

# Application for a Cinema Licence

## Orkney Islands Council

### Cinemas Act 1985

Application for a licence for the use of Premises for exhibitions whether given by means involving the use of inflammable films or non-inflammable films or by means not involving the use of films.

<b>1.</b> Name and address of cinema including post code.	
<b>2.</b> State details of applicant's full name, designation and address, including post code.	
<b>3.</b> A licence can only be issued to an individual (not a business name) and preferably to the manager.  Provide the individual's full name, designation and address, including post code, if different from 2 above.	
<b>4.</b> State whether the applicant is the owner, lessee, director, secretary or manager of the premises. If manager, state for whom.	
<b>5.</b> Telephone numbers (landlines for home and business; and mobile) for applicant.	
<b>6.</b> Email address for applicant.	
<b>7.</b> State names and addresses of the occupier or tenant of the premises if different from the applicant.	
<b>8.</b> State the period for which the licence is requested (maximum is one year).	

<p><b>9.</b> State whether any entertainments other than cinematograph exhibitions are to be given in the premises and provide details. Continue on separate sheet(s) if necessary.</p>	
<p><b>10.</b> Is it intended to use cinematograph apparatus? If not, describe the apparatus to be used. Continue on separate sheet(s) if necessary.</p>	
<p><b>11.</b> State whether the premises are Permanent or Moveable.</p>	

**Declaration**

**A.** I/We declare that the particulars given by me/us on this form are correct to the best of my/our knowledge and belief.

**B.** I/We understand that the Authority is required to collect the information supplied by me/us as detailed in this form in terms of legislation to enable it to make decisions on applications.

**C.** I/We understand that the information supplied by me/us as detailed in this form may be held and used by the Authority for the purpose of Licensing and that information may be disclosed to Police Scotland and other relevant parties for vetting and background enquiries whilst processing and determining the application.

**D.** I/We understand that the Authority is under a duty to protect the public funds it administers and to this end may use the information I/we 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.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Agent: (if applicable). \_\_\_\_\_ Date: \_\_\_\_\_

Where the application is made on behalf of a Company it should be signed on behalf of the Company and then by the Applicant.

**To be lodged with Legal Services, Orkney Islands Council, Council Offices, Kirkwall, Orkney KW15 1NY, together with the appropriate fee.**

Form Version: 2018-06-20.

For Official Use.	
Date Received.	
Fee Paid £.	
Expiring.	