



3. **FILM/VIDEO SHOWS:** Number per annum    Seating capacity of room:

4. **RECORDED MUSIC FOR DANCING (DINE & DANCE / DISCOTHEQUE)**

NAME OF ROOM	NUMBER DAYS PER WEEK DANCING TAKES PLACE	CUSTOMER CAPACITY OF ROOM	ESTIMATED ANNUAL INCOME
A			
B			
C			
D			
E			
F			

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

NAME OF ROOM	NUMBER OF PERFORMERS	NO. OF DAYS PER ANNUM		CAPACITY		ANNUAL EXPENDITURE ON PROVISION OF MUSIC
		W/OUT DANCE	WITH DANCE	SEATING	CUSTOMER	
A						
B						
C						
D						
E						
F						

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

NAME OF ROOM	CUSTOMER CAPACITY	NUMBER OF DAYS PER WEEK CABARET IS PROVIDED	ANNUAL EXPENDITURE ON PROVISION OF CABARET
A			
B			
C			
D			
E			
F			

7. **DIFFUSION AND/OR CABLE SERVICES**

A. **2nd channel (video):** Number of sets linked to service:

B. **Music on hold:** Number 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 completed 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 \_\_\_\_\_

**AUTHORISED SIGNATORY**

Name \_\_\_\_\_ Capacity (Director, Owner, Proprietor, Member, etc.) \_\_\_\_\_