

Application for a personal licence

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written or typed in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

1. Your personal details	
TITLE Please tick	
Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)	
Surname	Hulme
Forenames	Ryan Clive
PREVIOUS NAMES (if relevant) please enter details of any previous names or maiden names. Please continue on a separate sheet if necessary.	
TITLE Please tick	
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (please state)	
Surname	
Forenames	
Date of Birth	
Nationality	
I am 18 years old or over. Please tick	
Yes <input type="checkbox"/> No <input type="checkbox"/>	
ADDRESS WHERE ORDINARILY RESIDENT (We will use this address to correspond with you unless you complete the separate correspondence box below).	
<div style="background-color: black; width: 100px; height: 50px;"></div>	
Post town	Post code
<div style="background-color: black; width: 100px; height: 15px;"></div>	<div style="background-color: black; width: 100px; height: 15px;"></div>
TELEPHONE NUMBERS	
Daytime	<div style="background-color: black; width: 100px; height: 15px;"></div>
Evening	<div style="background-color: black; width: 100px; height: 15px;"></div>
Mobile	<div style="background-color: black; width: 100px; height: 15px;"></div>
FAX NUMBER	N/A
E-MAIL ADDRESS (if you would prefer us to correspond with you by e-mail)	
<div style="background-color: black; width: 100px; height: 15px;"></div>	

Address for correspondence associated with this application (if different to the address above)

Post town

Post code

TELEPHONE NUMBERS

Daytime

Evening

Mobile

E-MAIL ADDRESS (if you would prefer us to correspond with you by e-mail)

2. Your licensing qualifications

Read Note 1

Please tick yes

Please indicate below which one of these statements applies to you:

1. I hold an accredited licensing qualification

2. I hold a certified qualification

3. I hold an equivalent qualification

4. I am a person of prescribed description

If you have ticked either of statements 1, 2 or 3 please provide details of your qualification in the box below (name of qualification, date of issue, issuing body) and please enclose your qualification with your application.

If you have ticked statement 4, please provide evidence that you are a person of prescribed description.

Bilal Level 2 Award For Personal Licence Holders.
Issued by CPL Training, On 26th October 2017.

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3. Previous or outstanding applications for a personal licence

Note: You may only hold one personal licence at a time.

Please tick

Do you currently hold a personal licence?

Yes

No


Do you currently have any outstanding applications for a personal licence, with this or any other licensing authority?

Yes

No

Has any personal licence held by you been forfeited in the last 5 years?		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Licensing Authority			
Licence number			
Date of issue			
Any further details			

4. CHECKLIST:	
I have	Please tick yes
<ul style="list-style-type: none"> enclosed two photographs of myself, one of which is endorsed as a true likeness of me by a solicitor or notary, a person of standing in the community or any individual with a professional qualification enclosed any licensing qualification I hold or proof that I am a person of prescribed description enclosed a criminal conviction certificate or a criminal record certificate or the results of a subject access search of the police national computer by the National Identification Service enclosed a completed disclosure of criminal convictions and declaration form (Schedule 2) included a proof of my right to work in the United Kingdom (see note 2) made or enclosed payment of the fee for the application 	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

5. Declaration	
<p>I am entitled to work in the UK and am not subject to a condition preventing me from doing work relating to the carrying on of a licensable activity. I understand that my licence will become invalid if I cease to be entitled to live and work in the UK.</p> <p>The information contained in this form is correct to the best of my knowledge and belief.</p> <p>It is an offence knowingly or recklessly to make a false statement in or in connection with an application for the grant of a personal licence. (A person is to be treated as making a false statement if he produces, furnishes, signs or otherwise makes use of a document that contains a false statement). To do so could result in prosecution and a fine of any amount. It is an offence under section 24B of the Immigration Act 1971 to work illegally.</p>	
SIGNATURE	DATE
	07/11/17

NOTES

Information on the Licensing Act 2003 is available on legislation.gov.uk or from your local licensing authority.