Appendix 1

Winchester City Council
City Offices, Colebrook Street, Winchester, SO23 9LJ
T: 01962 00000

E: licensing@winchester.gov.uk

Ref: DSFX1565114464161

## **Temporary Event Notice**

| Personal Details of Premises User                                     |            |  |
|---|------------|--|
| Vous Norse (places read note 1)                                       |            |  |
| Your Name (please read note 1)  |            |  |
| Title *   | Mr         |  |
| First Name *  | Jack       |  |
| Surname *   | Carpenter  |  |
| Have you been known by any previous names, including a maiden name? * | No         |  |
|   |            |  |
| Personal Details of Premises User                                     |            |  |
| Date of Birth *   |            |  |
| Place of Birth *  | Winchester |  |
| National Insurance Number *   |            |  |
|   |            |  |

| Current Address   |                                     |  |
|---|-------------------------------------|--|
| We will use this address and contact details to correspond with you unless you specify an alternative correspondence address.   |                                     |  |
| Street Address *  |                                     |  |
|   |                                     |  |
|   |                                     |  |
| Town/City *   |                                     |  |
| Postcode *  |                                     |  |
| Daytime Telephone Number *  |                                     |  |
| Evening Telephone Number  |                                     |  |
| Mobile Telephone Number   |                                     |  |
| Fax Number  |                                     |  |
| Email Address *   |                                     |  |
| Do you have an alternative correspondence address you would like us to use? *   | No                                  |  |
|   |                                     |  |
|   |                                     |  |
| The Premises  |                                     |  |
|   | MIDDLE FARM NORTH END LANE CHERITON |  |
| Premises Address  | HAMPSHIRE SO24 0PW                  |  |
| Does a premises licence or club premises certificate have effect in relation to the premises, or any part of the premises? If so, please select and enter the Premises Licence Number or Club Premises Certificate Number.* | No - Neither                        |  |

## **Premises**

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 and details. (Please read note 3)

Please describe the nature of the premises. (Please read note 4)  $^{\star}$ 

Please describe the nature of the event. (Please read note 5)

In a barn

Will be on a farm

It is a Alresford young farmer party

| Licensable Activites   |   |  |
|--|---|--|
| Please state the licensable activities that you intend to carry on at the premises (please tick all licensable activities you intend to carry on). (Please read note 6) * More than one can be selected.   |   |  |
| ✓ 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 (Please read note 7)  |   |  |
| The provision of late night refreshment  |   |  |
| Are you giving a late temporary event notice? (Please read note 8) *   | Yes                                     |  |
| Please state the dates on which you intend to use these premises for licensable activities (Please read note 9). * Start Date  | 07/09/2019                              |  |
| End Date   | 08/09/2019                              |  |
| 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 10) *  | Start at 20:00pm and finish at 02:00 am |  |
| 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 11) *                                    | 150                                     |  |
| If the licensable activities will include the sale or supply of alcohol, please state whether these will be for consumption on or off the premises, or both (please read note 12). *   | On the premises only                    |  |
| Please state if the licensable activities will include the provision of relevant entertainment. If so, please state the times during the event period that you propose to provide relevant entertainment (including, but not limited to lap dancing and pole dancing). (Please read note 13) * | There will be a DJ at the party         |  |
| Personal Licence Holder  |   |  |
| Do you currently hold a valid personal licence? (please read   |   |  |
| note 14)*  | No                                      |  |

| Personal Licence Details   |             |  |
|--|-------------|--|
| Issuing Licensing Authority *  | Bournemouth |  |
| Licence number *   |             |  |
| Date of issue *  |             |  |
| Please provide any further details you think may be relevant.  |             |  |
|  |             |  |
| <b>Previous Temporary Event Notices</b>  |             |  |
| 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? (please read note 15) * | Yes         |  |
| Previous Event Notice  |             |  |
| Please state the number of temporary event notices (including the number of late temporary event notices, if any) you have given for events in that same calendar year. *  | 1           |  |
| Previous Temporary Event Notices   |             |  |
| Have you already given a temporary event notice for the same premises in which the event period either; ends 24 hours or less before begins 24 hours or less after the event period proposed in this notice? *             | Yes         |  |
| Associates and Business Colleagues   |             |  |
| 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? (please read note 16) *                               | No          |  |

| Associates and Business Colleagues   |    |  |
|--|----|--|
| Has any associate of yours already given a temporary event notice for the same premises in which the event period; a) ends 24 hours or less before; or 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 |  |
| Associates and Business Colleagues   |    |  |
| Has any person with whom you are in business carrying on licensable activities already given a temporary event notice for the same premises in which the event period: a) ends 24 hours or less before; or b) begins 24 hours or less after the event period proposed in this notice? *  | No |  |
| Declaration  |    |  |
| Please ensure you submit all the information required to support your proposal. Failure to submit all the information required could result in your notice being deemed invalid. It will not be considered valid until all the information required by the licensing authority has been submitted. Please read guidance note 17 for further information. I understand that a copy of this notice will be sent to the chief officer of police for the area in which the premises are situated. I understand that a copy of this notice will be sent to the local authority exercising environmental health functions for the area in which the premises are situated. If the premises are situated in one or more licensing authority areas, I understand that the issuing authority will send at least one copy of this notice to each additional licensing authority. If the premises are situated in one or more police areas, I understand that the issuing authority will send a copy of this notice to each additional chief officer of police.  It is a condition of this temporary event notice that where the relevant licensable activities described include the supply of alcohol that all such supplies are made by or under the authority of the premises user. (please read note 18)  The information contained in this form is correct to the best of my knowledge and belief. I understand that it is an offence: (i) to knowingly or recklessly make a false statement in or in connection with this temporary event notice and that a person is liable on summary conviction for such an offence to a fine of any amount; and (ii) to permit an unauthorised licensable activity to be carried on at any place and that a person is liable on summary conviction for any such offence to a fine of any amount, or to imprisonment for a term not exceeding six months, or to both.  Name of Person Signing *  Declaration Made |    |  |

| Email confirmation   |           |  |
|--|-----------|--|
| On submission an email confirmation will be sent using the details below |           |  |
| Forename   | Jack      |  |
| Surname /Company Name  | Carpenter |  |
| Email *  |           |  |
| Telephone  |           |  |