d)

a charity

### Schedule 3

regulation 11

[Insert name and address of relevant licensing authority and its reference number (optional)]

# Application for a provisional statement to be granted under the Licensing Act 2003

|  | PLEASE READ THE FOLLOWING   | NSTR   | UCTIO    | NS FIRST                                   |
|--|---|--------|----------|--|
| defore completing this form please read the guidance notes at the end of the form.  If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary. You may wish to keep a copy of the completed form for your records. |   |        |          |  |
| ا)<br>29 of the<br>premises  | apply for a pro-<br>nsert name(s) of applicant)<br>Licensing Act 2003 for the premises of<br>and I/we are making this application<br>y in accordance with section 12 of the | descri | bed in   | Part 1 below (the<br>ne relevant licensing |
|  | Premises details  |        |          |  |
| Postal ad  | dress of premises or, if none, ordnance survey  | map ı  | referenc | e or description                           |
|  |   |        |          |  |
| Post tow   | n   | Post   | code     | · · · · · · · · · · · · · · · · · · ·      |
| Telephone  | number at premises (if any)   | [      |          |  |
| Non-dome   | stic rateable value of premises   |        | £        |  |
| Part 2 - <i>I</i>  | Applicant details   |        |          |  |
| Please stat  | e whether you are applying for a premises licend  |        | ase tick | <b>√</b> yes                               |
| a) ar  | individual or individuals*  |        |          | please complete section (A)                |
| b) a   | person other than an individual*  |        |          |  |
| i  | . as a limited company  |        |          | please complete section (B)                |
| ii   | as a partnership  |        |          | please complete section (B)                |
| iii  | as an unincorporated association or   |        |          | please complete section (B)                |
| iv   | other (for example a statutory corporation)   |        |          | please complete section (B)                |
| c) a   | recognised club   |        |          | please complete section (B)                |

1

please complete section (B)

Status: This is the original version (as it was originally made).

| e)        | the proprie              | tor of an educational establis  | hment            |           | please complete section (B)           |
|-----------|--------------------------|---|------------------|-----------|---------------------------------------|
| f)        | a health se              | vice body   |                  |           | please complete section (B)           |
| g)        | -                        | ho is registered under Part 2 c<br>ards Act 2000 (c14) in respec<br>at hospital |                  |           | please complete section (B)           |
| h)        | the chief of             | fficer of police of a police force  | e                |           | please complete section (B)           |
| *If you a | are applying             | as a person described in (a) o  | r (b) please con | firm:     | •                                     |
|           |                          |   |                  |           | Please tick 🗡 yes                     |
|           | ■ I am ca                | arrying on or proposing to car  | rv on a busines  |           |                                       |
|           |                          |   | -                |           | · · · · · · · · · · · · · · · · · · · |
|           |                          | involves the use of the premis  |                  | e activit | ies; or                               |
|           | <ul><li>I am m</li></ul> | aking the application pursuar   | nt to a          |           |                                       |
|           | 0                        | statutory function or   |                  |           |                                       |
|           | 0                        | a function discharged by vi   | rtue of Her Maj  | esty's pr | erogative                             |
|           |                          |   | ,                | , ,       | _                                     |
|           |                          |   |                  |           |                                       |
| (A) IND   | IVIDUAL AP               | PLICANTS (fill in as applicabl  | e) .             |           |                                       |
| Mr Surnam | _                        | Mrs Miss  | Ms First nan     | nes       | Other title<br>(for example, Rev)     |
|           |                          |   |                  |           |                                       |
| I am 18   | years old o              | r over  |                  |           | Please tick ves                       |
|           |                          |   |                  |           |                                       |
|           |                          |   |                  |           |                                       |
| Post To   | wn                       | L   | Po:              | stcode    |                                       |
|           |                          |   |                  | г         |                                       |
| Daytim    | e contact te             | lephone number  |                  | Į         |                                       |
| E-mail a  |                          |   |                  |           |                                       |

