: 01727 819453

(FULL NAMES BLOCK CAPITALS)

1) I: _____

of: _____

_____ Tel.No.(H) _____

Age: __ Date of Birth: _____ Place of Birth: _____

intend to apply to the Council for the grant of an Annual Licence to use the premises
at: _____

and known as: _____

Tel.No: _____

for the purposes of a sex shop/sex cinema as defined in Schedule 3 of the above Act
and subject to the Regulations and Standard Conditions made from time to time by
this Council. If application is made on behalf of a corporate or incorporated body
please state:

Full name of body: _____

Address of registered or principal office: _____

If this application relates to a vehicle/vessel/stall give description and state where it is
to be used as a sex establishment

- 2) Give full names and private addresses of all directors or other persons responsible for management of the establishment:

Name: _____

Age: _____ Date of Birth: _____ Place of Birth: _____

Address: _____

Name: _____

Age: _____ Date of Birth: _____ Place of Birth: _____

Address: _____

Name: _____

Age: _____ Date of Birth: _____ Place of Birth: _____

Address: _____

Name: _____

Age: _____ Date of Birth: _____ Place of Birth: _____

Address: _____

- 3) Have you any convictions recorded against you for any offence? Or if a body corporate or incorporated body that body or any of its directors or other persons responsible for its management? If so please state:-

Date of Conviction: _____

Offence: _____

Sentence (inc suspended): _____

Do not include any conviction in respect of which you have been rehabilitated under the Rehabilitation of Offenders Act 1974. Please see the attached Explanatory Notes of Guidance.

- 4) Have you been resident in the United Kingdom throughout a period of six months immediately preceding the date of this application? YES/NO
- 5) If the application is made on behalf of a body corporate is that body incorporated in the United Kingdom? YES/NO

6) During which hours do you wish to trade?

7) On which days do you wish to trade?

8) Are you (or, if a corporate or incorporated body, that body) disqualified from holding a licence for a sex establishment? YES/NO
Have you ever been refused a licence for a sex establishment? YES/NO

If yes please give details: _____

9) I declare that I have checked the information given on this application form and to the best of my knowledge and belief it is true and correct.

Date: _____ Signature: _____