Licensing authority logo here

**Gambling Act 2005 – Application for the grant, renewal or variation of an Unlicensed Family Entertainment Centre (uFEC) gaming machine permit**

**Guidance notes**

Please read the following guidance notes and any other information enclosed before completing this application form.

1. This form is to be used for an application for a grant, renewal or to request a change of name of an unlicensed family entertainment centre (uFEC) gaming machine permit issued under Section 247 and Schedule 10 of the Gambling Act 2005.
2. If you are completing the form by hand, please write clearly in BLOCK CAPITALS using BLACK INK.
3. Where there is insufficient space for your answers, please provide additional sheets as necessary.
4. Applications that are incomplete or deemed to be inadequate will be rejected. Applicants have a right of appeal as set out in Schedule 10 of the Gambling Act 2005.
5. The application with all relevant additional information must be returned to: The Licensing Team, (*Insert address).*
6. An application for a permit can only be made by a person who occupies or proposes to occupy as premises. The applicant must clearly show that the premises will be wholly or mainly used for making gaming machines available for use (i.e. the premises will be wholly or mainly an amusement arcade offering Category D machines).
7. Applicants for a permit will be expected to abide by any Codes of Practice issued by the Gambling Commission ([www.gamblingcommission.gov.uk](http://www.gamblingcommission.gov.uk)) as well as this authority’s Statement of Licensing Policy *(insert web link).*
8. An uFEC is entitled to provide an unlimited number of category D gaming machines available for use on the premises. Category C (which are restricted to those over 18) CANNOT be made available and, therefore, there will be no designated adult areas required at the premises.
9. Please note that there are different maximum stakes and prizes for certain types of category D machines such as crane grabs, coin pushers and penny fall machines. Further information can be found on the [Gambling Commission website](http://www.gamblingcommission.gov.uk/Gambling-sectors/Gaming-machines/About-gaming-machines/Gaming-machine-categories/Gaming-machine-categories.aspx).
10. *(****Delete if not included in your Statement of Licensing Policy)*** As uFEC premises particularly appeal to children and young persons, this Licensing Authority will give significant weight to child protection issues. An application for an uFEC permit will be granted only if in addition to us being fully satisfied that the premises will be used as an uFEC, it is operated in accordance with the Licensing Authority’s Statement of Licensing Policy
11. ***(Delete if not included in your Statement of Licensing Policy)*** In support of the uFEC application, applicants must supply a scaled plan of the premises indicating the location and approximate number of the Category D gaming machines, any ATM machines on the premises and any entrances/exits. Please note that under the mandatory conditions attached to licensed adult gaming centre (AGC) premises, there can be no direct access to/from an uFEC to an Adult Gaming Centre.
12. ***(Delete if not included in your Statement of Licensing Policy*)** You are required to notify this licensing authority of any convictions under Schedule 7 of the Gambling Act 2005. When considering applications we will consider the nature and relevance of the offence.
13. The duration of an uFEC permit is 10 years. A renewal application must be made 2-6 months before the expiry date of the permit.
14. These uFEC permits may not be transferred. Changes in name are permitted only where the permit holder changes his/her name or wishes to be known by another name.
15. The fee for a new application for grant or renewal is £300.00.
16. The fee for a change of name is £25.00.
17. This licensing authority must notify the applicant of its grant or refusal of the application as soon as reasonably practicable after the decision has been made.
18. Applications for an uFEC permit cannot be made if a premises licence (issued under the Gambling Act 2005) is in effect for the same premises.

**Application for the grant, renewal or change of name of an Unlicensed Family Entertainment Centre (uFEC) gaming machine permit.**

Please refer to the preceding guidance notes when completing this form.

**Section A – What do you want to do?**

1. Please indicate what you would like to do (please tick the appropriate box)
2. Apply for a new unlicensed family entertainment centre permit

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

1. Apply for renewal of an existing unlicensed family entertainment centre permit.

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

1. Request that the Licensing Authority changes the name on the existing permit due to the existing permit holder’s change of name or wish to be

known by another name.

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

**Section B – Existing permits or premises licences**

1. Please provide details of any premises licences or permits which exist in

relation to the premises to which this application relates (please tick the

appropriate box).

1. New application – no existing permissions known
2. Renewal of existing permit

Date of expiry of existing permit *(dd/m/yy)*

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Number of existing permit

1. Change of name

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Name in which permit is currently held

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

New name in which permit is to be issued

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Number of existing permit

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Please provide the reason why this change of name is being requested

**Section C – General information**

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

1. Name of the premises
2. Address of the premises
3. Trading name(s)

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

1. Telephone number of the premises
2. Opening hours of the premises

**Section D - Applicant information**

1. If you are applying for a permit as an individual:

Full name

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Postal address

Daytime telephone contact number

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

E-mail address

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Tick if you are over 18

1. If you are applying as a limited company:

Name

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Registered number (for companies)

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Trading name (if different to applicant)

Registered Address

Daytime telephone contact number

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

E-mail address

Contact person for this application

1. If you are applying as a partnership:

Partner 1 - Full name

Full address

Daytime telephone contact number

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

E-mail address

Partner 2 – Full name

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Full address

Daytime telephone contact number

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

E-mail address

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

1. If you are applying as an agent of the applicant please provide your name, address, telephone and e-mail contact details:

**Section E – Relevant offences**

1. Have you (or any director or partner in the business) ever been convicted of a relevant offence (under Schedule 7 of the Gambling Act 2005)? Please tick appropriate box.

No

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Yes

If yes please provide details of each conviction including the date, the convicting court, offence of which you were convicted and the sentence imposed:

**Section F: Other information**

1. Please provide any other information that you would like the licensing authority to take into account when considering your application. Please refer to the licensing authority’s statement of licensing policy and enclose copies of any relevant policies/plans with your application. Leave blank if you have no further information.

**Section G- Fee and signatures**

The relevant application fee of £300

Please make cheques payable to X Council

I confirm that I occupy or propose to occupy the premises to which this application

relates

I confirm that these premises will be used as an uFEC

I confirm that the applicant is 18 years or over

Signature of applicant/applicants if partnership of multiple directors or agent:

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Print name:

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Capacity:

Dated:

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Please note that it is an offence under Section 342 of the Gambling Act 2005 if a person, without reasonable excuse, gives to the Licensing Authority for a purpose connected with that Act information which is false or misleading.

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Your information will be processed in accordance with the Data Protection Act 1998, the Freedom of Information Act 2000 and the Freedom of Information (Scotland) Act 2002 (Scotland only). The information that you provide will be used for Council purposes unless there is a legal authority to do otherwise.

This authority has a duty to protect the public funds it administers. To this end it may use the information that you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

The Council would like to keep you informed of future developments that may be of interest. Please tick the box if you would like to be contacted:

By e-mail

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

By post

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Who to contact in connection with this application:

The Licensing Team,

Address Line 1

Address Line 2

Address Line 3

Address Line 4

E-mail: *Insert e-mail address.*

Telephone:

**For Office Use only:**

Date application received:

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Payment received:

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Application granted (date):

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Application granted by (name):

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Position:

Application approved by

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

(if applicable):

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Position: