

## Certificate of Registration

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This is to certify the following service provider has been registered by the Care Quality Commission under the Health and Social Care Act 2008

Certificate number: CRT1-23499855293  
Certificate date: 05/06/2025  
Provider ID: 1-20633564020

### Section 1

### Service Provider details

**Name of service provider:** Miss Laura Kate Allan

**Address of service provider:** 30 Front Street  
Cleadon  
Sunderland  
SR6 7PG

**Date of Registration:** 05/06/2025

**Signed**



**Sir Julian Hartley**  
Chief Executive

You can email CQC at: [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

You can contact CQC on telephone number: 03000 616161

You can write to CQC at: CQC National Correspondence, Citygate, Gallowgate, Newcastle upon Tyne, NE1 4PA

## Section 2

**Miss Laura Kate Allan** is registered in respect of  
Regulated Activity: **Diagnostic and screening procedures**

For Regulated Activity **Diagnostic and screening procedures** the Nominated Individual  
(where applicable) is:

**N/A**

Conditions of registration that apply to:

**Miss Laura Kate Allan** for **Diagnostic and screening procedures**

1. This Regulated Activity may only be carried on at or from the following locations:

<b>Location Name and address</b>	Cleadon Village Dental Practice 30 Front Street Cleadon Sunderland SR6 7PG
<b>Location ID</b>	1-21724419723
<b>Additional conditions that apply at this location</b>	

**Miss Laura Kate Allan** is registered in respect of  
Regulated Activity: **Surgical procedures**

For Regulated Activity **Surgical procedures** the Nominated Individual (where applicable) is:  
**N/A**

Conditions of registration that apply to:  
**Miss Laura Kate Allan** for **Surgical procedures**

1. This Regulated Activity may only be carried on at or from the following locations:

<b>Location Name and address</b>	Cleadon Village Dental Practice 30 Front Street Cleadon Sunderland SR6 7PG
<b>Location ID</b>	1-21724419723
<b>Additional conditions that apply at this location</b>	

**Miss Laura Kate Allan** is registered in respect of  
Regulated Activity: **Treatment of disease, disorder or injury**

For Regulated Activity **Treatment of disease, disorder or injury** the Nominated Individual  
(where applicable) is:

**N/A**

Conditions of registration that apply to:

**Miss Laura Kate Allan** for **Treatment of disease, disorder or injury**

1. This Regulated Activity may only be carried on at or from the following locations:

<b>Location Name and address</b>	Cleadon Village Dental Practice 30 Front Street Cleadon Sunderland SR6 7PG
<b>Location ID</b>	1-21724419723
<b>Additional conditions that apply at this location</b>	

**End of certificate**