| SECOND INDIVIDU  | JAL APPLICA                  | ANT (if applicable)  |                      |  |
|--|------------------------------|--|----------------------|--|
| Mr   | Mirs                         | Miss   | Ms                   | Other title<br>(for example, Rev)                              |
| Surname  |                              |  | First names          |  |
|  |                              |  |                      |  |
| I am 18 years old o  | or over                      |  |                      | Please tick Ves  |
| Current postal<br>address if<br>different from<br>premises address |                              |  |                      |  |
| Post Town  |                              |  | Postcode             |  |
| Daytime contact t  | elenhone ni                  | ımher  |                      |  |
|  | etephone no                  | umbei  |                      |  |
| E-mail address<br>(optional)                                       |                              |  |                      |  |
| any registered nur   | me and regis<br>mber. In the | stered address of ap<br>case of a partnersh<br>me and address of e | ip or other joint ve | ere appropriate please give<br>inture (other than a body<br>ed |
| Name   |                              |  |                      |  |
| Address  |                              |  |                      |  |
| Registered number  | (where appl                  | licable)   |                      |  |
|  |                              |  |                      |  |
| Description of appl  | icant (for ex                | ample partnership, c   | ompany, unincorpo    | rated association)   |
| Telephone number   | (if any)                     |  |                      |  |
| E-mail address (opt  | tional)                      |  |                      |  |

| What is the nature of your interest in the premises?  |                            |  |  |  |
|---|----------------------------|--|--|--|
|   |                            |  |  |  |
| * -   |                            |  |  |  |
|   |                            |  |  |  |
|   |                            |  |  |  |
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|   |                            |  |  |  |
|   |                            |  |  |  |
| Part 3 – Schedule of works  |                            |  |  |  |
| Is the premises   | Please tick 🗸 yes          |  |  |  |
| <ul> <li>about to be constructed</li> </ul>   |                            |  |  |  |
| <ul> <li>being extended or altered</li> </ul>   |                            |  |  |  |
|   |                            |  |  |  |
| Please give details of the work and please attach plans of the work be done at the premises | ing done or about to be    |  |  |  |
|   |                            |  |  |  |
|   |                            |  |  |  |
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|   |                            |  |  |  |
| Please give particulars of the premises to which the application relates                    | (please read guidance note |  |  |  |
| 1)  |                            |  |  |  |
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| Which licensable | e activities will the premises be used for?                                     |               |       |
|------------------|---|---------------|-------|
|                  |   | Please tick * | yes ' |
| Provision of reg | <u>rulated entertainment</u>  |               |       |
| a)               | plays (optional, fill in box A)   |               |       |
| ь)               | films (optional, fill in box B)   |               |       |
| c)               | indoor sporting events (optional, fill in box C)                                |               |       |
| d)               | boxing or wrestling entertainment (optional, fill in box D)                     |               |       |
| e)               | live music (optional, fill in box E)  |               |       |
| f)               | recorded music (optional, fill in box F)  |               |       |
| g)               | performances of dance (optional, fill in box G)                                 |               |       |
| h)               | anything of a similar description to that falling within (e), (f)               | or (g)        |       |
|                  | (optional, fill in box H)   |               |       |
| Provision of en  | tertainment facilities for:   |               |       |
| i)               | making music (optional, fill in box I)  |               |       |
| j)               | dancing (optional, fill in box J)   |               |       |
| k)               | entertainment of a similar description to that falling within (i) ${}^{\prime}$ | ) or (j)      |       |
|                  | (optional, fill in box K)   |               |       |
| Provision of lat | e night refreshment (optional, fill in box L)                                   |               |       |
| Supply of alcoh  | ol (optional, fill in box M)  |               |       |
| Complete boxe    | s N, O and P (optional)   |               |       |

