

PUBLIC HOUSE APPLICATION

Applicant's Name	Specific Pub Interest (If general enquiry, please state)		
The information you give on this form will be approach will be made to your present employed form in INK using BLOCK CAPITALS. This application period of one year.	er without your consent. Pl	ease complete the	
	Applicant	Partner	
Surname			
Forename(s)			
Maiden Name (If applicable)			
Nationality			
Marital Status			
Place of Birth			
Children (Age)			
Name and relationship of any person who would be living with you if successful			
National Insurance Number			
Present Address			
How long have you resided at the present address?			
If less than 6 months, please give previous address			
Telephone No (Home)			
Telephone No (Work)			
Email Address			
I I TES I INO	re you ever made a previous lication to Batemans Brewery'	Yes	
If yes, please give details			

Name and address of any relative who is employed by Batemans or is one of our tenants

EMPLOYMENT HISTORY

Please list all employment (commencing with your present job). Attach CV if more appropriate.

APPLICANT

PARTNER Name & Address of Employer Name & Address of Employer Position Held Date From To Brief Details of Responsibilities Prom Responsibilities Brief Details of Responsibilities Prom To Responsibilities Brief Details of Responsibilities Prom To Responsibilities Brief Details of Responsibilities Prom To Responsibilities Prom To Also details of training courses attended. Do you hold a personal licence? APPLICANT Name of Course Name of Location Course Held Date From To Qualification Obtained Prom To Date Qualification Obtained Prom To Do you hold a basic food hygiene certificate? Yes No PARTNER Name of Course Name of Location Course Held Do you hold a basic food hygiene certificate? Yes No PARTNER Name of Course Name of Location Course Held From To Course Held Prom To Course Held Prom To Responsibilities Promain Course Name of Location Course Prom To Course Name of Location Course Held Prom To Course Name of Location Course Held Prom To Course Name of Location Course Prom To Name of Location Course Prom To Name of Location Course Prom To Name of Location Course Name of Location Course Prom To Name of Location Course Name of Location Course	Nama & Address of Employer	Position Held	Date		Brief Details of	
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Net Sale of Business Loan from Bank/Other Banker						
Loan from Bank/Other						
Pension/Other Income						
	Pension/Other Income					

REFERENCES

Please give two names and addresses for both applicant and partner

Γ.,		Applicant	Partner	
Name				
Occupation				
Address				
Telephone Number				
Email				
Name				
Occupation			_	
Address				
Telephone Number				
Email				
Please note – These refere	ences will not be sought v	vithout vour permission		
Ticase note Those release	chices will flot be sought v	vitriout your permission.		
AVAILABILITY		Public House T	ype	
Can you take up occupatio	n:	Tick boxes for pub ty	ype and location	
Immediately		Geographical area	of interest	
Within 3 months				
Other? (Please specifiy)]		
		Type of pub Tick	k areas of interest	
		Community	Cask Led	
		Food	Village	
			Town	
DECLARATION				
Should you feel you wish to give further details regarding yourself or your intentions, please send with this				
application form. I declare that the information provided on this form is correct in every aspect and that I have not withheld				
any material facts. If any inf	formation given is incorrec	t or any material facts withher any offer that may have be	eld, I acknowledge that	
Signature				
Applicant		Date		
Partner		Date		
Thank you for completing this form. Please check that you have included all relevant details. Send your completed form to the address on the front of the application.				
	OFFICE USE ONLY	Acknow	vledued.	

OFFICE USE ONLY	Acknowledged:
Received:	Recommendation:
Interview By:	Date:

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