

Temporary Event Notice

tral Bedfordshire Council

0 4 JUN 2015

Public Protection

Personal Details

Temporary Event Notice

You should keep a copy of the completed notice for your records. We will forward copies to the Police Licensing Officer on behalf of the Chief of Police and to the Environmental Health Team. The Licensing Authority will provide written acknowledgement of the notice.

Before completing this application, please ensure you have a card that you can use to make the necessary online payment. We accept most major credit or debit cards (not Diners Card or American Express). Please note: Credit Card payments will incur a surcharge of 1.8%. If you pay by debit card there will be no surcharge. You will automatically be redirected to our payments system once you submit your completed form to pay.

4/7/15 HQ Sports Bar.

	hereby give notice under section 100 of the Licensing Act 2003 of my y activity at the premises described below.
Please read note 1)	,,
Title:	Mr
orename:	Jamie
Surname:	Head
Previous names (if relevant) pl	ease enter details of any previous names or maiden names.
Title:	
Forename:	
Surname:	
Your date of birth:	22/09/1994
Your place of birth:	
National Insurance Number:	
Your current address: (We will use this address to concelow)	rrespond with you unless you complete the separate correspondence bo
Address:	
Post code:	
Post town:	H)
Other contact details:	
Daytime telephone number:	
Evening (optional):	
Mobile (optional):	
ax number (optional):	
E-Mail Address (if available):	
Alternative address for corres (If you complete the details belo	spondence: ow, we will use this address to correspond with you)
Address:	
Post code:	
Post town:	
ä	R C R
Alternative contact details (if a	Land Land

SER 12 12 12 12 12 12 12 12 12 12 12 12 12	
Evening (optional):	
Mobile (optional):	
Fax number (optional):	
E-Mail Address (if available):	
e premises	
Please give the address of the premises where you intend to carry on the licensable activities or if it has no address give a detailed description (including the Ordnance Survey references): (Please read note 2)	HQ Sports Bar Grove Park Court Drive LU5 4GP
Does a premises licence or club premises certificate have effect in relation to the premises (or any part of the premises)?	Yes
If so, please enter the licence or	r certificate number below.
MANAGER OF WELL I	
Premises licence number: Club premises certificate number:	
Club premises certificate	Looking to use an extended outside area, using only one entrance are one exit for the whole venue.
Club premises certificate number: If you intend to use only part of the premises at this address or intend to restrict the area to which this notice applies, please give a description:	Looking to use an extended outside area, using only one entrance are one exit for the whole venue. Public house

3. T	he licensable activities	
	Please state the licensable activ	rities that you intend to carry on at the premises:
	The sale by retail of alcohol:	
	The supply of alcohol by or on behalf of a club to, or to the order of, a member of the club:	
	The provision of regulated entertainment:	
	The provision of late night refreshment:	
	Are you giving a late temporary event notice? (Please read note 7)	
	Please state the dates on which you intend to intend to use these premises for licensable activities: (Please read note 8)	Saturday July 4th
	Please state the times during the event period that you propose to carry on licensable activities (please give times in 24 hour clock): (Please read note 9)	10:00 - 00:00
	Please state the maximum number of people at any one time that you intend to allow to be present at the premises during the times when you intend to carry on licensable activities, including any staff, organisers or performers: (Please read note 10)	400
	If the licensable activities will include the supply of alcohol, please state whether the supplies will be for consumption on or off the premises, or both: (Please read note 11)	Both

4. Personal licence holders	
Do you currently hold a valid personal licence?	Yes
If "Yes", please provide the det	ails of your personal licence below.
Issuing licensing authority:	Central Bedfordshire
Licence number:	14/019041
Date of issue:	07/04/2014
Date of expiry:	10/04/2024
Any further relevant details:	None.
5. Previous temporary event notice	es you have given
(Please read note 13)	
Have you previously given a temporary event notice in respect of any premises for events falling in the same calendar year as the event for which you are now giving this temporary event notice?	Yes
If answering yes, please state the number of temporary event notices you have given for events in that same calendar year	1
Have you already given a temp	orary event notice for the same premises in which the event period:
a) ends 24 hours or less before; or	No
b) begins 24 hours or less after the event period proposed in this notice?	No
6. Associates and business collea	gues
(Please read note 14)	
Has any associate of yours given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice?	No

Has any associate of yours alreat event period:	ady given a temporary event notice for the same premises in which the
a) ends 24 hours or less before; or	No
b) begins 24 hours or less after the event period proposed in this notice?	No
Has any person with whom you are in business carrying on licensable activities given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice:	No
Has any person with whom you event notice for the same premise	are in business carrying on licensable activities already given a temporary ses in which the event period:
a) ends 24 hours or less before; or	No
b) begins 24 hours or less after the event period proposed in this notice?	No

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Payment details

Please add your details (the person making the payment) below. You will automatically be redirected to our payments system once you submit your completed form to pay the fee of £21.00.

We accept most major credit or debit cards (not Diners Card or American Express). Please note: Credit Card payments will incur a surcharge of 1.8%. If you pay by debit card there will be no surcharge.

Title	Mr
Forenames	Jamie
Surname	Head
Address Line 1	
Address Line 2	
Address Line 3	
Town	
County	
Post Code	
Telephone	
Email Address	
Description of what payment is being paid for	Temporary Event Notice
Amount to pay	21.00
Account Ref (if have one)	
Payment Form Type	
Payment Product	

7. Checklist (Please read note 15) Ishall Send a copy of this notice to X the chief officer of police for the area in which the premises are situated (Chief Officer of Police, C/o Nev Johnson, County Police Office, West Street, Dunstable, Beds LU6 1SJ) If the premises are situated ∇ in one or more licensing authority areas, send at least one copy of this notice to each additional licensing authority If the premises are situated Ø in one or more police areas, send a copy of this notice to each additional chief officer of police If the premises are situated Ø in one or more local authority areas, send a copy of this notice to each additional local authority exercising environmental health functions: Make payment of the fee for \boxtimes the application (£21.00) Sign the declaration in X Section 9 8. Condition (Please read note 16)

It is a condition of this temporary event notice that where the relevant licensable activities described in Section 3 above include the supply of alcohol that all such supplies are made by or under the authority of

the premises user.

eclarations	
(Please read note 17)	
The information contained in t	his form is correct to the best of my knowledge and belief.
and that a person is li scale; and 2. to permit an unauthor	ssly make a false statement in connection with this temporary event notice able on conviction for such an offence to a fine up to level 5 on the standard ised licensable activity to be carried on at any place and that a person is r any such offence to a fine not exceeding £20,000, or to imprisonment for a
Please confirm you have read and understand the above declarations	
Name of Person:	Jamie Head

If you have provided an email address, then the acknowledgement letter will be sent to the email address given. Please print a copy for your own records before submitting.

04/06/2015

Date: