Eastbourne Borough Council Customer First Team Town Hall, Grove Road Eastbourne BN21 4UG



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Forms and guidance can be downloaded from www.lewes-eastbourne.gov.uk/licensing

Application for a provisional statement to be granted 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(Insert name(s) of applicant) apply for a provisional statement under premises described in Part 1 below (the to you as the relevant licensing authori Act 2003 Part 1 – Premises Details	e premises) and I/w	e are making t	his application
Postal address of premises or, if none,	ordnance survey m	nap reference	or description
			I
Post town		Post code	
Tolophono number et premises (if any)			
Telephone number at premises (if any)			
Non-domestic rateable value of premises	£		
Part 2 - Applicant Details			
Please state whether you are applying for	a premises licence a Please tick		
a) an individual or individuals *	•	please comple	ete section (A)
b) a person other than an individual *			
i. as a limited company	0	please comple	ete section (B)
	4		

					_		
		s a partnership			0	•	olete section (B)
	iii. as	s an unincorpo	rated association or		0	•	olete section (B)
	iv. of	ther (for examp	ole a statutory corpo	ration)	0	please comp	olete section (B)
c)	a reco	gnised club			0	please comp	olete section (B)
d)	a chari	ity			0	please comp	olete section (B)
e)	the pro	prietor of an e	ducational establish	ment	0	please comp	olete section (B)
f)	a healt	th service body	′		0	please comp	olete section (B)
g) h)	Care Sindepe	Standards Act 2 endent hospital	stered under Part 2 o 2000 (c14) in respect lice of a police force	t of an	0		olete section (B)
* If you are applying as a person described in (a) or (b) please confirm: Please tick ye I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or I am making the application pursuant to a statutory function or a function discharged by virtue of Her Majesty's prerogative * Individual Applicants* (A) Individual Applicants* (Fill in as applicable)						0	
Mr •	,	Mrs •	_	Ms O		er Title (for mple, Rev)	
Surn	ame			First na	mes		
l am	18 yea	rs old or over	,			O Plea	
		ľ				- Pież	ase tick yes
addr	premi	different				• Piez	ase tick yes
addr from addr	ess if o	different				Postcode	ase tick yes
addr from addr Post Dayt	ress if controls in premises the controls in the control in	different ses ontact telephor					ase tick yes
addr from addr Post Dayt	ress if control of the control of th	different ses ontact telephor					ase tick yes
Post Dayt E-ma	ress if contraction on all	ontact telephor		applicable	e)		ase tick yes
addr from addr Post Dayt E-ma (optio	ress if con premisers Town time conail addronal)	ontact telephoress INDIVIDUAL	ne number L APPLICANT (if Miss	Ms		Postcode	ase tick yes
addr from addr Post Dayt E-ma (optio	ress if con premisers Town time conail addronal)	ontact telephoress	ne number L APPLICANT (if Miss		Oth		ase tick yes

I am 18 years old	or over	Please tick yes
Current postal address if different from premises address	nt	
Post Town		Postcode
Daytime contact t	elephone number	
E-mail address (optional)		

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned

Name
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association)
Telephone number (if any)
E-mail address (optional)

What is the nature of your interest in the premises?	
Part 3 – Schedule of works	
Is the premises	Please tick yes
about to be constructedbeing extended or altered	0
Please give details of the work and please attach plan done at the premises	s of the work being done or about to be
Please give particulars of the premises to which the appropriate (1)	oplication relates (please read guidance
note 1)	

Whic	ch licensable activities will the premises be used for?	
Prov	vision of regulated entertainment	Please tick Yes
a)	plays (optional, fill in box A)	0
b)	films (optional, fill in box B)	0
c)	indoor sporting events (optional, fill in box C)	0
d)	boxing or wrestling entertainment (optional, fill in box D)	0
e)	live music (optional, fill in box E)	0
f)	recorded music (optional, fill in box F)	0
g)	performances of dance (optional, fill in box G)	0
h)	anything of a similar description to that falling within (e), (f) or (g) (optional, H)	fill in box o
Prov	vision of entertainment facilities:	
i)	making music (optional, fill in box I)	0
j)	dancing (optional, fill in box J)	0
k)	entertainment of a similar description to that falling within (i) or (j) (optional, K)	fill in box o
<u>Prov</u>	vision of late night refreshment (optional, fill in box L)_	0
Supp	ply of alcohol (optional, fill in box M)	0
Com	nplete boxes N, O and P (optional)	
Par	t 4 – OPTIONAL – you may fill in this section if you choose	to
Gene	eral description of premises (please read guidance note1)	

