

London Local Authorities Act 1991

Application for the Transfer of a Special Treatment Licence

The completed application form should be returned to the Licensing Team at London Borough of Merton. If you have any queries please telephone 0208 545 3025, or e-mail licensing@merton.gov.uk

IMPORTANT: PLEASE SEE ATTACHED NOTES AND GUIDANCE

I/we apply for the transfer of the special treatment licence for the premises named in Section 1

1	Premises Address	
	Trading Name Full Address Telephone No	
	Main contact details at the premises <i>(if any)</i>	
	Name	
	Contact Number	
	Email address (Optional)	

2	Please state the capacity in which you are applying	
	Individual or Individuals	please complete (Section 3)
	A Company	please complete (Section 4)

3	To be completed ONLY if you are applying as an individual(s)	
	Title	Mr Mrs Miss Ms Other (please state)
	Surname	
	Forenames	
	Full Home address	
	Contact Details	
	Daytime	
	Mobile	
	Email address	

3	Cont. Additional individual applicant	
	Title	Mr Mrs Miss Ms Other (please state)
	Surname	
	Forenames	
	Full Home address	
	Contact Details	
	Daytime	
	Mobile	
	Email address	
4	To be completed ONLY if you are applying as a Company	
	Company Name Full address	
	Company Number	
	Description of company <i>i.e limited or partnership</i>	
	Telephone Number	
	E-mail	
5	What is, or will be, the applicant's interest in the premises (i.e. lessee, tenant etc) A copy of the agreement to occupy (i.e. lease/tenant agreement, must be submitted with the application form) (See rule 4)	
6	Has the applicant(s) or if the applicant is a limited company has any director, or any person concerned in the conduct or management of the premises ever been convicted of an offence? (see note D)	<p>YES NO</p> <p>If Yes, please provide details of the offence, the date of conviction, and the sentence on a separate sheet.</p>

CHECKLIST

- A. I have enclosed the required fee for the Transfer of the licence.
- B. I have enclosed the required fee for the Transfer of the licence.
- C. I have enclosed the application form which is fully completed, signed and dated.
- D. I have enclosed the completed limited company form (if required).
- E. I have enclosed the recorded delivery slips notifying the Metropolitan Police and London Fire and Emergency Planning Authority of the application.
- F. I have enclosed a copy of the lease/tenant agreement.
- G. I have sent a copy of the application to the current licensee.

SIGNATURES

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

Signature.....Print Name.....

Capacity.....Date

Address to be used for correspondence

.....
City/TownPost Code.....

The completed form should be returned to: Environmental Health, Trading Standards & Licensing Section, London Borough of Merton, Merton Civic Centre, London Road, Morden, Surrey, SM4 5DX.

Personal Information Policy

The Council will use your details, the information about your dealings with the Council and the information about you available to the Council ("your information") to:

- ◆ deal with your requests and administer its departmental functions in the processing of your application;
- ◆ meet its statutory obligations;
- ◆ prevent and detect fraud;
- ◆ conduct surveys and research.

The Council may share your information (but only the minimum amount of information necessary to do the above and only where it is lawful to do so) with other Departments within the Council (including the elected members), central government Departments, law enforcement agencies, statutory and judicial bodies, community services providers and contractors that process data on its behalf.