

## Guidance Notes

### Who should complete this form?

- Any individual responsible for any of the key management functions below (regardless of their actual job title) must apply for a Personal Management Licence (unless the operator qualifies for Small Scale Operator exemption):
  - overall strategy and delivery of gambling operations;
  - financial planning, control and budgeting;
  - marketing and commercial development;
  - regulatory compliance;
  - gambling related IT provision and security;
  - where there is a regional structure, regional or area managers to whom responsibility for gambling operations is delegated;
  - the director or trustee responsible for a society lottery; or
  - casino and bingo site managers.
- Any individual performing any of the operational functions below allowing them to influence the outcome of gambling or any function relating to the receiving or paying of money in connection with gambling must apply for a Personal Functional Licence:
  - casino dealer/croupier;
  - casino cashier;
  - casino inspector;
  - casino pit boss/gaming supervisor;
  - casino security/surveillance related to gambling activities (excluding reception and door security).
- This guidance has been written to help you complete the Personal Licence Application Form. Please read this document carefully **before** you attempt to answer any questions.
- **If there are any changes to your circumstances or any of the information contained within this form changes during the period between submitting your application and your application being determined (for example if you are charged with or convicted of an offence) you must notify the Commission immediately.**
- If the application fee is not provided, the form is completed incorrectly or supporting documentation is missing or not provided upon request, **your application will be delayed and this may result in your application being determined based on the information we have available which may affect the decision on whether a licence is granted.** If you misrepresent, or fail to reveal, information that you are asked to provide, you may have committed an offence under Section 342 of the Gambling Act 2005.

### What the Commission expects from applicants for licences

The Commission expects applicants for licences to:

- be able to demonstrate that they can meet the Commission's suitability assessment;
- ensure that the activities they plan to carry out will be conducted in a manner which minimises the risks to the licensing objectives;
- work with the Commission in an open and cooperative way;
- disclose to the Commission anything which the Commission would reasonably expect to know.

## How is your application assessed?

The Commission will take a number of factors into consideration whilst processing your application. Your application will be assessed against five basic areas:

- **Identity and ownership** – The identity of the applicant and or person(s) relevant to the application.
- **Finances** – Financial and other circumstances of the applicant past and present and or person(s) relevant to the application.
- **Integrity** – The honesty and trustworthiness of the applicant or person(s) relevant to the application.
- **Competence** – The experience, expertise, qualifications and history of the applicant or person(s) relevant to the application.
- **Criminality** – Criminal record of the applicant and or person(s) relevant to the application.

These will be assessed using both the information provided as part of the application and also information available from other sources (e.g. government departments, overseas regulators). Further information on how your application is assessed can be found in the Licensing, Compliance and Enforcement Policy Statement which is available on our website [www.gamblingcommission.gov.uk](http://www.gamblingcommission.gov.uk).

## For every application, the Commission has the power to:

- grant a licence;
- limit the scope of activities that can be carried out in accordance with a licence;
- refuse a licence where there are reasons to do so.

## What the Commission expects from licensees

The Commission expects licensees to conduct their gambling operations in a way that does not put the licensing objectives at risk. The Licence Conditions and Codes of Practice are designed to ensure this.

The Commission also expects those holding licences, including, as appropriate, personal licences, to:

- conduct their business with integrity;
- act with due care, skill and diligence;
- take care to organise and control their affairs responsibly and effectively, and have adequate systems and controls to minimise the risks to the licensing objectives;
- maintain adequate financial resources;
- have due regard to the interests of customers and treat them fairly;
- have due regard to the information needs of customers and communicate with them in a way that is clear, not misleading, and allows them to make a properly informed judgement about whether to gamble;
- manage conflicts of interest fairly;
- work with the Commission in an open and cooperative way;
- disclose to the Commission anything which the Commission would reasonably expect to know.

## Completing the form

- The form will be scanned, therefore please complete all sections in **BLACK** ink only.
- Please write clearly within the boxes.
- Use **CAPITAL LETTERS** except when signing or providing an email address.
- Leave a space in between words.
- Mark with a cross (X) where a check box answer is required.

Street	Postcode	Date of Birth
S T A N L E Y   R O A D	L S 2   7 L Y	1 4 0 2 1 9 7 0
Email address		
r i c h a r d . g r e g o r y		
@ b t i n t e r n e t . c o m		
Cross (X) box		
Yes	<input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>

- If you make a mistake, please fill in the box in solid black and write the correction clearly to the right.
- If there is no space to the right, write the correction as close as possible.

Surname
G R E <input checked="" type="checkbox"/> G O R Y

- Do not use correction fluid.
- Do not write over the edge of the boxes.
- Do not staple attachments to the form.

If there is not enough space on the form to answer your questions, please provide the additional information on a separate A4 sheet. Please include your name and date of birth, the question number and ensure you sign and date any additional sheets.

- Copies of all our application forms and guidance notes can be downloaded from our website [www.gamblingcommission.gov.uk](http://www.gamblingcommission.gov.uk)
- If you have any queries, please check our website or email [info@gamblingcommission.gov.uk](mailto:info@gamblingcommission.gov.uk) or call our enquiries team on 0121 230 6666

Please return your completed application to:

**GAMBLING COMMISSION, PO BOX 13529, BIRMINGHAM B2 2FE**

## Contents

### Personal Licence Application Form

			<b>Page 4</b>
Section 1	(Q1–Q5)	Applicant Identity	Page 4
Section 2		Employer’s Declaration	Page 5
Section 3	(Q6)	Licence Application	Page 8
Section 4	(Q7–Q11)	Criminality and Investigations	Page 8
Section 5	(Q12–Q13)	Competencies	Page 10
Section 6	(Q14)	Referees	Page 11
Section 7	(Q15–Q16)	Financial Information	Page 12
Section 8	(Q17–Q22)	PML Applicants Only	Page 12
Section 9	(Q23)	Other Information	Page 14
Section 10		Declaration	Page 14
Section 11		Enclosures	Page 15
Section 12	(Q24–Q26)	Payment Method	Page 15

### Photograph Identification Form

**Page 16**

Name of operator this application is linked to  
 G A M B L I N G   C O M P A N Y   L T D

Licence number where known  
 1 2 3 - 4 5 6 7 8 9 - N - 1 2 3 4 5 6 - 1 2 3

Account ID number (if known) 1 2 3 4  
 If associated with more than one operator, please specify which operator and the case ID number where known.

Account ID number

Please provide details of the operator to whom this application is linked. Please provide the licence number where a licence has been issued or the account number (where known) if the operator licence application is still pending.

## Section 1. Applicant Identity

### Question 1

1. Name of applicant. Please note that all future correspondence relating to this application and the licence (if granted) will be directed to this address.

Title  
 M R

First name(s)  
 R I C H A R D

Surname  
 G R E G O R Y

Property number    Property name  
 1

Street  
 A S T R E E T

Town/city  
 A C I T Y

Postcode    Country  
 A 1 2    3 B C    E N G L A N D

Occupancy status    At current address since  
 OWNER    0 1 2 0 0 4

Home phone number (inc. area code)    0 1 2 3 4    5 6 7    8 9 0 1

Alternative number (inc. area code)    0 1 2 3 4    5 6 7    8 8 9 9

Email address  
 r i c h a r d . g r e g o r y  
 @ b t i n t e r n e t . c o m

As part of the Commission's commitment to providing a cost effective service we will issue all licences and correspondence electronically. Please cross the box if you DO NOT wish us to communicate with you in this way.

Please provide an address in Great Britain. Under occupancy status please indicate owner, renting etc.

The Commission will issue all correspondence and licences electronically. Only cross this box if you do not wish us to communicate electronically.

