

The Licensing Team Environmental Health & Housing North Devon Council PO BOX 379, Barnstaple, Devon, EX32 2GR

Contact Details: Tel: 01271 388870

Email:licensing@northdevon.gov.uk/Web:www.northdevon.gov.uk/Licensing@northdevon.gov.uk/Licensing@northdevon.gov.uk/Licensing@northdevon.gov.uk/Licensing@northdevon.gov.uk/Licensing@northdevon.gov.uk/Licensing@n

NOTIFICATION FOR PERSONAL ALCOHOL LICENCE HOLDER CHANGE OF NAME AND/OR ADDRESS

Form Ref: LA03/PA20

Privacy Notice - privacy & data protection

North Devon Council, the Data Controller, collects personal information when you contact us for the licensing services we provide. We will use this information to provide these services, such as the granting of a licence, permit, registration or receipt of a notice.

We may need to share your information with other departments in North Devon Council or external/ third parties, where this is necessary to perform our public functions & services as provided by law.

For more information as a Data Subject regarding privacy & data protection, including how we manage your personal information, data retention and your rights, please see our Privacy Notice on the website: www.northdevon.gov.uk/privacy

If you require this document in an alternative format, please contact us.

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

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 or typed in black ink. Use additional sheets if necessary. You should keep a copy of the completed form for your records.

NOTIFICATION FOR PERSONAL ALCOHOL LICENCE HOLDER CHANGE OF NAME AND/OR ADDRESS

The Licensing Act 2003 (Personal Licences) Regulations 2005, Regulation 8

Part 1 Your Old Personal De	etails (as shown on your Personal Licence)
Title: Mr Mrs Miss M	/Is ☐ Dr ☐ Other (please specify)
Surname	
Forenames	
Address (as shown on your Per	rsonal Licence)
· ·	,
Post Town	Postcode
Your Personal Licence Number	,
New Details	
	not changed your name please cross through this section)
	/Is ☐ Dr ☐ Other <i>(please specify)</i>
Surname	
Forenames	
, ·	re not changed your address please cross through this
section)	
Post Town	Postcode
TELEPHONE NUMBERS	Daytime
	Evening
	Mobile
	Fax Number
E-mail address:	
	ondence associated with this application (if different to
the address above)	
Post Town	Postcode
TELEPHONE NUMBERS	Daytime
	Evening
	Mobile
	Fax Number
E-mail address (if you would pr	efer us to correspond with you by e-mail)
· ·	•

Part 4 Checklist
Please tick $\sqrt{}$
I have enclosed my NDDC Personal Alcohol Licence
I have enclosed my NDDC Personal Alcohol Licence Badge
• I have enclosed payment of the appropriate fee (£10.50) (make cheques payable to North Devon Council)
Part 5 Declaration
The information contained in this form is correct to the best of my knowledge and belief.
It is an offence knowingly or recklessly to make a false statement in or in connection with an

Part 5 Declaration
The information contained in this form is correct to the best of my knowledge and belief.
It is an offence knowingly or recklessly to make a false statement in or in connection with an application for the grant or renewal or change of address of a Personal Alcohol Licence . (A person is to be treated as making a false statement if they produce, furnish, sign or otherwise make use of a document that contains a false statement). To do so could result in prosecution and a fine not exceeding level 5 on the standard scale [£5000].
Signature:
Date: