

NAME OF ROOM	CAPACITY		TYPE OF FUNCTION	No. OF FUNCTIONS PER ANNUM
	SEATING	DANCING		
A				
B				
C				
D				
E				
F				

3. FILM AND/OR VIDEO SHOWS:Number per annum Seating capacity of room: **4. RECORDED MUSIC FOR DANCING (DINE & DANCE / DISCOTHEQUE)**

Name of room	Number of days per week dancing takes place	Customer capacity of room	Estimated annual income
A			
B			
C			
D			
E			
F			

5. LIVE MUSIC PERFORMANCES (VOCALISTS, INSTRUMENTALS & OTHER ARTISTS, including KARAOKE)

Name of room	No. of performances	No. of days per annum		Capacity		Annual expenditure on provision of music
		Without dance	with dance	Seating	Standing	
A						
B						
C						
D						
E						
F						

6. CABARET PERFORMANCES (RECORDED MUSIC TO FLOOR AND / STRIP SHOWS)

Name of room	Number of days per week dancing takes place	Customer capacity of room	Annual expenditure on provision of music
A			
B			
C			
D			
E			
F			

7. DIFFUSION AND / OR CABLE SERVICES**A. 2nd channel (video):** No. of sets linked to service: **B. Music on hold:** No. of incoming Telcom telephone lines **8. JUKE BOXES:** Number:

Location:

Owner:

IF BACKGROUND MUSIC OR VIDEO SERVICE USED - NAME AND ADDRESS OF SUPPLIER:

REMARKS - Please provide any additional details you wish to bring to our attention:

I / We hereby declare that all particulars and answers in this application are complete and correct and no material fact has been withheld.

I / We agree that it shall form the basis of the licence issued.

Name of applicant _____

Date _____

Signature of applicant _____

Capacity (Director, Owner,
Propriator, Manager, etc.) _____