



ABERDEEN
CITY COUNCIL

**CIVIC GOVERNMENT (SCOTLAND) ACT 1982
APPLICATION FOR GRANT / RENEWAL OF LICENCE
FOR SALE OF NON-DOMESTIC KNIVES & SWORDS**

COMPLETE QUESTION 1 OR 2
QUESTIONS 3 TO 9 MUST ALL BE ANSWERED

Q1. To be completed if applicant is an individual			
a. Full name	<u>Surname</u>	<u>Forename(s)</u>	
b. Home address	Postcode:		
c. Telephone No.	<u>Home</u>	<u>Mobile</u>	
d. E-mail address			
e. Age, date & place of birth	Age	Date of Birth	Place of Birth
f. Are you self-employed?	Yes <input type="checkbox"/> No <input type="checkbox"/> If no give name & address of employer Name: Address: Postcode:		
g. Are you to carry out day-to-day management of the business?	Yes <input type="checkbox"/> No <input type="checkbox"/> If not give full name, home address and date of birth of the manager. Name: Address: Date of Birth:		
Q2. To be completed if applicant is a Company or Partnership			
a. Full name of Company/Partnership	Company <input type="checkbox"/> or Partnership <input type="checkbox"/> Name:		
b. Address of Principal or Registered Office	Postcode:		
c. Telephone No.			
d. E-mail address			
e. Full names, home addresses and dates of birth of all directors or partners (continue on separate			

sheet if necessary)			
Name	Address	Date of Birth	Place of Birth
f. Full name, home address and date of birth of employee or agent who is to carry out day-to-day management			
Name	Address	Date of Birth	Place of Birth
Q3. Has any party named in 1 or 2 above been convicted of any crime or offence (including any spent convictions as defined in the Rehabilitation of Offenders Act 1974)?	Enter Yes or No Only Yes <input type="checkbox"/> No <input type="checkbox"/>		
Q4. Have you had an application for a similar licence in the last year	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes please give date:		
Q5. Licence Details			
a. Type of licence applied for	GRANT <input type="checkbox"/>	RENEWAL <input type="checkbox"/>	TEMPORARY <input type="checkbox"/>
b. If renewal, state expiry date of current licence	Expiry Date:		
Q6. Premises Details			
a. Name and address of premise(s) to be used	Name: Address: Postcode:		
b. Telephone no. of premises			
Q7. Types of Goods	Non Domestic Knives <input type="checkbox"/> Swords <input type="checkbox"/> (tick each that applies)		
Q8. State days and hours of trading	Days	Times	
Q9. (A) I/we declare that I/we shall, for a period of 21 days commencing with the date of submission of this application, display at or near the premises mentioned at Q6, so that it can conveniently be read by the public, a notice complying with the requirements of Paragraph 2(3) of Schedule 1 of the Civic Government (Scotland) Act 1982. A form that may be used for this purpose is attached.			
OR			

(B) I/we declare that I am / we are unable to display a notice of this application at or near the premises because I/we have no rights of access or other rights enabling me/us to do so.

(C) I declare that the particulars given by me on this form are correct to the best of my knowledge and belief.

Delete (A) or (B) as appropriate. Where declaration (a) is made, there must be produced in due course, a Certificate of Compliance with paragraph 2(2) of Schedule 1 to the Civic Government (Scotland) Act 1982.

Date: _____

Signature of applicant or agent: _____

Agent's address: _____

Position of applicant in company/partnership if not otherwise stated

Date received:	Amount Paid:	Receipt Number:
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NB. Any person who in connection with the making of this application makes any statement that he/she knows to be false or recklessly makes any statement that is false in a material particular may be guilty of an offence.

When completed, this form should be returned to the Office of City Solicitor, Aberdeen City Council, Ground Floor, Town House, Aberdeen, AB10 1AQ along with the appropriate fee. Cheques should be made payable to "Aberdeen City Council".

For assistance in completing the form, please telephone Licensing on (01224) 522377.

DATA PROTECTION ACT 1998

Aberdeen City Council (the Data Controller) will process the information on this form for the purpose of granting or refusing this application. The information will be disclosed to Grampian Police and Grampian Fire & Rescue Service it may also be circulated to other Council departments for their statutory interest and to any other relevant body. It may also be intimated to the H M Revenue and Customs. The information will also be held on a public register that will be available to members of the public on request.