### Question 2

2. Gender    Male     Female

Date of birth    3 0 0 7 1 9 6 6    National Insurance or Identity Number    A B 1 2 3 4 5 6 C

Nationality  
 B R I T I S H

Number of years continuous residence in Great Britain (if not a British citizen)

Driving licence number  
 A B C D E 1 2 3 4 5 6 F G 7 H 1 8 9

Date of issue    Country of issue  
 3 0 0 7 1 9 8 6    E N G L A N D

Passport number  
 1 2 3 4 5 6 7 8 9

Date of issue    Country of issue  
 3 0 0 7 1 9 8 6    E N G L A N D

Mother's maiden (or family) name  
 J O N E S

Please complete details of documents confirming your identity here. Where you do not hold a particular document, please state n/a.

### Question 3

3. Please provide details of your place of birth below.

Town/city  
A C I T Y

County/district  
A C O U N T Y

Country  
E N G L A N D

Nationality at birth  
B R I T I S H

Please provide details of your place of birth.

### Question 4

4. Have you ever been known by another name (including name changes and previous names)?

Yes – please provide details (use a continuation sheet if necessary)  No – please continue to question 5

Full name(s)  
R I C H A R D J O N E S

Date from 0 7 1 9 6 6 Date to 0 7 1 9 6 8

If you have been known by any other names please provide details here. If you require additional space, please use a continuation sheet.

### Question 5

5. Have you lived at any addresses other than that detailed on page 2 in the last five years?

Yes – please provide details below in chronological order (use a continuation sheet if necessary)  No – please continue to question 6

5a. Date from 0 1 1 9 9 9 Date to 0 1 2 0 0 4

Property number Property name  
1

Street  
O L D S T R E E T

Town/city  
O L D C I T Y

Postcode Country  
X 9 8 7 Y Z E N G L A N D

Please provide details of all previous addresses in the last five years in chronological order. If the address in question one is not your home address, please include your home address here also (e.g. if you do not live in Great Britain).

## Section 2. Employer's Declaration

### Identity

This section must be completed by all applicants. Where you wish the Commission to confirm your identity, then appropriate original documents must be provided from the list on the following page.

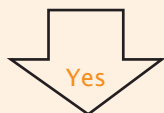
Where you wish to have your identity confirmed by your employer then this section must be completed by the employer and they must see the appropriate original documents from the list on the following page. The details of the person confirming the identity and the operator they are acting on behalf of must be provided. The employer must retain copies of identity documents they have seen.

I wish my identity to be confirmed by my employer/prospective employer/solicitor.

I wish my identity to be confirmed by the Commission (please provide original ID documents with your application).

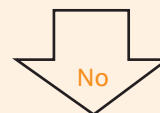
Please cross the box to indicate how you want your identity confirmed.

### Can you produce any documents from Group 1?



Yes

3 documents must be seen  
One document from Group 1 plus  
any two from Groups 1 or 2



No

5 documents must be seen  
Five documents from Group 2

#### Group 1 Documents

- **Passport** any nationality
- **UK Birth Certificate** issued within 12 months of date of birth – full or short form acceptable including those issued by UK authorities overseas, such as Embassies, High Commissions and HM Forces
- **UK issued Driving Licence** England/Wales/Scotland/Northern Ireland/Isle of Man; either photocard or paper. A photocard is only valid if the individual presents it with the counterpart licence
- **EU National Identity Card** EU countries only
- **HM Forces ID Card (UK)**
- **UK Firearms Licence**
- **Adoption Certificate (UK)**

