Fee paid	
Invoice number	

THE LIQUOR LICENSING ORDINANCE 2006, AS AMENDED APPLICATION FORM TO EXTEND LIQUOR LICENCE

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 the Applicant (if a company):	behalf of		
Position held within the organ	isation:		
Category of Licence held:			
Area covered by Licence:			
Area covered by Under 18's Permit (if held):			
Proposed extension of licence to premises:			
Reports attached to the applic	ation:	FA	VOURABLE REPORT?
 (1) Committee for Home Affairs (2) Constables of the Parish (3) Health & Social Services (4) Committee for the Environment (5) Plans No(s) 		YE YE YE YE	es/No es/No es/No es/No es/No
Additional conditions propose	d in reports:		
Signed by Applicant:		l Do	A

Fee paid	
Invoice number	

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