

Application for approval of premises as venues for civil marriage and civil partnership

under section 26(1)(bb) of The Marriage Act 1949 and for civil partnerships under Section 6(3A)(a) of The Civil Partnership Act 2004 .

This application must be made by the proprietor or a trustee of the premises. If successful, the applicant will be the holder of the approval.

When completed it should be forwarded, along with the appropriate fee to:

Registration & Coroners Service Manager
The Register Office
Shirehall
Shrewsbury SY2 6ND

Email: registrars@shropshire.gov.uk

Telephone: 0345 678 9016

Section 1 – About the Applicant

Are you an agent acting on behalf of the applicant? Yes No
If yes please provide your agencies name and address

Name

Address

Main telephone number/Other telephone number

Email address

Full names and private address of applicant

Name

Address

Main telephone number/Other telephone number

Email address

If the application is made by a limited company please give the address of the registered office and name(s) and address(s) of all Directors *(continue on a separate sheet as necessary)*

Name

Address

Main telephone number/Other telephone number

Email address

Full name and addresses of the occupiers of the premises

Name

Address

Main telephone number/Other telephone number

Email address

Postal Address and contact information for official correspondence

Name

Address

Main telephone number/Other telephone number

Email address

Section 2 – Type of Application -

New Application Renewal

Section 3 – About the Premises you would like to be licensed for marriages and civil partnerships

Name of premises

Address

Primary phone number/ other phone number

Email address

Booking confirmations to be emailed to

Email address

Key Contact

Name

Primary phone number/ other phone number

Email address

Type of Premises

For example, hotel, village hall, stately home, civic accommodation.

Description of the primary and other uses to which the premises are regularly put

Are there any other occupiers of the premises? If so please provide the names and contact details of other occupants.

Name

Telephone Number

Email address

Section 4 - Ceremony Rooms/Locations -

Total number of rooms for which you are seeking approval - _____

Please list the rooms below:

Please ensure that all rooms are indicated on the plans submitted with this application.

Room Name	Maximum Capacity
Room Name	Maximum Capacity
Room Name	Maximum Capacity
Room Name	Maximum Capacity
Room Name	Maximum Capacity
Room Name	Maximum Capacity
Room Name	Maximum Capacity
Room Name	Maximum Capacity

Please give the name of a private room/area (not an occupied bedroom) in which the Registration Officers can carry out their pre- ceremony interviews with the couple immediately before the wedding. *(This room will need to be available to the Registration Officers for at least 30 minutes prior to the start time of the ceremony and have a desk/dining height table, and at least 3 chairs, and access to a telephone).*

Name/location of private interview room

Please ensure that the name or location of this room is indicated on the plans submitted with this application.

Section 5 – Names of your Responsible Person -

You are required to have a named responsible person or in their absence an appropriately qualified and named deputy available on the premises for a minimum of one hour prior to and throughout each of the ceremonies.

Name of Responsible Person

Qualification (position)

Address of Responsible Person

Address of Responsible Person

Name of Deputy

Name of Deputy

Name of Deputy

Name of Deputy

Name of Deputy

Name of Deputy

Name of Deputy

6- Important Requirements and Evidence -

You must have a suitable level of public liability insurance to cover this activity – check local requirements

Do you have Public Liability Insurance Yes No

You must enclose a copy of your insurance with your application

I enclose a copy of the current fire risk assessment for the premises dated within 12 months of the date of this application

I enclose a plan showing the rooms to be licensed and the room for use of the registrars for the purposes of carrying out their pre wedding interviews.

I enclose a copy of any relevant licences, e.g. under the licensing or entertainment legislation,

I enclose a copy of the current health and safety risk assessment for the premises.

Declaration 1 – Please sign

I further confirm that the venue has not been issued with an advisory/ improvement or prohibition notices in the last 3 years or, since the issue of your previous licence by the following:

Shropshire Fire & Rescue Service
Environmental Health
Health & Safety Executive

If **yes**, please give details to include agency contact information.

Details and agency contact information, please continue on a separate sheet if necessary.

Signature

Declaration 2 – Please Sign

I / We have consulted the planning authority as to whether planning consent is required for the premises to be used for marriages, civil partnerships and other celebratory functions **and I enclose evidence that either**

Planning consent is not required

Planning consent is required and is in place.

Signature _____

Declaration 3

I confirm that the premises will regularly be available to members of the public for ceremonies

I confirm that these premises do not have any recent or ongoing connection with any religion or religious activities

I confirm that I/we have read and understood the information contained within the application form and in the information pack including the terms and conditions of issue.

I confirm that we will comply with the standard and local conditions attached to the grant of approval.

Signature _____

Date _____

Payment details

Licences are available for varying validity periods, please select which licence you are applying for.

3 Years - £1700.00 Including 2 rooms, Additional rooms £250.00 each

5 Years - £2550.00 Including 2 rooms, Additional rooms £350.00 each

7 Years - £3400.00 Including 2 rooms, Additional rooms £450.00 each

10Years - £4600.00 Including 2 rooms, Additional rooms £600.00 each

Total payment due: £ _____

How to make the payment.

Payment can be made via internet banking using the following information:

Account Name: Shropshire ODR
Sort Code: 55 50 05
Account Number: 03200051
Reference: 11048 A93081

Please quote the name of the premises to be licenced

Alternatively, payment can be made by cheque payable to **Shropshire Council**.

Please note that your application will not be considered until payment has been received in full.

How to Submit Your Application

Applications can be submitted electronically to:

registrars@shropshire.gov.uk

or **by post** or **in person** to:

Shropshire Registration Service
Shropshire Register Office
Shirehall
Abbey Foregate
Shrewsbury
Shropshire. SY2 6ND

