

## APPLICATION FOR A VARIATION OF A SPECIAL TREATMENT PREMISES LICENCE

PART II OF THE LONDON LOCAL AUTHORITIES ACT 1991

**PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST**

- i) Before completing this form please read the guidance notes at the end of the form; and
- ii) If you are completing this form by hand please write **CLEARLY**, in block capitals and using **BLACK** ink.
- iii) The application and all documents must be sent to: Licensing Partnership, P.O Box 182, Sevenoaks, Kent, TN13 1GP. Telephone: 01732 227004 or Email: [licensing@sevenoaks.gov.uk](mailto:licensing@sevenoaks.gov.uk)

<b>1. Full Name of Licence Holder</b>		
<b>2. Name &amp; Address of Licensed Premises</b>		
Trading Name:		
Address:		
Post Code:		
Licence Number:		
<b>3. Variation Sought</b>		
Variation sought	Tick all relevant options	
a) Add a new treatment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b) Change the approved layout plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c) Change the operating hours	Yes <input type="checkbox"/>	No <input type="checkbox"/>
d) Change/exclude a licence condition	Yes <input type="checkbox"/>	No <input type="checkbox"/>
e) Other	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>4. Detail of Variation</b>		
a) <b>Add a new treatment</b> - please list below the treatment(s) to be added, the category of the treatment and the full name of all the practitioner (s) who will be providing the treatment:		
The Council's 'A-Z of Special Treatments' sets out the category of various licensable special treatments (see Note 1)		
Treatment	Category	Name of Practitioner(s)

Please continue on a separate sheet if required

Please tick to confirm that you are satisfied that all the practitioner(s) named above have the appropriate qualifications and/or experience to provide the additional treatment(s) sought in this application

Are all the practitioner(s) named above detailed on Annex A of the Licence already?

Tick as appropriate Yes  No

If no, please tick to confirm that the appropriate application to add them to the Licence as an 'additional practitioner' has been made and provide the date of this application.  (see Note 2)

Date of application :

b) **Change the approved layout plan** - please detail below the changes you wish to make to the approved layout of the premises below:

Please continue on a separate sheet if required

Please tick to confirm that this application is accompanied by a replacement plan that reflects the changes set out above.  (see Note 2 for the Council's requirements regarding the plan of the premises)

c) **Change the operating hours** – please list the new operating hours below:

**Open**

**Close**

Monday	.....	.....
Tuesday	.....	.....
Wednesday	.....	.....
Thursday	.....	.....
Friday	.....	.....
Saturday	.....	.....
Sunday	.....	.....

Has the premises got planning consent to be used to provide 'Special Treatments' to the hours set out above? Tick as appropriate) Yes  No

If no, please give reason (e.g. not needed, in process of applying etc.)

d) **Change/exclude a licence condition** - please detail below the conditions you wish to change or exclude from the Licence:

Please continue on a separate sheet if required

e) **Other** - please detail below any other variation to the Licence:

Please continue on a separate sheet if required

**5. The documentation set out below must accompany this application**

Tick to confirm provided

- A replacement plan (only required if the application is to change the approved layout of the premises)
- The correct fee  
Cheques should be payable to Sevenoaks District Council. Alternatively you can call the Licensing Team on 01732 227004 and pay by either credit or debit card over the telephone.
- The Licence document, which includes Annex A and B, issued by the Council in respect of the premises detailed in section 2 of this application.  
Annex A is the 'Schedule of Practitioners' and Annex B is the current layout plan of the premises.

If you are not returning the Licence document please give the reason why below

**6. Contact in respect of the application**

Please tell us who you want us to communicate with about this application.  
The amended Licence document will be sent to the person detailed below.

Name:

Address:

Postcode:

Contact Telephone Number:

Email:

If not the applicant, the relationship to the applicant (e.g. Solicitor, Agent):

**7. This declaration must be signed by the Licence holder** (See note 3)

I declare that the information contained in this application is true and accurate to the best of my knowledge and belief.

I understand that the Licensing Partnership may consult other agencies about my suitability to hold a licence to hold a Special Treatment Premises Licence; which will include other Local Authorities, the Metropolitan Police and the London Fire Brigade.

I understand that the information I have provided may be shared and that such information may extend to personal data. I also understand that my details may be included on the Council's register of 'licensed special treatment premises'. I hereby consent to this processing of my data and display of relevant information on the public register.

Local Authorities must protect funds it handles and so the information you have provided on this form may be used to detect and prevent fraud. The information may also be shared for the same purposes, with other organisations which handle public funds including data to be used as part of the National Fraud Initiative. Your personal data will also be shared with the local authorities, which make up the Licensing Partnership, for the purpose of processing your licensing application. Your personal data will not be used for any other purpose without your prior consent, except as permitted under the Data Protection Act 2018. For further information, please see <https://www.gov.uk/government/collections/national-fraud-initiative>

Signature:

Date:

Print Name:

## Notes

1. The Council's guidance, 'A-Z of Special Treatments', lists the various treatments known to this Council and caught by the Act; together with the treatment category, that is A, B or C. A copy of this guidance can be viewed on the Council's web site. This guidance is not exhaustive and as the beauty industry moves so fast, you may wish to apply for new treatments that are not listed. If this is the case, please email the Licensing Partnership at [licensing@sevenoaks.gov.uk](mailto:licensing@sevenoaks.gov.uk) or [ts.duty@bexley.gov.uk](mailto:ts.duty@bexley.gov.uk) **before** applying. Do not guess as this could lead to your application being invalid, objected to or having to be withdrawn.
  
2. If the application is to change the approved layout of the premises, then a plan showing the new layout **must** accompany the application. Failure to provide this plan will result in the application being rejected. The plan must have the name and address of the premises on it, it must be drawn to a scale of 1:100, unless the Council has previously confirmed in writing that an alternative scale is acceptable, have a Key/Legend and must show the following:
  - a) the extent of the boundary of the building, if relevant, and any external and internal walls of the building and, if different, the perimeter of the premises;
  - b) the location of points of access to and egress from the premises;
  - c) if different from (b) above, the location of escape routes from the premises;
  - d) the area within the premises to which the public have access, including all areas for the provision of special treatments;
  - e) fixed structures including sinks, hand wash basins, windows, ventilation systems and doors;
  - f) in a case where the premises include any steps, stairs, elevators or lifts, the location of the steps, stairs, elevators or lifts;
  - g) the location of the room or room(s) containing WC's, baths or showers; and
  - h) the location and type of any fire safety equipment.
  
3. The application **must** be signed by the Licence holder, this is the individual named on the Licence; or in respect of a Licence held by a Partnership, any one of the Partners as named on the Licence; or in respect of a Licence held by a Company, the Company Secretary or any Director of the Company named on the Licence.