

Guildford Application for a premises licence Licensing Act 2003

* required information

ed in when you resume. s is the unique reference for this plication generated by the system.
a can put what you want here to help you ck applications if you make lots of them. It bassed to the authority.
t "no" if you are applying on your own half or on behalf of a business you own or
rk for.
lude country code.
ole trader is a business owned by one
son without any special legal structure. plying as an individual means you are olying so you can be employed, or for ne other personal reason, such as owing a hobby.

Continued from previous page		
Your Address		Address official correspondence should be
* Building number or name	24	sent to.
* Street	ashbury drive	
District		
* City or town	reading	
County or administrative area		
* Postcode	rg315lj	
* Country	United Kingdom	
Section 2 of 19		
PREMISES DETAILS		
	ply for a premises licence under section 17 of the premises) and I/we are making this applicat of the Licensing Act 2003.	
Premises Address		
Are you able to provide a posta	al address, OS map reference or description of t	he premises?
○ Address ○ OS ma	preference Description 	

Address Description

university of guildford, egerto there are 5 exits on the round	ut layby. the roundabout is join by the exit of the A3 road southbound, the entry to the in road, the chase and the entrance to Guildford Cathedral. about is north bound, and just left of the entrance to the university of guildford.
Further Details	
Telephone number	
Non-domestic rateable value of premises (£)	0

	Section 3 of 19			
APPL	ICATION DETAILS			
In wh	hat capacity are you apply	ing for the premises licence?		
	An individual or individuals			
	A limited company			
	A partnership			
	An unincorporated assoc	ciation		
	A recognised club			
	A charity			
	The proprietor of an edu	cational establishment		
	A health service body			
		ed under part 2 of the Care Standards Act an independent hospital in Wales		
	Social Care Act 2008 in re	ed under Chapter 2 of Part 1 of the Health and espect of the carrying on of a regulated ning of that Part) in an independent hospital in		
	The chief officer of police	e of a police force in England and Wales		
	Other (for example a stat	tutory corporation)		
Cont	firm The Following			
\square	l am carrying on or prope the use of the premises f	osing to carry on a business which involves for licensable activities		
	I am making the applicat	tion pursuant to a statutory function		
	I am making the application pursuant to a function discharged by virtue of Her Majesty's prerogative			
Secti	on 4 of 19			
INDI	VIDUAL APPLICANT DET	AILS		
1	licant Name e name the same as (or sir	nilar to) the details given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as required	
•	Yes	⊖ No	Select "No" to enter a completely new set of details.	
First	name	jamie		
Fami	ily name	Кос		
Is the	Is the applicant 18 years of age or older?			

• Yes

🔿 No

Continued from previous page		
Applicant Postal Address		
Is the address the same as (or s	similar to) the address given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as
• Yes	○ No	required. Select "No" to enter a completely new set of details.
Building number or name	24	
Street	ashbury drive	
District		
City or town	reading	
County or administrative area		
Postcode	rg315lj	
Country	United Kingdom	
Applicant Contact Details		
Are the contact details the sam	ne as (or similar to) those given in section one	? If "Yes" is selected you can re-use the details from section one, or amend them as
• Yes	⊖ No	required. Select "No" to enter a completely new set of details.
E-mail		
Telephone number		
Other telephone number		
	Add another applicant	
Section 5 of 19		
OPERATING SCHEDULE		
When do you want the premises licence to start?	05 / 09 / 2015 dd mm yyyy	
If you wish the licence to be valid only for a limited period, when do you want it to end	dd mm yyyy	
Provide a general description of	of the premises	
licensing objectives. Where yo	ises, its general situation and layout and any o our application includes off-supplies of alcohol plies you must include a description of where	
late night refreshment mobile catering van		

