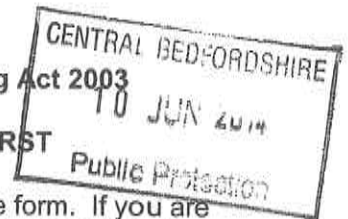




CENTRAL BEDFORDSHIRE COUNCIL

Application to vary a premises licence under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST



Before 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.

I/We MRS. THERESA JACKSON

(Insert name(s) of applicant)

being the premises licence holder, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number	2000001
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Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description			
THE VICARS INN 68 CHURCH LANE CHURCH END ARLESEY BEDS			
Post town	ARLESEY	Postcode	SG15 6UX

Telephone number at premises (if any)	01462 731215
Non-domestic rateable value of premises	£ RATE BILL ATTACHED

Part 2 – Applicant details

Daytime contact telephone number	01462 731215
E-mail address (optional)	

Current postal address if different from premises address			
Post town		Postcode	

Part 3 - Variation

Please tick as appropriate

Do you want the proposed variation to have effect as soon as possible? Yes No

If not, from what date do you want the variation to take effect?

DD	MM	YYYY

Please describe briefly the nature of the proposed variation (Please see guidance note 1)

PUBLIC HOUSE CONSISTING OF
 2 BARS (PUBLIC + LOUNGE)
 LOUNGE BAR LEADING TO BEER
 GARDEN VIA 2metre PATH. CONSISTING
 OF DECKING AND GRASS AREA.

If your proposed variation would mean that 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend:

Part 4 Operating Schedule

Please complete those parts of the Operating Schedule below which would be subject to change if this application to vary is successful.

Provision of regulated entertainment

Please tick all that apply

- a) plays (if ticking yes, fill in box A)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)
- f) recorded music (if ticking yes, fill in box F)
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)

Provision of late night refreshment (if ticking yes, fill in box I)

Sale by retail of alcohol (if ticking yes, fill in box J)

In all cases complete boxes K, L and M

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	12:00	24:00	Please give further details here (please read guidance note 3) BACK GROUND MUSIC	Both	<input type="checkbox"/>
Tue	12:00	24:00			
Wed	12:00	24:00	State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur	12:00	24:00			
Fri	12:00	24:00	Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat	12:00	24:00			
Sun	12:00	24:00			

1

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon	12.00	24.00			
Tue	12.00	24.00			
Wed	12.00	24.00	State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Thur	12.00	24.00			
Fri	12.00	24.00			
Sat	12.00	24.00	Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list (please read guidance note 5)		
Sun	12.00	24.00			

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)	On the premises	<input type="checkbox"/>
Day	Start	Finish		Off the premises	<input type="checkbox"/>
Mon	12.00	26.00	State any seasonal variations for the supply of alcohol (please read guidance note 4)	Both	<input checked="" type="checkbox"/>
Tue	12.00	26.00			
Wed	12.00	26.00			
Thur	12.00	26.00	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	12.00	26.00			
Sat	12.00	26.00			
Sun	12.00	26.00			

K

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).

NONE

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	12.00	24.00	NONE
Tue	12.00	24.00	
Wed	12.00	24.00	
Thur	12.00	24.00	
Fri	12.00	24.00	NONE
Sat	12.00	24.00	
Sun	12.00	24.00	

Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 5)

Please identify those conditions currently imposed on the licence which you believe could be removed as a consequence of the proposed variation you are seeking.

NONE

M

Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

a) General – all four licensing objectives (b, c, d and e) (please read guidance note 9)

SEE BELOW b, c, d + e

b) The prevention of crime and disorder

WE HAVE NEVER SUFFERED CRIME OR DISORDER IN PAST FOURTEEN YEARS AS ALL OUR CUSTOMERS ARE KNOWN TO ME IN THE VILLAGE.

c) Public safety

I TRAIN ALL STAFF TO EVACUATE LOUNGE BAR CUSTOMERS DIRECTLY TO EXIT INTO GARDEN AND PUBLIC BAR CUSTOMERS TO EXIT THROUGH FRONT DOOR, OR SIDE DOOR TO THE SAFETY OF REAR OF GARDEN AND REAR OF CAR PARK.

d) The prevention of public nuisance

SIGNS ARE IN PLACE ASKING ALL PATRONS TO LEAVE QUIETLY.
I OFFER TO CALL TAXIES FOR PEOPLE AND HAVE TAXI CARDS TO OFFER CUSTOMERS FOR SPEEDY COLLECTION FROM PREMISES.

e) The protection of children from harm

I WILL ALWAYS MONITOR AGE OF CUSTOMERS. ANYONE APPEARING TO LOOK YOUNGER THAN 21 WILL BE ASKED TO SUPPLY SUITABLE PROOF OF AGE AND I.D. SUCH AS PASSPORT OR DRIVING LICENCE. ANYONE UNDER 18 MUST BE SUPERVISED AND ACCOMPANIED BY AN ADULT OVER 21.

2190

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee; or I have not made or enclosed payment of the fee because this application has been made in relation to the introduction of the late night levy.
- 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 have enclosed the premises licence or relevant part of it or explanation.
- I understand that if I do not comply with the above requirements my application will be rejected.

IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION.

Part 5 – Signatures (please read guidance note 10)

Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (please read guidance note 11). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	21/05/14.
Capacity	SOLE PROPRIETOR.

Where the premises licence is jointly held, signature of 2nd applicant (the current premises licence holder) or 2nd applicant's solicitor or other authorised agent (please read guidance note 12). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	
Capacity	

Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 13)

Post town		Post code	
Telephone number (if any)			