

Appendix G

Declaration

Completion of the declaration is completely voluntary

Name Name of premises and premises reference number <i>(If there is one)</i>	
Address	
Contact Mobile telephone numbers Landline number e-mail address	
Date	
Position of person who completed Declaration	<ul style="list-style-type: none"> • Premises Licence Holder / Proposed Premises Licence Holder / Designated Premises Supervisor (DPS) • Personal Licence Holder <i>(Delete as appropriate)</i>
Statement of Licensing Policy	I hereby declare I have read the Statement of Licensing Policy including the Code of Practice <i>(Delete as appropriate)</i>
Full Risk Assessment	I hereby declare I have / have not completed the Full Risk Assessment template <i>(Delete as appropriate)</i>