|  | eral descripti                 | on of premises                      | s (please read guidance note1)  |          |   |
|--|--------------------------------|-------------------------------------|---|----------|---|
|  | at descripti                   | on or premise:                      | S (Prease read Baidance Hote I)   |          |   |
|  |                                |                                     |   |          |   |
|  |                                |                                     |   |          |   |
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|  |                                |                                     |   |          |   |
|  |                                |                                     |   |          | - |
| A                                      |                                |                                     |   |          | - |
| Play                                   | s                              |                                     | Will the performance of a play take place   | Indoors  |   |
| Play:<br>Stand                         | lard days and                  | d timings                           | indoors or outdoors or both – please tick [ ✓ ]   |          |   |
| Play:<br>Stand<br>(pleas               | dard days and<br>se read guida | ance note 6)                        | Will the performance of a play take place indoors or outdoors or both − please tick [ ✓ ] (please read guidance note 2) | Outdoors |   |
| Play:<br>Stand<br>(pleas<br>Day        | lard days and                  | d timings<br>ance note 6)<br>Finish | indoors or outdoors or both – please tick [ ✓ ] (please read guidance note 2)   | Outdoors |   |
| Play:<br>Stand<br>(pleas               | dard days and<br>se read guida | ance note 6)                        | indoors or outdoors or both – please tick [ ✓ ]   | Outdoors |   |
| Plays<br>Stand<br>(pleas<br>Day<br>Mon | dard days and<br>se read guida | ance note 6)                        | indoors or outdoors or both – please tick [ ✓ ] (please read guidance note 2)   | Outdoors |   |
| Play:<br>Stand<br>(pleas<br>Day        | dard days and<br>se read guida | ance note 6)                        | indoors or outdoors or both – please tick [ ✓ ] (please read guidance note 2)   | Outdoors |   |

Wed

Thur

Sat

Sun

guidance note 4)

State any seasonal variations for performing plays (please read

Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list (please read guidance note

### В

| Films Standard days and timings (please read guidance note 6) Day Start Finish |       |         | Will the exhibition of films take place indoors or outdoors or both – please tick [ ] (please read guidance note 2)                           | Outdoors  Both        |
|--|-------|---------|---|-----------------------|
| Day  | Start | FILIISH |   |                       |
| Mon  |       |         | Please give further details here (please read   | guidance note 3)      |
| Tue  |       |         |   |                       |
| Wed  |       |         | State any seasonal variations for the exhibited read guidance note 4)   | tion of films (please |
| Thur   |       |         |   |                       |
| Fri  |       |         | Non standard timings. Where you intend to<br>for the exhibition of films at different times<br>the column on the left, please list (please re | s to those listed in  |
| Sat  |       |         |   |                       |
| Sun  |       |         |   |                       |

#### C

| Indoor sporting events Standard days and timings (please read guidance note 6) |       | nd timings | Please give further details (please read guidance note 3)   |
|--|-------|------------|---|
| Mon  | Start | FINISN     |   |
| Tue  |       |            | State any seasonal variations for indoor sporting events (please read guidance note 4)  |
| Wed  |       |            |   |
| Thur   |       |            | Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list (please read guidance note 5) |
| Fri  |       |            |   |
| Sat  |       |            |   |
| Sun  |       |            |   |

### D

| Boxing or wrestling<br>entertainments<br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the boxing or wrestling entertainment take place indoors or outdoors or both − please tick [ ✓ ] (please read guidance note 2)      | Indoors Outdoors |
|---|-------|--------|--|------------------|
| Day   | Start | Finish |  | Both             |
| Mon   |       |        | Please give further details here (please read g  | uidance note 3)  |
| Tue   |       |        |  |                  |
| Wed   |       |        | State any seasonal variations for boxing or w entertainment (please read guidance note 4)  | restling         |
| Thur  |       |        |  |                  |
| Fri   |       |        | Non standard timings. Where you intend to for boxing or wrestling entertainment at differ those listed in the column on the left, please | erent times to   |
| Sat   |       |        | guidance note 5)   |                  |
| Sun   |       |        |  |                  |

