

LONDON BOROUGH OF REDBRIDGE
APPLICATION FOR RENEWAL OF SPECIAL TREATMENTS LICENCE

I /We hereby apply to the council of the London Borough Of Redbridge in pursuance of the provisions of the London Local Authorities Act 1991 to 2000, for the licensing of the following premises as an establishment for special treatment.

1. Premises Details – where are the treatments to be carried out?	
Name of Business:	
Business Address:	
Existing Licence Number: (on your renewal letter & licence)	
Licence Correspondence Address (if different):	
Telephone Number:	
Email address:	

2. Applicant Details – whose name will appear on the licence?

Where the application is made on behalf of a limited company, the secretary or a director should sign. In case of a partnership, each partner should sign. If signing on behalf of the applicant, please state in what capacity you are acting.

Name of Applicant: (& company name if applicable)		
Home Address:		
Telephone Number:		
Mobile Number:		
Email Address:		
Signature of Applicant:		
Position/ Capacity:		Date:

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Name of Second Applicant (if applicable):		
Home Address:		
Telephone Number:		
Mobile Number:		
Email Address:		
Signature of Applicant:		
Position/Capacity:		Date:

3. Changes

If there are any changes to the following please give details:

- For therapists to be added: please complete the forms [licence application - person giving treatment STR02](#) and [declaration of convictions DOC01](#) and attach relevant qualification certificates and a passport style photo signed on the reverse.

NAME	TREATMENTS GIVEN	Completed (tick)	
		STR02	DOC01

- Therapists to be removed from the licence:

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- If there are changes to layout of premises, please submit a revised floor plan.
- Any other changes which may affect the application including opening times, management and applicant details:

NB: All information, fees and forms can be downloaded from our website www.redbridge.gov.uk and click on the following link:

<https://www.redbridge.gov.uk/business-and-regeneration/licensing-including-street-trading/special-treatment-licences/>

I have enclosed:	
The STR06 form– treatments to be provided.	
A copy of the public liability insurance, professional indemnity and employer’s liability certificate.	
A copy of the electrical portable appliances test certificate (for all equipment over 1 year old)	
A copy of the annual laser/IPL service report (if applicable).	
A copy of the annual sunbed electrical safety test certificate and proof of tube change (if applicable).	
A copy of any renewed membership from relevant association which provides exemption (if applicable).	
A copy of Core of knowledge certificate for each Laser/IPL Therapist (due every 5 years) if applicable.	
A copy of the sauna/spa/steam electrical safety certificate (if applicable)	
A copy of the autoclave service report (if applicable)	
Forms, training certificates and photo of new staff (if applicable)	

Convictions

Have you, or any person named in or associated with this application including new staff, been convicted of any crime or offence since the last renewal?

Yes No

- If Yes, you will need to complete and attach declaration of convictions DOC01 form, which can be downloaded from the link provided.

Tick this box to indicate you have read and understood the above declaration.

Redbridge Council has a duty to protect public funds and prevent fraud.

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Payment Details

You will be invoiced separately by our Finance Section according to the fees schedule and the categories on the form code STR06 (treatments for which licence is sought).

NB: Licences are issued for a maximum period of 18 months.

The Council licenses special treatments on an annual basis and this comes into force from 1st November to 31st October. Where licences are applied for within the period of this year, then a fee will be applied for that period between the start of the licence date and the end of year point.

Please be aware that information on this form will be shared with other Public Authorities where a lawful request is made.

Licence

Licences will be issued electronically unless you tick this box for a paper copy

*I am aware of the regulations of the authority concerning special treatments. The details contained in the application form and any attached documentation are correct to the best of my knowledge and belief.

This Section should be signed by the Applicant.

Signed Dated

Name

Second Applicant (if applicable)

Signed..... Dated

Name

When considering the application for the renewal of the licence the council shall consult with the Commissioner of Police where applicable.

Please send the form and accompanying documents to:
Licensing Authority
2nd Floor Front, Lynton House
255-259 High Road
Ilford IG1 1NY

Or by email to: Licensing.Authority@redbridge.gov.uk