

# Check your answers before sending your application

## Personal details

### Name

Sarah Philips

[Change](#)

### Date of birth

5 January 1978

[Change](#)

### Address

72 Guild Street  
London  
SE23 6FH

[Change](#)

### Contact details

07700 900457  
sarah.phillips@example.com

[Change](#)

## Application details

### Previous application number

502135326

[Change](#)

### Licence type

For personal use

[Change](#)

### Home address

72 Guild Street  
London  
SE23 6FH

[Change](#)

### Licence period

Valid for 6 months

[Change](#)

## Now send your application

By submitting this application you are confirming that, to the best of your knowledge, the details you are providing are correct.

**OG**

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