#### Group 2 Documents

- **Marriage/Civil Partnership Certificate**
- **Financial Statement\*\*** e.g. pension, endowment, ISA
- **Birth Certificate**
- **Vehicle Registration Document** (Document V5 old style and V5C new style only)
- **P45/P60 Statement (UK)\*\***
- **Mail Order Catalogue Statement\***
- **Bank/Building Society Statement\***
- **Court Claim Form (UK)\*\*** documentation issued by Court Services
- **Utility Bill\*** electricity, gas, water, telephone – inc. mobile phone contract/bill
- **Exam Certificate** e.g. GCSE, NVQ, O Levels, Degree
- **TV Licence\*\***
- **Addressed Payslip\***
- **Credit Card Statement\***
- **National Insurance Card (UK)**
- **Store Card Statement\***
- **NHS Card (UK)**
- **Mortgage Statement\*\***
- **Benefits Statement\*** e.g. Child Allowance, Pension
- **Insurance Certificate\*\***
- **Certificate of British Nationality (UK)**
- **Council Tax Statement (UK)\*\***
- **Work Permit/Visa (UK)\*\***
- **A document from Central/Local Government/Government Agency/Local Authority giving entitlement (UK)\*** e.g. Department for Work and Pensions, the Employment Service, Revenue & Customs, Jobcentre, Jobcentre Plus and Social Security
- **One of the following documents from the Borders and Immigration Agency (BIA) (formerly the Immigration and Nationality Directorate – IND) (UK)** Do not use more than one of the following documents. Convention Travel Document (CTD), Stateless Person's Document (SPD), Certificate of Identity, Application Registration Card (ARC)
- **Connexions Card (UK)**
- **CRB Disclosure Certificate\*\***
- **Letter from a Head Teacher\***

#### Please Note:

\* **Documentation should be less than three months old.**

\*\* **Documentation should be issued within past 12 months.**

**All documents must be in your current name (marriage certificate excepted). At least one document must show your current address and at least one document must show your date of birth.**

c. Document seen

DRIVING LICENCE

Document reference number

A B C D E 1 2 3 4 5 6 F G 7 H I 8 9

Date of issue of document 3 0 0 7 1 9 8 6

First name(s)

JANET

Surname

SMITH

Signed

Janet Smith

Position in organisation

COMPANY

SECRETARY

Date

0 1 0 3 2 0 0 8

Please complete details of the documents seen.

The employer should sign and complete this section to confirm they have seen the documents listed above.

On behalf of:

Employer

GAMBLING COMPANY LTD

Property number

1

Property name

Street

A STREET

Town/city

A TOWN

Postcode

A 1 2 3 B C

Country

ENGLAND

Contact number

0 1 2 3 4 5 6 7 8 9 0

Contact email address

contactemail

@gamblingcompany.com

Gambling Commission licence number

1 2 3 - 4 5 6 7 8 9 - N - 1 2 3 4 5 6 - 1 2 3

Please complete this section to provide details of the employer for whom the above declaration has been signed on behalf of.

### References

- Where the applicant has been working for the employer for less than two years then the employer must confirm that references have been taken up for the applicant, and sign the top box to confirm this.
- Where the applicant has been working for the employer for more than two years, the employer must confirm that they have no information or reason why a licence should not be granted, and sign the top box to confirm this.
- In cases where the applicant has only recently joined the company and references have not yet been received, the employer must confirm that they are in the process of taking up references, and that once references have been received, they will provide the Commission with confirmation of this, and sign the bottom box to confirm this.

Please then provide the name and position of the person signing to confirm that references have/are being checked.

In all cases, the applicant is still required to provide details of two referees in Section 6 who meet the requirements set for referees. The Commission will use its discretion to determine whether to take up these references and references may still be taken up even if the employer has signed this declaration. In cases where an employer has not signed this declaration then references will always be taken up.

References

Employer's declaration

Please read and sign the declaration below to confirm that references for this applicant are being or have been taken up.

I confirm that I have no information or reason why the Commission should not grant a licence and, if the applicant has been working for me for less than two years that references have been taken up.

Signed

Where the applicant has joined your company recently and you do not yet have references. I confirm that I am in the process of taking up references and will provide confirmation that references have been taken up and that I have no information or reason why the Commission should not grant a licence.

Signed

Sign this box to confirm references have been taken if employed within the last two years, or to confirm you have no reason why a licence should not be granted if employed for over two years.

Sign this box where the applicant has recently joined and references have not yet been taken up.

