

# APPLICATION FORM FOR REGISTRATION OF NON-COMMERCIAL SOCIETY

If you are completing this form by hand, please write legibly in block capitals using ink.

To:

The Licensing Department  
South Hams District Council  
Follaton House  
Plymouth Road  
TOTNES  
TQ9 5NE



## Section A – Details of the society applying for registration

1. Name of Society:
2. Address of Society :  
  
Post Code:
3. Telephone number
4. Please state the purpose(s) for which the society is established and conducted
5. Society's unique charity registration number (if registered as a charity)
6. Has the society held an operating licence under the Gambling Act 2005 in the period of five years ending with the date of this application? Yes  No
7. If the answer to question 6 is 'Yes', has the operating licence been revoked in the period of five years ending with the date of this application? Yes  No
8. If the answer to question 7 is 'Yes', please state the reasons for revocation and enclose a copy of the notice of revocation if one is available.
9. Has the society applied for and been refused an operating licence in the period of five years ending with the date of this application. Yes  No

**Section B – General information about the person applying on behalf of the society (i.e. the promoter)**

10. Name.....  
11. Capacity.....  
12. Address .....  
.....  
.....Post code.....  
13. Daytime telephone number .....

**Section C – Contact details for correspondence associated with this application**

14. Please tick one box to indicate correspondence address in relation to this application (we will also send the annual invoice this address):  
Address in section A       Address in section B       Address below   
Address .....  
.....  
.....Post code.....  
Daytime telephone number .....  
E-mail address  
.....

**Section D – Declaration**

15. Please complete the following declaration and checklist  
I (*full name*) .....

a.  make this application on behalf of the society referred to in Section A and have authority to act on behalf of that society.  
b.  payment of the registration fee of £40  
    • payments can be made by card at 01803 861234 or online at [https://pay.southhams.gov.uk/live/webpayments/ml\\_webpayselect.asp](https://pay.southhams.gov.uk/live/webpayments/ml_webpayselect.asp)  
c.  **confirm that, to the best of my knowledge, the information contained in this application is true. I understand that it is an offence under section 342 of the Gambling Act 2005 to give information which is false or misleading in relation to this application.**

Signature .....  
Capacity .....  
Date .....

**Note to societies applying for registration:**

The application will be refused if in the period of five years ending with the date of the application:

- d. an operating licence held by the society has been revoked under section 119(1) of the Gambling Act 2005, or
  - e. an application for an operating licence made by the society has been refused.
- The application may be refused if the local authority thinks that:
- f. the society is not a non-commercial society
  - g. a person who will be or may be connected with the promotion of the lottery has been convicted of a relevant offence, or
  - h. information provided in or with the application is false or misleading.