Plays Standard days and timings (please read guidance note 6)		read	Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors Outdoors	0		
	1	<u>, </u>	-	Both •			
Day Mon	Start	Finish	Please give further details here (please read gr				
IVIOIT			Please give further details here (please read gu	iluarice riole 3)		
Tue							
Wed			State any seasonal variations for performing plays (please read guidance note 4)				
Thur							
Fri			Non standard timings. Where you intend to us for the performance of plays at different times the column on the left, please list (please read	to those liste	ed in		
Sat			the column on the left, please list (please lead	guidance note	. 0)		
Sun							

Films Standard days and timings (please read		read	Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	0	
guidan	ice note 6)		Outdoors	0	
Day	Start	Finish		Both	0	
Mon			Please give further details here (please read gu	idance note 3))	
Tue						
Wed			State any seasonal variations for the exhibition of films (please read guidance note 4)			
Thur						
Fri			Non standard timings. Where you intend to us for the exhibition of films at different times to to column on the left, please list (please read guid	hose listed ir		
Sat			tolumnion the left, please list (please lead guid	ance note 3)		
Sun						

Indoor sporting events Standard days and timings (please read guidance note 6)		ind read	Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon			
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			the column on the left, please list (please read guidance note 3)
Sat			
Sun			

Boxing or wrestling entertainments Standard days and			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	0	
timings (please read guidance note 6)		read	please tick (picase read guidance note 2)	Outdoors	0	
Day	Start	Finish		Both	0	
Mon			Please give further details here (please read gu	idance note 3)		
Tue						
Wed			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)			
Thur						
Fri			Non standard timings. Where you intend to us for boxing or wrestling entertainment at differentiated in the column on the left, please list (please)	ent times to th	ose	
Sat			note 5)	ace rodd galdo		
Sun						

Live music Standard days and timings (please read guidance note 6)		read	Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors Outdoors	0	
Day	Start	Finish		Both	0	
Mon			Please give further details here (please read gu	idance note 3))	
Tue						
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)			
Thur						
Fri			Non standard timings. Where you intend to us for the performance of live music at different to listed in the column on the left, please list (please)	imes to those	<u>-</u>	
Sat			note 5)	ase read gaide	1100	
Sun						

Recorded music Standard days and timings (please read		nd	Will the playing of recorded music take place indoors or outdoors or both – please tick	Indoors	0
	ce note 6		d (please read guidance note 2)		0
Day	Start	Finish		Both	0
Mon			Please give further details here (please read gu	idance note 3))
Tue					
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur					
Fri			Non standard timings. Where you intend to us for the playing of recorded music at different t listed in the column on the left, please list (please)	imes to those	<u>) </u>
Sat			note 5)	ado roda galac	
Sun					

Performances of dance Standard days and			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	0	
timings	s (please r ice note 6	ead	(p	Outdoors	0	
Day	Start	Finish		Both	0	
Mon			Please give further details here (please read guidance note 3)			
Tue						
Wed			State any seasonal variations for the performance of dance (please read guidance note 4)			
Thur						
Fri			Non standard timings. Where you intend to us for the performance of dance at different times the column on the left, please list (please read	to those list	ed in	
Sat			the column on the left, please list (please lead	galdanioc note	. 5)	
Sun						

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertable providing	inment you	will_
Day	Start	Finish	Will this entertainment take place indoors or	Indoors	0
Mon		outdoors or both – please tick (please read quidance note 2)	Outdoors	0	
			guidance note 2,	Both	0
Wed Thur Fri			State any seasonal variations for entertainmer description to that falling within (e), (f) or (g) (guidance note 4)	nt of a simila please read	<u>r</u>
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)		

Provision of facilities for making music Standard days and timings (please read guidance note 6)		sic ind read	Please give a description of the facilities for making music you will be providing Will the facilities for making music be Indoors				
			indoors or outdoors or both - please tick	Indoors			
	T	T	(please read guidance note 2)	Outdoors	0		
Day	Start	Finish		Both	0		
Mon Tue			Please give further details here (please read gu	ilidance flote 3)		
Wed			State any seasonal variations for the provision making music (please read guidance note 4)	State any seasonal variations for the provision of facilities for making music (please read guidance note 4)			
Thur			-				
Fri			Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list (please read				
Sat			guidance note 5)	(piedee ree			
Sun							

