Fee paid	
Invoice number	

THE LIQUOR LICENSING ORDINANCE 2006, AS AMENDED
APPLICATION FORM FOR ALTERATIONS TO PREMISES

Liquor Licence No: | | **Court Date:** |

Name of Applicant: |

Registered/Address of Applicant: |

Name of Premises: |

Address of Premises: |

Name of Designated Official: |

Name of Person appearing on behalf of the Applicant (if a company): |

Position held within the organisation: |

Category of Licence held: |

Area covered by Licence: |

Area covered by Under 18s Permit (if held): |

Proposed alterations to premises: |

Licence/and or Under 18s Permit to be extended to cover additional area? | YES/NO

Reports attached to the application:	FAVOURABLE REPORT?
(1) Committee for Home Affairs	YES/NO
(2) Constables of the Parish	YES/NO
(3) Health & Social Services	YES/NO
(4) Committee for the Environment	YES/NO
(5) Plans No(s)	YES/NO

Additional conditions proposed in reports:

Signed by Applicant: | **Date:**

Fee paid	
Invoice number	

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