# Έ

| Live music<br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the performance of live music take place indoors or outdoors or both – please tick [ ✓ ] (please read guidance note 2)                | Indoors<br>Outdoors |
|--|-------|--------|--|---------------------|
| Day  | Start | Finish |  | Both                |
| Mon  |       |        | Please give further details here (please read gr   | uidance note 3)     |
| Tue  |       |        |  |                     |
| Wed  |       |        | State any seasonal variations for the perform music (please read guidance note 4)  | ance of live        |
| Thur   |       |        |  |                     |
| Fri  |       |        | Non standard timings. Where you intend to for the performance of live music at different listed in the column on the left, please list (pl | times to those      |
| Sat  |       |        | guidance note 5)   |                     |

| Sun  |                          |             |  |  |                   |         |
|--|--------------------------|-------------|--|--|-------------------|---------|
|  |                          |             |  |  |                   |         |
| F  |                          | _           |  |  |                   |         |
|  | rded mu                  |             |  | Will the playing of recorded music take<br>place indoors or outdoors or both – please  | Indoors           |         |
| Standard days and timings<br>(please read guidance note 6) |                          |             | tick [ ] (please read guidance note 2) | Outdoors   |                   |         |
| Day  | Start                    |             | Finish                                 |  | Both              |         |
| Mon  |                          |             |  | Please give further details here (please read  | guidance note 3)  |         |
| Tue  |                          |             |  | -  |                   |         |
| Wed  |                          | _           |  | State any seasonal variations for the playing (please read guidance note 4)  | g of recorded m   | usic    |
| Thur   |                          |             |  |  |                   |         |
| Fri  |                          |             |  | Non standard timings. Where you intend to<br>for the playing of recorded music at different<br>listed in the column on the left, please list (<br>guidance note 5) | nt times to those | es<br>e |
| Sat  |                          |             |  |  |                   |         |
| Sun  |                          |             |  |  |                   |         |
| G  |                          |             |  |  |                   |         |
|  |                          |             | of dance                               | Will the performance of dance take place   | Indoors           |         |
| Standa<br>(pleas   | ard days a<br>e read gui | ind<br>idar | timings<br>nce note 6)                 | indoors or outdoors or both – please tick  [▼] (please read guidance note 2)   | Outdoors          |         |
| Day  | Start                    | Fi          | nish                                   |  | Both              |         |
| Mon  |                          |             |  | Please give further details here (please read  | guidance note 3)  |         |
| Tue  |                          |             |  |  | -                 |         |
| Wed  |                          |             |  | State any seasonal variations for the perform (please read guidance note 4)  | rmance of dance   | !       |
| Thur   |                          |             |  |  |                   |         |

| Fri |  | Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list (please read guidance note |
|-----|--|--|
| Sat |  | 5)   |
|     |  |  |
| l   |  |  |
|     |  |  |
| Sun |  |  |
| l   |  |  |
| l   |  |  |

### H

| Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6) |       | that<br>e), (f) or<br>timings | Please give a description of the type of entertain be providing  | inment you will |  |
|--|-------|-------------------------------|--|-----------------|--|
| Day  | Start | Finish                        | Will this entertainment take place indoors or outdoors or both – please tick [ ~ ] (please read guidance note 2)   | Outdoors        |  |
| Mon  |       |                               | 1866 27  | Both            |  |
| Tue  |       |                               | Please give further details here (please read guidance note 3)   |                 |  |
| Wed  |       |                               |  |                 |  |
| Thur   |       |                               | State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)  |                 |  |
| Fri  |       |                               |  |                 |  |
| Sat  |       |                               | Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list (please read guidance note 5) |                 |  |
| Sun  |       |                               | Column on the tert, please list (please lead guide   | ince note 3j    |  |

