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SCHEDULE 4

Regulation 6(2)(c)

Substitute form of interim authority notice under the Licensing Act 2003

**Interim authority notice under the Licensing Act 2003
PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST**

Before completing this form please read the guidance notes at the end of the form.
If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.
You may wish to keep a copy of the completed form for your records.

I/We _____
(Insert name of applicant)
give this interim authority notice under section 47 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number (if known)

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description			
Post town		Post code	
Telephone number (if any)			
E-mail address (optional)			

Part 2 – Notice giver details

In what capacity are you giving the interim authority notice?
See section 47 of licensing Act 2003

Please tick yes

- a) I am an individual with a legal interest in the premises as freeholder or leaseholder please complete section (A)
- b) I am a person other than an individual with a legal interest in the premises as freeholder or leaseholder
 - i. a limited company/limited liability partnership please complete section (B)
 - ii. a partnership (other than limited liability) please complete section (B)
 - iii. an unincorporated association or please complete section (B)
 - iv. Other (for example a statutory corporation) please complete section (B)
- c) I am a personal representative for the former premises licence holder who has died please complete section (B)

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- d) I have power of attorney which is registered for the former premises licence holder who has become mentally incapable please complete section (B)
- e) I am the insolvency practitioner for the former premises licence holder who is insolvent please complete section (B)
- f) I am applying as the former premises licence holder is no longer entitled to work in the UK. please complete section (B)

Date of lapsing of licence

On what date (as applicable)	Day Month Year
<ul style="list-style-type: none"> • did the former premises licence holder die? 	<input type="text"/>
<ul style="list-style-type: none"> • was the power of attorney registered under section 6 of the Enduring Powers of Attorney Act 1985 or the lasting power of attorney registered under the Mental Capacity Act 2005? 	<input type="text"/>
<ul style="list-style-type: none"> • did the former holder become insolvent? 	<input type="text"/>
<ul style="list-style-type: none"> • did the former holder's immigration status expire 	<input type="text"/>

(A) DETAILS OF INDIVIDUAL NOTICE GIVERS (fill in as applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
Date of birth			Nationality		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current residential address if different from premises address					
Post Town			Postcode		
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by the service (please see note 2 for information)					

DETAILS OF SECOND INDIVIDUAL NOTICE GIVER (IF APPLICABLE)

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Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
Date of Birth			Nationality		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current residential address if different from premises address					
Post Town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by the service (please see note 2 for information)					

(B) NON-INDIVIDUAL NOTICE GIVER

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned

Name
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)

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E-mail address (optional)

PART 3

Has an interim authority notice previously been given relating to this premises and the former premises licence holder?	Yes (please tick) <input type="checkbox"/>						
If not when do you want the variation to take effect from	<table style="border-collapse: collapse;"> <tr> <td style="padding: 0 5px;">Day</td> <td style="padding: 0 5px;">Month</td> <td style="padding: 0 5px;">Year</td> </tr> <tr> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> </table>	Day	Month	Year			
Day	Month	Year					
Has there been an application to transfer the premises licence under section 50 of the Licensing Act 2003?	Yes (please tick) <input type="checkbox"/>						

	Yes (please tick)
• I have made or enclosed payment of the fee	<input type="checkbox"/>
• I have sent a copy of this form to the chief officer of police for the area in which the premises is situated	<input type="checkbox"/>
• I have sent a copy of this form to Home Office Immigration Enforcement	<input type="checkbox"/>
• I have notified the designated premises supervisor (if different from the premises licence holder), if any	<input type="checkbox"/>
• I confirm that I am entitled to work in the United Kingdom (see guidance note 2)	<input type="checkbox"/>
• I understand that if I do not comply with the above requirements my application will be rejected	<input type="checkbox"/>

THIS NOTICE WILL LAPSE AT THE END OF THE 28 DAY PERIOD, AFTER THE LAPSING OF THE PREMISES LICENCE, UNLESS A COPY OF THE NOTICE HAS BEEN GIVEN TO THE CHIEF OFFICER OF POLICE FOR THE POLICE AREA OR EACH POLICE AREA IN WHICH THE PREMISES IS SITUATED; AND A COPY HAS BEEN SENT TO HOME OFFICE IMMIGRATION ENFORCEMENT. (IF THE LICENSABLE ACTIVITY IS THE RETAIL OF ALCOHOL OR THE PROVISION OF LATE-NIGHT REFRESHMENT, THE NOTICE GIVER MUST FORWARD THE IAN ONTO THE POLICE AND SOS. IF THE LICENSABLE ACTIVITY RELATES TO THE SUPPLY OF ALCOHOL BY A CLUB TO A MEMBER OR THE PROVISION OF REGULATED ENTERTAINMENT, THE IAN MUST BE FORWARDED ONTO THE POLICE ONLY).

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO

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CONDITIONS AS TO EMPLOYMENT, WILL BE LIABLE FOR A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND, PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

Part 4 – Signatures (please read guidance note1)

Signature of notice giver or notice giver's solicitor or other duly authorised agent (please read guidance note 3). If signing on behalf of the notice giver please state in what capacity.

Signature	
Date	
Capacity	

For joint notices signature of 2nd notice giver or 2nd notice giver's solicitor or other authorised agent (please read guidance note 4). If signing on behalf of the applicant please state in what capacity.

Signature	
Date	
Capacity	

Contact name (where not previously given) and address for correspondence associated with this notice (please read guidance note 5)

Post town		Post code	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail your e-mail address (optional)			

Notes for Guidance

1. The notice must be signed.
2. Right to work/immigration status

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A licence may not be issued to an individual or an individual in a partnership which is not a limited liability partnership who is resident in the UK who:

- does not have the right to live and work in the UK; or
- is subject to a condition preventing him or her from doing work relating to the carrying on of a licensable activity.

Any licence issued in respect of an application made on or after 6 April 2017 will become invalid if the holder ceases to be entitled to work in the UK.

Applicants must demonstrate that they have the right to work in the UK and are not subject to a condition preventing them from doing work relating to the carrying on of a licensable activity.

They do this in one of two ways:

- 1) by providing, with this application, copies or scanned copies of the documents which an applicant has provided to demonstrate their entitlement to work in the UK (which do not need to be certified) as per information published on gov.uk and in guidance.
- 2) by providing their 'share code' to enable the licensing authority to carry out a check using the Home Office online right to work checking service (see below).

Home Office online right to work checking service.

As an alternative to providing a copy of original documents, applicants may demonstrate their right to work by allowing the licensing authority to carry out a check with the Home Office online right to work checking service.

To demonstrate their right to work via the Home Office online right to work checking service, applicants should include in this application their share code, provided to them upon accessing the service at <https://www.gov.uk/prove-right-to-work>. Which, along with the applicant's date of birth, will allow the licensing authority to carry out the check.

In order to establish the applicant's right to work, the check will need to indicate that the applicant is allowed to work in the United Kingdom and is not subject to a condition preventing them from doing work relating to the carrying on of a licensable activity.

An online check will not be possible in all circumstances because not all applicants will have an immigration status that can be shared digitally. The Home Office online right to work checking service sets out what information and/or documentation applicants will need in order to access the service. Applicants who are unable to obtain a share code from the service should submit copies of documents as set out above.

Your right to work will be checked as part of your licensing application and this could involve us checking your immigration status with the Home Office. We may otherwise share information with the Home Office. Your licence application will not be determined until you have complied with this guidance.

3. A notice giver's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
4. Where there is more than one notice giver, both notice givers or their respective agents must sign the application form.

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5. This is the address which we shall use to correspond with you about this application.