



SECURITY STEWARDS IN SPORTS VENUE ACT

APPLICATION FOR A LICENCE OF A SECURITY STEWARDS AGENCY

1. DETAILS OF APPLICANT

Name and Surname	
Business Address / Registered Office	
ID / Registration Number	
Name of proposed Security Stewards Agency	

2. DETAILS WHERE APPLICANT IS A BODY OF PERSONS

Where the Applicant is a Body of Persons, the following information is to be given regarding the shareholders, directors and partners (and, in the case of Partnerships, their registration number, the registered office of the Partnership and the number of persons employed):

2.1

Name	
Address / Registered Office	
Shareholder / Director / Partner	
ID / Registration Number	
Number Of Employees	

2.2

Name	
Address / Registered Office	
Shareholder / Director / Partner	
ID / Registration Number	
Number Of Employees	

2.3

Name	
Address / Registered Office	
Shareholder / Director / Partner	
ID / Registration Number	
Number Of Employees	

2.4

Name	
Address / Registered Office	
Shareholder / Director / Partner	
ID / Registration Number	
Number Of Employees	

2.5

Name	
Address / Registered Office	
Shareholder / Director / Partner	
ID / Registration Number	
Number Of Employees	

2.6

Name	
Address / Registered Office	
Shareholder / Director / Partner	
ID / Registration Number	
Number Of Employees	

If the Applicant is a body of persons, the Memorandum and Articles of Association, or the deed creating the body, as the case may be, is to be attached to this application.

3. DETAILS OF SECRETARY AND OTHER OFFICERS

3.1 Secretary

Name	
Address	
ID Number	

3.2 OTHER OFFICERS

3.2.1

Name	
Address	
Designation	
ID Number	

3.2.2

Name	
Address	
Designation	
ID Number	

3.2.3

Name	
Address	
Designation	
ID Number	

4. RELEVANT WORKING EXPERIENCE OF APPLICANT AND OTHER PERSONS MENTIONED ABOVE.

Details

5. DETAILS OF EMPLOYMENT

5.1 Applicant's Present Employment

Details

5.2 Has Applicant Ever Been Employed With The Police, Armed Forces, The Prison Services or The Civil Protection?

Details

5.3 The Cause Of The Termination Of Such Employment (If Applicable).

Details

6. FINANCIAL STATUS

6.1 If Applicant was previously carrying on any business activity, the financial statements, or if so required under any other law, the audited financial statements for the last three years are to be attached. (If applicable state year/s which are being attached).

Year(s) Attached

7. INDEMNITY INSURANCE

This application is subject to the condition that an insurance policy in accordance with the provisions of article 21 of the Act, is produced to the Commissioner of Police. Any person who does not comply with any of the provisions contained in the said article 21 shall be deemed to be operating without the licence required under the Act.

8. DECLARATION OF FINANCIAL INTEREST

I hereby declare that I have no financial or other interest, (including any other business or economic activity, services provided, or employment held) which could in any way conflict with the services to be provided by this Security Stewards Agency.

8.1

Applicant's Name	
Designation	
Signature	

9. FEE

A fee of _____ is being enclosed.

10. LIST OF DOCUMENTS

Applicants are to list the documents attached to this application.

1.	
2.	
3.	
4.	
5.	
6.	

11. APPLICANT'S DECLARATION

I hereby declare that the information contained in this application is, to the best of my knowledge and belief, true and correct, and I undertake that in accordance with the provisions of article 12(1)(c) of the Act, I shall immediately inform the Commissioner of any change in the information herein contained.

11.1

Applicant's Name	
Designation	
Signature	