## Section 3. Licence Application

### Question 6

6a. Please refer to the Guidance Notes and indicate the type of Personal Functional Licence being applied for by placing a cross in the box(es) as required. (If you are not applying for a Personal Functional Licence please continue to question 6b.)

Please indicate what function you will be performing:

Casino dealer/croupier	<input checked="" type="checkbox"/>	Casino pit boss/gaming supervisor	<input checked="" type="checkbox"/>
Casino cashier	<input checked="" type="checkbox"/>	Casino surveillance	<input checked="" type="checkbox"/>
Casino inspector	<input checked="" type="checkbox"/>		

6b. Please refer to the Guidance Notes and indicate the type of Personal Management Licence being applied for by placing a cross in the box(es) as required. (If you are not applying for a Personal Management Licence please continue to question 7.)

Role

Responsibility for overall strategy and delivery of gambling operations	<input checked="" type="checkbox"/>	Regional manager	<input checked="" type="checkbox"/>
Responsibility for financial planning, control and budgeting	<input checked="" type="checkbox"/>	Area manager	<input checked="" type="checkbox"/>
Responsibility for marketing and commercial development	<input checked="" type="checkbox"/>	Casino manager	<input checked="" type="checkbox"/>
Responsibility for regulatory compliance	<input checked="" type="checkbox"/>	Bingo manager	<input checked="" type="checkbox"/>
Responsibility for gambling related IT provision and IT security	<input checked="" type="checkbox"/>	External lottery manager	<input checked="" type="checkbox"/>

Sector	Non-Remote Remote Both				Non-Remote Remote Both		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Casino	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Gambling software	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Bingo	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Lotteries	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Betting	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Adult gaming centre	<input checked="" type="checkbox"/>		
Machine	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Family entertainment centre	<input checked="" type="checkbox"/>		

Please indicate all Personal Functional Licence (PFL) functions that you will be performing. If you are applying for a Personal Management Licence (PML) but will also be performing PFL functions, please also indicate these functions here.

Please indicate all qualifying positions you will be occupying as a PML holder by crossing more than one box if necessary.

Please indicate what sector you will be working in and whether it is non-remote, remote or both by crossing the relevant box(es).

## Section 4. Criminality and Investigations

All current (i.e. unspent) convictions must be declared. In the case of convictions for relevant offences, previous convictions (i.e. spent) must also be declared. Section 4 of the Rehabilitation of Offenders Act 1974 does not apply to a Gambling Commission licence application.

The Gambling Commission is an organisation named in the Notifiable Occupations Scheme. This means that the Commission is notified by Police Forces of any arrests or convictions of individuals employed in the gambling industry. The Commission will determine the weight it will attach to convictions for relevant offences and unspent convictions for other offences committed by licence applicants having regard to the nature and seriousness of the offence and the time which has elapsed since the offence was committed.

Information declared in this section will not necessarily lead to your application being refused, however non-disclosure of an offence or investigation which is later discovered may result in your application being delayed or refused or (if issued) the licence being suspended or revoked.

### Question 7

This question refers to criminal convictions.

7. Have you ever been convicted of an offence or accepted a formal police reprimand, warning or caution in Great Britain or abroad including if charged with an offence but awaiting trial, or under investigation?

Yes – please provide details below (use a continuation sheet if necessary)  No – please continue to question 8

7a. Date of action

Offence

Penalty

Court/location

Other details (including reference number). Please use a continuation sheet if necessary.

Please provide the date and the nature of the offence.

Please specify the penalty and the name of the convicting court.

Please provide any other details including the circumstances surrounding the offence and any reference number (if known). Please use a continuation sheet if needed.

### Question 8

This question refers to criminal investigations.

8. To your knowledge, are you currently the subject of any criminal investigation?

Yes – please provide details below (use a continuation sheet if necessary)  No – please continue to question 9

Date of action

Subject of investigation

Location of investigation

Other. Please provide as much information as possible about the investigation including any contact names and reference numbers where known. Please use a continuation sheet if necessary.

