

ABERDEEN CITY LICENSING BOARD

| Legal Services | Governance | Aberdeen City Council | Business Hub 6 | Level 1 South |
Marischal College | Broad Street | Aberdeen | AB10 1AB

Licensing (Scotland) Act 2005, Section 92
Replacement Personal Licence

This application should be completed legibly in block capitals and returned to the address above. The fee for this application is £25.00.

PERSONAL LICENCE HOLDER DETAILS

Surname of Personal Licence Holder

Forename(s) of Personal Licence Holder

Licence Holder's home address including postcode

Licence Holder's date of birth

Personal Licence Number (if known)

Please confirm (by ticking the relevant box below) if your personal licence has been:

Lost	
Stolen	
Damaged (please return personal licence)	
Destroyed	

Continue Over

If your licence has been lost or stolen, you must report this to the police and then complete the following section:

Name and address of police station to whom the loss/theft was reported	
Police reference number or date reported	

I have enclosed payment of the fee of £25 (please tick)	
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Declaration by licence holder or agent on behalf of applicant

If signing on behalf of the applicant please state in what capacity

Signature

Print Name.....

Date
.....

Capacity: APPLICANT / AGENT (delete as appropriate)

Privacy notice

Your data: personal alcohol licence replacement

How we use your information

This privacy notice relates to replacement of a personal licence under the Licensing (Scotland) Act 2005.

Aberdeen City Licensing Board collects and records the personal information you provide in this form, along with supporting documentation, in order to issue you a replacement licence.

The Licensing Board doesn't share the information you've provided with any other third parties, unless we're authorised or required to do so by law.

Sharing with The National Fraud Initiative in Scotland

The Licensing Board is obliged to participate in the National Fraud Initiative in Scotland and in terms of this passes information to Audit Scotland for data matching to detect fraud or possible fraud. You can find details of this exercise on [Audit Scotland's website](#).

How long we keep your information for

This application and any supporting documentation will be retained by the Licensing Board for a period of 5 years, from the date your personal licence expires.

Your rights

You have rights in relation to your data, including the right to ask for a copy of it. See the [Your data page](#) for more information about all the rights you have, as well as the contact details for the Council's Data Protection Officer. You also have the right to make a complaint to the [Information Commissioner's Office](#) if you think we haven't handled your data properly.

Our legal basis

Wherever the Licensing Board processes personal data, we need to make sure we have a legal basis for doing so in data protection law. The Licensing Board understands our basis for processing personal data in relation to this application regarding your licence is Article 6(e) of

the General Data Protection Regulation (GDPR) in that the Licensing Board is exercising its official authority under Section 92 of the Licensing (Scotland) Act 2005.

The Licensing Board has a legal obligation under Part 2A of the Public Finance and Accountability (Scotland) Act 2000, to provide Audit Scotland with data to carry out data matching exercises for the purpose of assisting in the prevention and detection of fraud.



ABERDEEN LICENSING BOARD

Why are we asking these questions?

The Licensing Board wishes to ensure that its services are available to everyone who lives in Aberdeen, including persons who have protected characteristics in terms of the Equality Act 2010. Relevant protected characteristics may be in relation to Age, Disability, Gender reassignment, Marriage and civil partnership, Race, Religion or belief, Sex or Sexual orientation.

This questionnaire helps us to see who is using the Board's services and where we may be required to act to ensure a wider range of people can access our services.

How will this information be used?

The information on this form will be confidential and anonymous. It will be stored and analysed separately from any other personal information you may give. Any information you provide on this form will be used by Aberdeen City Council for statistical reporting in connection with analysing service use, and will only be processed in accordance with the Data Protection Act 1998. The results will be published in such a way that individuals who have contributed to the survey cannot be identified.

The information will have no bearing whatsoever in respect of applications or other processes under the Licensing (Scotland) Act 2005 and shall be processed completely separately.

Do I have to give this information?

You do not have to fill this form in, but doing so will help us monitor and improve our services.

Questionnaire

1. What is your date of birth

2. Are you male or female? Please tick.

- Male
 Female

3. What is your ethnic group?

Choose ONE section from A to F, and then tick ONE box which best describes your ethnic group or background.

A: WHITE

- Scottish
 Other British
 Irish
 Gypsy/Traveller
 Polish

Other White ethnic group, please write in the box below

B: MIXED or MULTIPLE ETHNIC GROUPS

- Any mixed or multiple ethnic groups, please write in the box below

C: ASIAN, ASIAN SCOTTISH or ASIAN BRITISH

- Pakistani, Pakistani Scottish or Pakistani British
 Indian, Indian Scottish or Indian British
 Bangladeshi, Bangladeshi Scottish or Bangladeshi British
 Chinese, Chinese Scottish or Chinese British
 Other, please write in box below

D: AFRICAN

African, African Scottish or African British

Other, please write in the box below

E: CARRIBEAN OR BLACK

Caribbean, Caribbean Scottish or Caribbean British

Black, Black Scottish or Black British

Other, please write in the box below

F: OTHER ETHNIC GROUP

Arab, Arab Scottish or Arab British

Other, please write in the box below

4. Do you have a physical or mental health condition or illness lasting, or expected to last, 12 months or more

Yes

No

5. If the answer to question 4 is yes, does this condition or illness affect you in any of the following areas? Tick all that apply

Vision (for example blindness or partial sight)

Hearing (for example deafness or partial hearing)

Mobility (for example walking short distances or climbing stairs)

Dexterity (for example listing or carrying objects, using a keyboard)

Learning or understanding or concentrating

Memory

Stamina or breathing fatigue

Socially or behaviourally (for example associated with autism, attention deficit disorder or Asperger's Syndrome)

Other, please specify below

6. What religion, religious denomination or body do you belong to?

- None
- Church of Scotland
- Roman Catholic
- Other Christian
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Pagan
- Another religion, please write in the box below

7. Which of the following best describes how you think of yourself?

- Heterosexual/straight
- Gay/Lesbian
- Bisexual
- Transgender
- Other

Completed forms can be returned anonymously along with application forms (in a separate envelope if you wish) or separately to the address or email address below.

Aberdeen Licensing Board
Equalities and Human Rights
Corporate Governance
Aberdeen City Council
Business Hub 6
L1S Marischal College
Aberdeen
AB10 1AB

Email:
licensing@aberdeencity.gov.uk