Objection to a Sex Establishment Licence



Section 1 - Application Details

I wish to add the following representation to the Sex Establishment Licence application for:

Premises name and address:

Section 2 -Representor details

Individual Representor's Details:

Name:

Address:

These details will not be released to the applicant.

Please state nature of representation. This may not be on the solely on the grounds of morality or religion.

Signed:

Dated:

Please return this form when completed to:

Warwick District Council Licensing, Riverside House, Milverton Hill, Royal Leamington Spa. CV32 5HZ

 Tel:
 01926 456113

 Fax:
 01926 456121

 Email:
 licensing@warwickdc.gov.uk