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Licensing (Scotland) Act 2005, Section 68 Application for Extended Hours

To:

Clerk to the Licensing Board Clackmannanshire Council Kilncraigs Alloa FK10 1EB

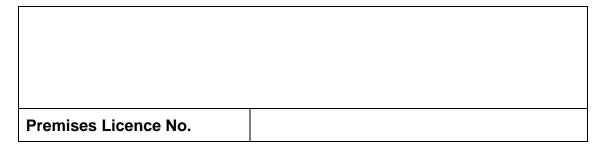
If you are Completing this Form by Hand, Please Write Legibly in Block Capitals using **BLACK INK**. Please Ensure the Completed Application is Signed by the Applicant, Dated and Returned to the Above Address along with the Fee.

APPLICANT INFORMATION

(An Application for Extended Hours can only be made by the Premises Licence Holder for a Special Event or Occasion to be Catered for on the Premises or for a Special Event of Local or National Significance)

Question 1

Name, Address, Postcode and Licence Number of Premises.



Question 2

Full Name, Address, Postcode, Telephone Number and Email Address of the **Current Licensee**.



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Personal Licence No. (if held)

DETAILS OF SPECIAL EVENT OR OCCASION TO BE CATERED FOR ON THE PREMISES or OF SPECIAL EVENT OF LOCAL OR NATIONAL SIGNIFICANCE

Question 3

Brief Details of Special Event (Continue on Separate Sheet if Necessary)

<u>Hours</u>

Question 4

Please detail the current licensed hours of the premises. (Detail hours for all days in which you are applying to extend)

Commencement Hour	Terminal Hour



Question 5

Please detail the proposed extended hours.

Commencement Hour	Terminal Hour

Question 6

Please detail the proposed period during which the extended hours will apply

(Period must not exceed one month)

First Day/Date	Last Day/Date (if different from first day)

DECLARATION BY APPLICANT OR AGENT ON BEHALF OF APPLICANT

If Signing on Behalf of the Applicant Please State in What Capacity.

The Contents of This Application Are True to the Best of my Knowledge and Belief.

Signature	* (See Note Below)
Date	
Capacity	APPLICANT/AGENT (Delete as appropriate)
Telephone Number and Email Address of Signatory	

If you require any further information please contact the Licensing Administrator on telephone number 01259 452093 or email address <u>licensing@clacks.gov.uk</u>



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* Data Protection Act 1998

The Information on this Form May be Held

on an Electronic Public Register Which May be Available to Members of the Public on Request

Clackmannanshire Licensing Board has a duty to protect public funds that it administers and may use this information for the prevention and detection of fraud. For more details, please contact The Councils, Senior Auditor, on telephone number 01259 452047

Checklist	
Fee enclosed	
Application signed/dated	