Provis	Provision of facilities		Will the facilities for dancing be indoors or			
for dancing			outdoors or both - please tick (see guidance	Indoors	0	
	ird days a		note 2)	Outdoors	0	
	s (please । ce note 6			Both	0	
			Please give a description of the facilities for d	ancing you w	ill be	
			providing			
Day	Start	Finish				
Mon			Please give further details here (please read guidance note 3)			
Tue						
Wed			State any seasonal variations for providing da (please read guidance note 4)	ncing faciliti	e <u>s</u>	
Thur						
Fri			Non standard timings. Where you intend to us for the provision of facilities for dancing at dif those listed in the column on the left, please li	ferent times t	to	
Sat			guidance note 5)	1 <u>31</u> (piease 168	iu	
Sun						

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)			Please give a description of the type of entert you will be providing	ainment facil	ity
Day	Start	Finish	Will the entertainment facility be indoors or	Indoors	0
Mon			outdoors or both – please tick (please read quidance note 2)	Outdoors	0
			garaanies nete <u>z</u> ,	Both	0
Tue			Please give further details here (please read guidance note 3)		
Wed			State any seasonal variations for the provisio entertainment of a similar description to that		
Fri			(please read guidance note 4)		
Sat			Non standard timings. Where you intend to u for the provision of facilities for entertainmen description to that falling within i or j at different listed in the column on the left, please list (please 5)	t of a similar ent times to t	hose_
Sun					

I

Late night refreshment Standard days and timings (please read			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	0
guidan	ice note 6)		Outdoors	0
Day	Start	Finish		Both	0
Mon		Please give further details here (please read guid			
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 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		
Sat			guidance note 5)	or (picase real	•
Sun					

Supply of alcohol Standard days and		ınd	Will the supply of alcohol be for consumption (Please tick box) (please read	On the premises	0
	timings (please read guidance note 6)		guidance note 7)	Off the premises	0
Day	Start	Finish		Both	0
Mon		State any seasonal variations for the supply of alcohol read guidance note 4)		falcohol (plea	ise
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			Column on the left, please list (please read guid	ance note 5)	
Sat					
Sun					

Ν

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)

Hours premises are open to the public Standard timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			
Wed			Non standard timings. Where you intend the premises to be
Thur			open to the public at different times from those listed in the column on the left, please list (please read guidance note 5)
Fri			
Sat			
Sun			

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)
b) The prevention of crime and disorder
c) Public safety
d) The prevention of public nuisance
e) The protection of children from harm

	Please tick	yes
_	de or enclosed payment of the fee	0
	losed the plans of the works to be done at the premises to copies of this application and the plan to responsible authorities and	0
i nave sem	ere applicable	0
 I understan 	nd that I must now advertise my application	0
 I understander be rejected 	nd that if I do not comply with the above requirements my application will	0
STANDARD SC	NCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE CALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A MENT IN OR IN CONNECTION WITH THIS APPLICATION	
Part 5 – Sig	natures (please read guidance note 10)	
	oplicant or applicant's solicitor or other duly authorised agent (See 1). If signing on behalf of the applicant please state in what capacity.	
Signature		
Date		
Capacity		
	eations signature of 2 nd applicant or 2 nd applicant's solicitor or other ent. (please read guidance note 12). If signing on behalf of the applicant what capacity.	
Signature		
Date		
Capacity		
Cantact name (
•	(where not previously given) and postal address for correspondence h this application (please read guidance note 13)	
Post town	Post code	
Telephone num	nber (if any)	
If you would pro	refer 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.
- 2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
- 3. 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.
- 4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
- 5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
- 6. 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.
- 7. 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.
- 8. 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.
- 9. Please list here steps you will take to promote all four licensing objectives together.
- 10. The application form must be signed.
- 11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- 12. 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.

Before completing this form you should read our step by step guidance booklet 'The new licensing system: a guide to the changes' available from our offices or to download from our website (see top of page 1), which includes addresses to send copies of this form. Incomplete or incorrect applications will be returned and will delay issuing your licence