

**BELFAST CITY COUNCIL**  
**Registrar's Office, City Hall, Belfast BT1 5GS**

Our Website [www.belfastcity.gov.uk/bdm/index](http://www.belfastcity.gov.uk/bdm/index)

TELEPHONE (028) 9032 0202 Exts 2380 and 2381 (DIRECT LINE) (028) 9027 0455  
 FAX (028) 9027 0520 Text phone (028) 9027 0405  
 OFFICE HOURS MON to THURS 9.30 am - 4.30 pm, FRI 9.30 am - 4.00 pm

**Application for Venue to be  
 Approved for a 3 year Period  
 as a Venue for  
 Civil Marriages / Civil Partnerships**  
 in pursuance of Regulation 14 of Marriage (NI) Regulations 2003 and Regulation  
 8 of Civil Partnership Regulations (NI) 2005

This Form, when completed, should be returned with the Enclosures listed at 7  
 to the **Registrar's Office, City Hall, Belfast BT1 5GS**

**Name of Venue** .....

**For City Council Official use only**

Action	Date	Initials	Comments
<b>Enquiry Received</b>			
<b>1<sup>st</sup> Letter + Application Form Sent</b>			
<b>Application Received</b>			
<b>Items enclosed</b>			
3 plans of premises/location showing rooms			
Copy of fire certificate (where applicable)			
Certificate of Public Liability Insurance			
Copy of Entertainment Licence (where applicable)			
<b>Application fee of £ 400</b>			
<b>Acknowledgement Letter (Site Notice) sent</b>			
Site Inspection (s)			
Decision - Approval / Refusal Notified to Venue			
Reminder to renew sent			

**Please read the enclosed "Guidance to the Requirements and Conditions for Approved Premises for Civil Marriages/Civil Partnerships" before completing this form.**

**1. DETAILS OF PREMISES**

Please give the full name, address, telephone and fax number etc of the Premises  
Information in section 1 will be available to the public and may appear on the Registrars website

<b>Title:</b>			
<b>Address:</b>			
<b>Telephone No:</b>		<b>Fax No:</b>	
<b>Website Address</b>			
<b>Email Address</b>			

**2(a) DETAILS OF APPLICANT**

Please give the full name, home address, date of birth, email address and telephone number of the person making this application. This person should normally be the Proprietor or Trustee of the Premises.  
(see Guidance Part 1 a)

<b>Name:</b>			
<b>Home Address:</b>			
<b>Date of Birth</b>			
<b>E-mail address:</b>			
<b>Telephone No:</b>	Home	Business	

**2(b) If the venue is part of a Limited Company, please give the address of the registered office.**

<b>Company:</b>			
<b>Address:</b>			
<b>E-mail address:</b>			
<b>Telephone No:</b>			

If an approval is granted the Applicant at 2(a) will be known as the "Approval Holder" and will be responsible for ensuring all conditions and requirements are satisfied in respect of the premises for its use as a venue for Civil Marriages/Civil Partnerships.

**3. NATURE OF PREMISES**

Please describe the nature of the premises (e.g. Hotel, Civic Building etc.) and the primary and other uses to which they are regularly put. (see Guidance Appendix A)

**4 OCCUPIER OF PREMISES**

Is the person named in Section 2 the sole occupier of the Premises?

<b>Yes</b>	
<b>No</b>	

If No, please give the names and addresses of other occupiers and the nature of their occupancy below:

--

**4a** Does the place currently have the benefit of any Licence Authorising use for Public Entertainment or similar purposes? If so please attach a copy.

<b>Yes</b>	
<b>No</b>	

**5 MARRIAGE/CIVIL PARTNERSHIP ROOM(S)/ LOCATION**

Please describe the primary and other use(s) of the room(s) which is (are) to be used for Marriage/Civil Partnership ceremonies (e.g. Banqueting hall, conference room, garden area, marquee etc.)

Please also state the maximum number of people who are permitted to occupy these room(s) under any fire certificate which applies. (see Guidance Part 3.4)

Room/Location	Primary Use	Max No:

Please ensure there is a separate confidential interview room conveniently located to the Marriage/Civil Partnership room, which is available to the Registrar.

**6 RESPONSIBLE PERSON(S)**

Please give details of the person and his/her deputy who will be responsible and available on the day for arranging and co-ordinating the marriage/civil partnership ceremony and ensuring compliance with requirements and conditions as attached. (see Guidance Part 3.1)

<b>Name:</b>	
<b>Occupation:</b>	
<b>Private Address:</b>	
<b>Date of birth</b>	
<b>Email address</b>	
<b>Telephone No:</b>	
<b>Home/Mobile:</b>	

<b>Name:</b>	
<b>Occupation:</b>	
<b>Private Address:</b>	
<b>Date of birth</b>	
<b>Email address</b>	
<b>Telephone No:</b>	
<b>Home/Mobile:</b>	

**7 ENCLOSURES**

<b>Enclosed with this application are:</b>	<b>Please tick</b>
3 copies of plans of the premises/location showing the Interview and Marriage/Civil Partnership rooms	
Copy of fire certificate (where applicable)	
Copy of Entertainment Licence (where applicable)	
Certificate of Public Liability Insurance	
Application fee of £400 for Civil Marriages and/or Civil Partnerships	

**Please note:-** Cheques should be made payable to **“Belfast City Council”** Applications without payment will not be processed. If payment is rejected the application will be void.)

**8 DECLARATIONS AND SIGNATURE**

1. I apply for the premises identified in Section 1 to be approved for solemnisation for a 3 year period

**(please tick as required)** for civil marriages  and /or civil partnerships.

2. I understand that:

- (a) the place will be inspected for suitability before approval is granted and, if this application is successful may be subject to subsequent inspection during the currency of the Approval.
- (b) the premises must satisfy the City Council on Fire precautions and Health and Safety provisions.
- (c) the Approval, if granted, will be for an inclusive 3 year period subject to revocation, suspension or variation.
- (d) the Approval, if granted, does not guarantee the availability of a Registrar at any particular time.

3. I enclose the documents requested in part 7

4. I declare that:

- (a) I have read and understood “Guidance, Requirements and Conditions for Approved Premises for Civil Marriages/Civil Partnerships”.
- (b) The place has no recent or continuing religious connection.
- (c) I have obtained any necessary permissions regarding use of and access to the premises
- (d) I will publish in a prominent place on / in the premises notice of my application for 21 days.
- (e) When Approval is granted, I will comply at all times with the Conditions attached to the Approval.

Signature of Applicant: .....

Business Title:.....

Name in block capitals:.....

Date:.....

This Form, when completed, should be returned with the Enclosures listed at 7  
to the **Registrar’s Office, City Hall, Belfast BT1 5GS**