If you are currently the subject of any criminal investigations, please provide as much detail as possible. Please specify the subject of the investigation, the location and any other information including the circumstances surrounding the investigation and a reference number where known. Please use a continuation sheet if necessary.

### Question 9

This question refers to civil actions.

9. Have you ever had any civil legal action taken against you in Great Britain (including County Court Judgements)?

Yes – please provide details below (use a continuation sheet if necessary)  No – please continue to question 10

9a. Date of action

Nature of civil legal action

Court/location

Outcome

Other details. Please use a continuation sheet if necessary.

Please provide the date and the nature of the offence.

Please specify the outcome and any penalties imposed and also the name of the convicting court.

Please provide any other details including the circumstances surrounding the action and any reference number (if known). Please use a continuation sheet if needed.

### Question 10

This question refers to investigations in Great Britain or abroad by any statutory, regulatory or governing bodies.

10. Are you subject to any current, pending or previous investigation by any statutory, regulatory or governing body in Great Britain or abroad (e.g. Financial Services Authority, Her Majesty's Revenue and Customs, Horseracing Regulatory Authority) in respect of any licence, certificate or permit held?

Yes – please provide details below (use a continuation sheet if necessary)  No – please continue to question 11

10a. Date

Name of investigating body

Type of licence held

Reference number

Please provide details of circumstances surrounding the investigation and any additional information below. Please use a continuation sheet if necessary.

Please provide the date and the name of the investigating body e.g. FSA, HRA, HMRC.

Please detail the type of licence/permit held and reference/licence number.

Please provide circumstances surrounding the investigation and details of the outcome and any penalties imposed. Please provide as much detail as possible and use a continuation sheet if necessary.



### Question 13

13. Do you have any professional qualifications relating to your current responsibilities and/or have you received any formal training relevant to the licensing objectives (include any formal training due to be undertaken in the next three months)? Detail any academic or formal gambling-related training (either as part of an employer's training programme or with an education provider, such as a college or university) below (use a continuation sheet if necessary).

Yes – please provide details below  No – please continue to question 14

Professional body/training provider


Date from       Date to

Qualification/training received


Please detail the training provider or professional body here. If this is your employer, then please put the employer name here.

Please provide the dates of the training and detail the qualification obtained and a brief description of the training undertaken.

## Section 6. Referees

### Question 14

The Commission requires the details of two referees. These referees:

- must not be related to the applicant;
- must not be related to each other (e.g. husband and wife can not be the two referees);
- must have been known to the applicant for at least five years;
- cannot be associated with the operator in any way (i.e. they cannot be work colleagues, employees of a parent company etc); and
- cannot be the contact person in cases where an alternative person (e.g. solicitor), has been named as the contact for the application in question two of the Operator Licence Application Form.

Please ensure that the referee is:

- aware that the Commission will be contacting them;
- available to provide a reference during the period of the application;
- prepared to give a reference; and
- able to return the reference request promptly.

Please note, some organisations may make a charge for references or require permission from the applicant to provide a reference (e.g. Doctors, banks). Please ensure you check this as the Commission will not pay for references and this may delay your application.

Referees **must** be provided here regardless of whether the employer has signed the declaration in Section 2 of the application form. The Commission will use its discretion in determining whether references will be taken up.

14. Please provide details of your first referee below (see Guidance Notes for referee requirements).

14a. Title

M R

First name(s)

J O H N

Surname

S M I T H

Relationship to you (e.g. friend, ex-work colleague, neighbour)

E X - M A N A G E R

Number of years known

2 4

Occupation

C I V I L S E R V A N T

Property number

Property name

A H O U S E

Street

R E F S T R E E T

Town/city

R E F C I T Y

Postcode

Country

A 1 2 3 B C E N G L A N D

Home/personal number (inc. area code)

0 1 2 3 4 5 6 7 8 9

Daytime phone number (inc. area code)

0 9 8 7 6 5 4 3 2 1

Email address

j o h n s m i t h t h e r e f e r e e

@ b t i n t e r n e t . c o m

Please provide the details of your referees, ensuring all fields are completed. Please provide an email address and mobile phone number wherever possible to speed up the process of obtaining references. Where providing an email address, please ensure that the referee is willing to be contacted by email. Please ensure both referees meet the requirements set out above.

## Section 7. Financial Information

### Question 15

15. Have you ever been declared bankrupt or entered into an agreement with creditors or an Individual Voluntary Agreement under the Insolvency Rules 1986 or under the Bankruptcy (Scotland) Act 1985?

Yes – please provide details below

No – please continue to question 16

Please give full details including circumstances, date of action/agreement and date of discharge (use a continuation sheet if necessary).


If you have been declared bankrupt or entered into an Individual Voluntary Agreement in Great Britain, please provide as much detail as possible here. If you require additional space, please use a continuation sheet.

### Question 16

16. Have you ever been declared bankrupt or entered into an agreement with creditors or an Individual Voluntary Agreement outside of Great Britain?

Yes – please provide details below

No – PML applicants please continue to question 17

PFL applicants please continue to Section 9

Please give full details including circumstances, date of action/agreement and date of discharge (use a continuation sheet if necessary).


If you have been declared bankrupt or entered into an Individual Voluntary Agreement outside of Great Britain, please provide as much detail as possible here. If you require additional space, please use a continuation sheet.

## Section 8. PML Applicants Only

This section contains questions that need to be completed by **PML applicants only**. PFL applicants should proceed to Section 9.

### Question 17

17. Do you have a spouse or civil partner?

Yes – please provide details below

No – please continue to question 18

First name(s)

J O A N

Surname

G R E G O R Y

Date of birth

0 2 0 2 1 9 7 0

Previous surname

L I T T L E

Current address

1 A Street, A City, A12 3BC, England

Please indicate whether you have a spouse or civil partner by crossing the box and provide their details in the space provided.

### Question 18

18. In the last five years and excluding your driving licence and any gambling related licences, permits, certificates, have you ever applied for or held any other licence, approval, authorisation or registration (either in Great Britain or abroad) in connection with your current or previous employment?

Yes – please provide details below

No – please continue to question 19

18a. Type of licence, approval, authorisation or registration


Name of licensing authority








## Photograph Identification Form

- Every personal licence application must be accompanied by a completed Photograph Identification Form.
- You must attach a recent colour passport sized photo to the form.
- The photograph must:
  - be verified and signed by your employer, or if you are not employed, by a professional person or similar such as a civil servant, solicitor or doctor;
  - be taken within the last month;
  - be 45mm high x 35mm wide (do not trim your photograph to meet this condition);
  - be taken against an off-white, cream, or light grey plain background so that your features are clearly distinguishable against the background;
  - be printed on low gloss, plain white, photo quality paper (with no watermarks, embossing or printing on the back);
  - be free from copyright (for example do not send school photographs as these are produced under copyright);
  - be undamaged (for example from creases or paperclips);
  - be of you on your own (for example no other people or background objects present);
  - be a close-up of your head and shoulders so that your head, from the bottom of your chin to the top of your head is between 29mm and 34mm high, and your eyes are in approximately the centre of the photo;
  - be clear of writing on the front;
  - be in sharp focus and clear;
  - have a strong definition between the face and background;
  - be printed professionally;
  - not show any shadows;
  - show you facing forward looking straight towards the camera;
  - show a neutral expression with your mouth closed;
  - show your eyes open and clearly visible (no sunglasses or heavily tinted glasses and no hair across the eyes);
  - show no reflection or glare on your glasses and the frames should not cover the eyes;
  - show your full head, without any head covering, unless worn for religious or medical reasons;
  - show nothing covering your face.

Further information on the photograph requirements can be found on the UK Passport Service website at [www.passport.gov.uk](http://www.passport.gov.uk).