Continued from previous page	
If 5,000 or more people are	
expected to attend the premises at any one time,	
state the number expected to	
attend	
Section 6 of 19	
PROVISION OF PLAYS	
Will you be providing plays?	
·	● No
Section 7 of 19	
PROVISION OF FILMS	
Will you be providing films?	
⊖ Yes (No
Section 8 of 19	
PROVISION OF INDOOR SPORT	FING EVENTS
Will you be providing indoor sp	orting events?
⊖ Yes (No
Section 9 of 19	
PROVISION OF BOXING OR WR	ESTLING ENTERTAINMENTS
Will you be providing boxing or	wrestling entertainments?
⊖ Yes (● No
Section 10 of 19	
PROVISION OF LIVE MUSIC	
Will you be providing live music	?
⊖ Yes (No
Section 11 of 19	
PROVISION OF RECORDED MU	SIC
Will you be providing recorded	music?
⊖ Yes (No
Section 12 of 19	
PROVISION OF PERFORMANCE	ES OF DANCE
Will you be providing performation	nces of dance?
⊖ Yes (No
Section 13 of 19	
PROVISION OF ANYTHING OF	A SIMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF
Will you be providing anything performances of dance?	similar to live music, recorded music or
	No

Continued from previous	page					
Section 14 of 19						
LATE NIGHT REFRESHI						
Will you be providing la	ate night	refreshment?				
• Yes	C) No				
Standard Days And Ti	mings					
MONDAY						Cive timings in 24 hour clock
	Start 2	23:00		End	03:00	Give timings in 24 hour clock. (e.g., 16:00) and only give details for the days
	Start			End		of the week when you intend the premises to be used for the activity.
				LIIG		to be used for the activity.
TUESDAY	г					
	Start 2	23:00		End	03:00	
	Start			End		
WEDNESDAY						
	Start 2	23:00		End	03:00	
	Start			End		
				LIIG		
THURSDAY	г					
	Start 2	23:00		End	03:00	
	Start			End		
FRIDAY						
	Start 2	23:00		End	04:00	
	Start			End		
				LIIG		
SATURDAY	г					
	Start 2	23:00		End	04:00	
	Start			End		
SUNDAY						
	Start 2	23:00		End	01:00	
	Start			End		
	L					
Will the provision of lat both?	e night re	efreshment take	place indo	ors or o	outdoors or	
	(Outdoors	0	Both		Where taking place in a building or other structure tick as appropriate. Indoors may include a tent.
State type of activity to exclusively) whether or						urther details, for example (but not
sell of burger's and keb						

Continued from previous page...

State any seasonal variations

For example (but not exclusively) where the activity will occur on additional days during the summer months.

Non-standard timings. Where the premises will be used for the supply of late night refreshments at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

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SUPPLY OF ALCOHOL

Will you be selling or supplying alcohol?

⊖ Yes

PROPOSED DESIGNATED PREMISES SUPERVISOR CONSENT

How will the consent form of the proposed designated premises supervisor be supplied to the authority?

• Electronically, by the proposed designated premises supervisor

No

○ As an attachment to this application

Reference number for consent	If the consent form is already submitted, ask
form (if known)	the proposed designated premises
	supervisor for its 'system reference' or 'your
	reference'.

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ADULT ENTERTAINMENT

Highlight any adult entertainment or services, activities, or other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children

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 etc gambling machines etc.

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HOURS PREMISES ARE OPEN TO THE PUBLIC

<u> </u>		
Continued from previous		
Standard Days And Ti	imings	
MONDAY		Give timings in 24 hour clock.
	Start 18:00	End 03:00 (e.g., 16:00) and only give details for the day of the week when you intend the premises
	Start	End to be used for the activity.
TUESDAY		
	Start 18:00	End 03:00
	Start	End
WEDNESDAY		
	Start 18:00	End 03:00
	Start	End
THURSDAY		
	Start 18:00	End 03:00
	Start	End
FRIDAY		
TRIDAT	Start 18:00	End 04:00
	Start	End
SATURDAY		
SATURDAT	Start 18:00	End 04:00
	Start Start	End
SUNDAY	Stort 10.00	
	Start 18:00	End 01:00
	Start	End
State any seasonal vari		
For example (but not e	xclusively) where the activity	y will occur on additional days during the summer months.
	Where you intend to use the mn on the left, list below	e premises to be open to the members and guests at different times from
		the activity to go on longer on a particular day e.g. Christmas Eve.
	,,, ,, ,, <u>,</u> , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	

