APPLICATION FOR APPROVAL OF PREMISES for
Marriage Ceremonies and
Civil Partnership Registrations

Please ensure that you read this form carefully before completion

All boxes on the form must be completed. Incomplete forms will not be accepted. If a box is not applicable please state this

Please check that all enclosures are included (see checklist at the end of the form)

Cheques should be made payable to “The Royal Borough of Kensington and Chelsea”

Once completed this form must be forwarded, together with all the necessary plans, copy certificates and fees to:

The Superintendent Registrar
Kensington and Chelsea Register Office
Chelsea Old Town Hall
Kings Road
London
SW3 5EE
1. I apply for the premises named at (A) overleaf to be approved for regular use by the public as a venue for civil ceremonies in the presence of a Superintendent Registrar.

2. I attach a detailed plan of the premises clearly showing the room(s) in which it is intended that marriages and civil partnerships will take place. I also identify on those plans a separate room where the registrar may interview the couple to be married, or forming their civil partnership, in private prior to any ceremony. Entrances to the building are clearly identified and I have included details of access and facilities for disabled persons, including those for use in emergencies.

3. I understand that:

(a) The premises will be inspected for suitability before approval is granted and if this application is successful will be subject to a subsequent inspection;

(b) A public notice of the application will be appear on www.rbkc.gov.uk/registrars for a period of 21 days to allow for objections;

(c) Approval, if granted, will be for a three or five year period, subject to revocation, and;

(d) The premises must satisfy the Local Authority on fire precautions and health and safety provisions.

4. I declare that:

(a) The premises are located within Kensington and Chelsea;

(b) The building has no recent or continuing religious connection;

(c) The building is a permanent structure;

(d) The premises would be regularly available for public use as a venue for marriage ceremonies and civil partnership registrations;

5. I understand that this application must be made by the proprietor or a trustee of the premises and that, if successful, I will be the holder of the approval.
Signature of applicant

Full Name of Applicant
(capital letters)

Date of application

Interest in the premises

Address for correspondence

Postcode

Office Telephone

Mobile Telephone

E-mail

A Full names and private address of applicant (if the application is made by a limited company please give the address of the registered office and, where different, state also the main trading address of the company)
**B** Name, postal address and telephone number of the premises, which are the subject of this application

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<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Telephone</th>
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**C** Please describe the nature of the premises at Question B *(e.g. Hotel, Stately Home, Civic Accommodation)* and the primary and other uses to which it is regularly put

<table>
<thead>
<tr>
<th>Nature of Premises</th>
<th>Primary Use</th>
<th>Other Uses</th>
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**D** Is the person or company named in reply to Question A the occupier of the premises?

- Yes ☐
- No ☐

**E** If the answer to Question D above is ‘No’ and there is another occupier please give their name(s) and address(es)

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<tr>
<th>Name</th>
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</table>
F Please state here the maximum number of people permitted to occupy each room

________________________________________________________________________
________________________________________________________________________

G Do the premises currently have the benefit of any licence authorising use for public entertainment or similar purposes? If so, please attach a copy.

________________________________________________________________________
________________________________________________________________________

H Have there been any modifications to the premises to comply with the requirements of the Disability Discrimination Act 1995? If so, please give dates and brief details of when these works were carried out

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I Is there easy access and egress for disabled persons in the event of any emergency? Please give a brief outline of your emergency procedures

________________________________________________________________________
________________________________________________________________________
J Have you specially adapted toilet facilities for disabled persons or are you able to adapt your present facilities to accommodate?

- Yes ☐
- No ☐
- Able to adapt ☐

K Are you registered as a food premises under the (Regulation (EC) No. 852/2004 on the Hygiene of Foodstuffs, Article 6(2))?

- Yes ☐
- No ☐
- Not sure ☐

L Are there any external or roof top areas that are likely to be used by attending guests during any reception?

- Yes ☐
- No ☐

CHECKLIST FOR ENCLOSURES

- All sections of this form have been completed and signed ☐
- Fire Risk Assessment / Public Entertainment Licence (copies enclosed) ☐
- Plans of the rooms (clearly marked rooms, exits, disabled access facilities etc) ☐
- Payment:

<table>
<thead>
<tr>
<th>Maximum Capacity of All Licensed Rooms of Venue</th>
<th>3 year licence</th>
<th>5 year licence</th>
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<tbody>
<tr>
<td>Up to 150</td>
<td>£1325</td>
<td>£2000</td>
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<tr>
<td>151 - 300</td>
<td>£1475</td>
<td>£2230</td>
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<tr>
<td>301 - 500</td>
<td>£1675</td>
<td>£2550</td>
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<td>501 and over</td>
<td>£1875</td>
<td>£2800</td>
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<tr>
<td>Renewal</td>
<td>£1325</td>
<td>£2000</td>
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