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Date received	
Receipt No.	

REQUEST FOR CONSENT TO MATERIAL CHANGE IN CIRCUMSTANCES OR ALTERATION OF CIVIC GOVERNMENT (SCOTLAND) ACT, 1982 LICENCE EFFECTIVE FROM APRIL 2024

PLEASE COMPLETE II	N BLOCK CAPITALS
Question 1 – Licence holder details	
Licence holder name	
Address of Premises	
	Postcode
Contact telephone number	
Email address	
Question 2 – Licence Details	
Type of Licence held	
Licence Number	
Question 3 – Variation Details	
	ish to add/remove/change to your licence t to licence, please state how many ride/s and the name of the ride/s

Do you wish to remove someone from your licence?	Yes No			
If "yes", please provide full details of the person to be removed.	Surname			
	Forename/s			
Do you wish to add someone to your licence?	Yes 🗆 No			
If "yes", please provide full details of the person to be added.	Surname			
	Forename/s			
Private Home Address including postcode				
	Postcode			
Telephone Number	Home			
	Mobile			
	E-mail			
Date and place of birth	Years	Date of Birth	Place of Birth	
Does he/she have any convictions	Yes No [

	se list all current rictions (Please	Date	Court	Offence	Sentence
use s	separate sheet if ssary)				
11000	oodi y j				
	the new person (if cable) lived in the				
	or at least 10	Yes \square	No 🗆		
Íf no,	please provide a from your home				
coun	try confirming that lo not have any				
	ctions.				
6. 0	HECKLIST				
(a)	Have you enclosed/made payment of the £74.00				
(a)	Have you enclosed	d/made payr	ment of the £74.00		
(a)	Have you enclosed fee	d/made payr	ment of the £74.00	Yes 🗆	N/A □
(b)		d a copy of y			N/A □ N/A □
	fee Have you provided	d a copy of y urance	our up-to-date	Yes 🗆	
(b)	Have you provided Public Liability Insu	d a copy of y urance d a copy of y y Insurance' he licence, p	our up-to-date our up-to-date ? olease provide an's Guild Insuran	Yes Yes Yes Yes	N/A 🗆
(b)	Have you provided Public Liability Insu Have you provided Employer's Liability If added ride/s to t copies of ADIP's a	d a copy of y urance d a copy of y y Insurance he licence, p and Showma te if Inflatab o I have add	our up-to-date our up-to-date ? olease provide an's Guild Insurandes. led to my licence years I have	Yes Yes Yes Yes	N/A

HOW WE USE YOUR PERSONAL INFORMATION

any convictions

The information provided by you will be used by Perth & Kinross Council to process your application and thereafter to keep you informed of any updates with regard to your application or licence.

Your information will be shared with Police Scotland, Scottish Fire and Rescue Service, Planning Service and Environment Services in order to determine if you are a fit and proper person to hold a licence. A requirement for this licence is to display a site notice for 21 days which the public can view and this will contain personal information which will include your name and address.

The Council may also check information provided by you, or information about you provided by a third party, with other information held by us. We may also get information from certain third parties or share your information with them in order to verify its accuracy, prevent or detect crime, protect public funds or

where required by law. Further information on how your information is used can be found here https://www.pkc.gov.uk/detailedprivacynotices

You should be aware that the names of individuals who hold this licence appear on a register which is available for public inspection

I declare that the particulars given by me on this form are true. I consent to the sharing of my personal information for the purposes set out above.
Signature of applicant/agent
Date
Signature of applicant(s) to be removed from licence or added to licence
Date

It is an offence to make any statement in this application which you know to be false or to recklessly make any statement which is false in a material particular. Offences are punishable by a fine up to £1,000.

June 2019