Continued from previous page... Section 18 of 19 LICENSING OBJECTIVES Describe the steps you intend to take to promote the four licensing objectives: a) General – all four licensing objectives (b,c,d,e) List here steps you will take to promote all four licensing objectives together. many years experience. already have a good reputation as a premises licence holder never had any trouble before b) The prevention of crime and disorder i and staff are train to deal with crime and disorder. police will be informed of any crime or disorder food packaging is safe and harmless cctv monitors c) Public safety customers are far away from the road. customers will be provided with help if needed d) The prevention of public nuisance customers will be advised to keep the noise down. bins will be provided clean up outside after work every day e) The protection of children from harm children will be served first.

children will be served first. make sure they are accompanied by an adult

Section 19 of 19

PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

Premises Licence Fees are determined by the non domestic rateable value of the premises. To find out a premises non domestic rateable value go to the Valuation Office Agency site at http://www.voa.gov.uk/ business_rates/index.htm Band A - No RV to £4300 £100.00 Band B - £4301 to £33000 £190.00 Band C - £33001 to £87000 £315.00 Band D - £87001 to £125000 £450.00* Band E - £125001 and over £635.00* *If the premises rateable value is in Bands D or E and the premises is primarily used for the consumption of alcohol on the premises then your are required to pay a higher fee

Continued from previous page	
Band D - £87001 to £125000 £	
Band E - £125001 and over £1,	
•	e payment of fees in relation to the provision of regulated entertainment at church halls, milar nature, village halls, parish or community halls, or other premises of a similar nature. The
	ences will be met by central Government. If, however, the licence also authorises the use of
	alcohol or the provision of late night refreshment, a fee will be required.
	s are exempt from the fees associated with the authorisation of regulated entertainment
•	ovided by and at the school or college and for the purposes of the school or college.
	u are subject to ADDITIONAL fees based upon the number in attendance at any one time
Capacity 5000-9999 £1,000.00	
Capacity 10000 -14999 £2,000.	
Capacity 15000-19999 £4,000.0 Capacity 20000-29999 £8,000.0	
Capacity 30000-39999 £16,000	
Capacity 40000-49999 £24,000	
Capacity 50000-59999 £32,000	
Capacity 60000-69999 £40,000	0.00
Capacity 70000-79999 £48,000	
Capacity 80000-89999 £56,000	
Capacity 90000 and over £64,0	00.00
* Fee amount (£)	100.00
DECLARATION	
, I/we understand it is an offer	nce, liable on conviction to a fine up to level 5 on the standard scale, under section 158 of the
	false statement in or in connection with this application.
Ticking this box indicat	
	es you have read and understood the above declaration
This section should be comple	ted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
behalf of the applicant?"	
* Full name	jamie koc
* Capacity	band A
* Date	
	dd mm yyyy
	Add another signatory
Once you're finished you need	8
1. Save this form to your comp	
with your application.	v.uk/apply-for-a-licence/premises-licence/guildford/apply-1 to upload this file and continue
	have all your supporting documentation to hand.
	N SUMMARY CONVICTION TO A FINE NOT EXCEEDING LEVEL 5 ON THE STANDARD
SCALE, UNDER SECTION 158 WITH THIS APPLICATION	OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION

OFFICE USE ONLY

Applicant reference number
ee paid
Payment provider reference
LMS Payment Reference
Payment status
Payment authorisation code
Payment authorisation date
Date and time submitted
Approval deadline
rror message
s Digitally signed
<pre>< Previous 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 Next ></pre>