| Provision of facilities<br>for making music<br>Standard days and timings<br>(please read guidance note 6) |                              | sic<br>timings | Please give a description of the facilities for will be providing   |                   | you  |
|---|------------------------------|----------------|---|-------------------|------|
|   |                              |                | Will the facilities for making music be indoors or outdoors   | Indoors           |      |
| <u> </u>  |                              |                | or both – please tick [ ] (please read  | Outdoors          |      |
| Day   | Start                        | Finish         | guidance note 2)  | Both              |      |
| Mon   |                              |                | Please give further details here (please read   | guidance note :   | 3)   |
| Tue   |                              |                |   |                   |      |
| Wed   |                              |                | State any seasonal variations for the provis making music (please read guidance note 4)   | ion of facilities | for  |
| Thur  |                              |                |   |                   |      |
| Fri   |                              |                | Non standard timings. Where you intend to for provision of facilities for making music to those listed in the column on the left, ple read guidance note 5) | at different tim  | ies  |
| Sat   |                              |                |   |                   |      |
| Sun   |                              |                |   |                   |      |
| Т   |                              |                |   |                   |      |
| Provi   | ision of fa                  | cilities       | Will the facilities for dancing be indoors or   | Indoors           |      |
|   | ancing                       |                | outdoors or both – please tick [ * ] (see   | Outdoors          |      |
| Stand   | ard days and<br>e read guida | timings        | guidance note 2)  | Outdoors          |      |
| (pieas  | e read guida                 | nce note of    |   | Both              |      |
| Day Start Finish  |                              | Finish         | Please give a description of the facilities for be providing  | dancing you w     | vill |
| Mon   |                              |                | Please give further details here (please read guidance note 3)  |                   | 3)   |
|   |                              |                |   |                   |      |
| Tue   |                              |                |   |                   |      |

| Wed  | -    | State any seasonal variations for providing dancing facilities (please read guidance note 4)  |
|------|------|---|
| Thur |      |   |
| Fri  |      | Non standard timings. Where you intend to use the premises for the provision of facilities for dancing at different times to those listed in the column on the left, please list (please read |
| Sat  |      | guidance note 5)  |
| Sun  | <br> |   |

# ĸ

| Provision of facilities for entertainment of a similar description to that falling within i or j Standard days and timings (please read guidance note 6)  Day Start Finish |   |  | Please give a description of the type of entertai you will be providing  Will the entertainment facility be indoors or outdoors   | Indoor  |
|--|---|--|---|---------|
| Mon  |   |  | or both – please tick [ ▼ ] (please read guidance note 2)   | Outdoor |
| Tue  |   |  | Please give further details here (please read guidance note 3)  |         |
| Wed  |   |  |   |         |
| Thur   |   |  | State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or i (please read guidance note 4)  |         |
| Fri  |   |  |   |         |
| Sat  | - |  | Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within i or j at different times to those listed in the column on the left, please list (please read guidance note 5) |         |
| Sun  |   |  |   |         |

#### L

| Late night refreshment<br>Standard days and timings |       |        | Will the provision of late night refreshment take place indoors or   | Indoors             |  |
|---|-------|--------|--|---------------------|--|
| (please read guidance note 6)                       |       |        | outdoors or both - please tick [ ✓ ] (please   | Outdoors            |  |
| Day   | Start | Finish | read guidance note 2)  | Both                |  |
| Mon   |       |        | Please give further details here (please read  | guidance note 3)    |  |
| Tue   |       |        |  | •                   |  |
| Wed   |       |        | State any seasonal variations for the provision of late night refreshment (please read guidance note 4)                                    |                     |  |
| Thur  | -     |        |  |                     |  |
| Fri   |       |        | Non standard timings. Where you intend to<br>for the provision of late night refreshment<br>to those listed in the column on the left, plo | at different times, |  |
| Sat   |       |        | read guidance note 5)  |                     |  |
| Sun   |       |        |  |                     |  |

# м

| Supply of alcohol<br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the supply of alcohol be<br>for consumption<br>(Please tick box ♥) (please  | On the premises Off the premises |  |
|---|-------|--------|--|----------------------------------|--|
| Day   | Start | Finish | read guidance note 7)  | Both                             |  |
| Mon   |       |        | State any seasonal variations for the supply of alcohol (plea read guidance note 4)  |                                  |  |
| Tue   |       |        |  |                                  |  |
| Wed   |       |        |  |                                  |  |
| Thur  |       |        | Non-standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 5) |                                  |  |
| Fri   |       |        |  |                                  |  |
| Sat   |       |        |  |                                  |  |
| Sun   |       |        |  |                                  |  |

| Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8) |  |  |  |  |  |
|--|--|--|--|--|--|
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|--------------------------|---|--------|--|
| Hours premises are       |   |        | State any seasonal variation (please read guidance note 4)   |
| open to the public       |   |        |  |
| Standard timings (please |   |        |  |
| read guidance note 6)    |   |        |  |
| Day                      | Start                                   | Finish |  |
| Mon                      |   |        |  |
|                          |   |        |  |
| l                        | *************************************** |        |  |
| l                        |   |        |  |
| Tue                      |   |        |  |
|                          |   |        | ·  |
| l                        |   |        |  |
| l                        |   |        |  |
| Wed                      |   |        |  |
| l                        |   |        |  |
| l                        |   |        | Non-standard timings. Whose you intend the assession to be seen  |
| l                        |   |        | Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on |
| Thur                     |   |        | the left, please list. (please read guidance note 5)   |
|                          |   |        | the tert, prease tist. (prease read guidance note 3)   |
|                          |   |        | •  |
| l                        |   |        |  |
| Fri                      |   |        |  |
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| 1                        |   |        |  |
| l                        |   |        |  |
| Sat                      |   |        |  |
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| l                        |   |        |  |
|                          |   |        |  |
| Sun                      |   |        |  |
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| I                        |   |        |  |
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|                          |   |        |  |

| P   |  |
|---|--|
| Describe the steps you intend to take to promote the four licensing objectives:  a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9) |  |
| a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)  |  |
|   |  |
|   |  |
|   |  |
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|   |  |
| b) The prevention of crime and disorder   |  |
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|   |  |
| c) Public safety  |  |
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| d) The prevention of public nuisance  |  |
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| e) The protection of children from harm   |  |
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Status: This is the original version (as it was originally made).

| Please tick ✓  I have made or enclosed payment of the fee I have enclosed the plans of the works to be done at the premises I have sent copies of this application and the plan to responsible authorities and others where applicable I understand that I must now advertise my application I understand that if I do not comply with the above requirements my application will be rejected | yes         |
|---|-------------|
| IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON TH<br>STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO M<br>A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION   |             |
| Part 5 – Signatures (please read guidance note 10)  |             |
| Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance no 11). If signing on behalf of the applicant please state in what capacity.   | ote         |
| Signature   |             |
| Date  |             |
| Capacity  |             |
| For joint applications signature of 2 <sup>nd</sup> applicant or 2 <sup>nd</sup> applicant's solicitor or other authorise agent (please read guidance note12). If signing on behalf of the applicant please state in what capacity.  Signature  |             |
| Date  |             |
| Capacity  |             |
|   |             |
| Contact name (where not previously given) and postal address for correspondence associate with this application (please read guidance note 13)  | ted         |
| Post town Post code   | $\dashv$    |
| Telephone number (if any)   | $\neg \neg$ |
| If you would prefer us to correspond with you by e-mail your e-mail address (optional)  |             |

#### Notes for Guidance

- Describe the premises. For example the type of premises, its general situation and layout and
  any other information which could be relevant to the licensing objectives. Where you are
  completing Part 4 and your application includes off-supplies of alcohol and you intend to
  provide a place for consumption of these off- supplies you must include a description of
  where the place will be and its proximity to the premises.
- Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
- For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
- For example (but not exclusively), where the activity will occur on additional days during the summer months.
- For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
- Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
- If you wish people to be able to consume alcohol on the premises please tick on, if you wish
  people to be able to purchase alcohol to consume away from the premises please tick off. If
  you wish people to be able to do both please tick both.
- Please give information about anything intended to occur at the premises or ancillary to the
  use of the premises which may give rise to concern in respect of children regardless of
  whether you intend children to have access to the premises, for example (but not
  exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming
  machines.
- Please list here steps you will take to promote all four licensing objectives together.
- The application form must be signed.
- An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- Where there is more than one applicant, both applicants or their respective agents must sign the application form.
- 13. This is the address which we shall use to correspond with you about this application.