*ENTER*

*LOCAL*

*AUTHORITY*

*LOGO*

*HERE*

**Private and confidential**

Licence Holder Name

Address Line 1

Address Line 2

Address Line 3

Address Line 4

Date

Dear (Licence Holder)

**Gambling Act 2005**

**Inspection of:** (Enter premises address)

**Licence Type:** Choose an item.

**Gambling Premises Licence number:** (Enter current and applicable licence number)

**Local Authority Reference number:** (Enter reference number)

I am writing to confirm the findings of the recent complianceassessmentundertaken by a visit to your premises at (address of premises visited) on Enter a date.

The main objective of the assessment was to establish compliance with the three licensing objectives:

* preventing gambling from being a source of crime or disorder, being associated with crime or disorder or being used to support crime
* ensuring that gambling is conducted in a fair and open way
* protecting children and other vulnerable persons from being harmed or exploited by gambling

The aim is to achieve this by ensuring that the licensed activities provided are being carried out in accordance with:

* The conditions attached to the Premises Licence
* The provisions of the Gambling Act 2005
* The social responsibility provisions contained within the Code of Practice
* Our Statement of Principles issued under Section 349 of the Gambling Act 2005 (Enter relevant dates of policy)

The assessmentidentified Choose an item. your attention as summarised below. Failure to take action may result in regulatory action.

Summary of compliance assessmentfindings.

1. Premises Licence Conditions – enter details of issue
2. Premises Licence Conditions attached by the Licensing Authority – enter details of issue
3. Compliance with the Gambling Act 2005 – enter details of the issue
4. Social Responsibility Code Provisions – enter details of issue
5. (Enter Local Authority Name)’s Gambling Act 2005 Statement of Principles – details of issue

*For desk based follow up* – Please provide evidence that remedial action has been taken to address the issue(s) highlighted above by email or letter by Click here to enter a date.

Or

*For inspection follow up* – Please ensure that action is taken to address the issue(s) highlighted above by Click here to enter a date.

I would like to thank you/and/your staff for the assistance provided during the assessment.

Should you have any queries regarding this letter, please contact me on (enter phone number and email address.)

Yours sincerely

(Electronic signature if appropriate)

(Name)

(Job Title)