

Stevenage Temporary Event Notice Licensing Act 2003

For help contact

<u>licensing@stevenage.gov.uk</u> Telephone: 01438 242908

* required information

| Section 1 of 9 | | | | | | |
|---|--|--|--|--|--|--|
| | ime and resume it later. You do not need to be | Jogged in when you resume | | | | |
| Tou can save the form at any t | ime and resume it later. Too do not need to be | This is the unique reference for this | | | | |
| System reference | Not Currently In Use | application generated by the system. | | | | |
| Your reference | august 6th | You can put what you want here to help you track applications if you make lots of them. It is passed to the authority. | | | | |
| | | to passed to the dathering. | | | | |
| Are you an agent acting on be | half of the applicant? | Put "no" if you are applying on your own | | | | |
| ○ Yes | lo | behalf or on behalf of a business you own o work for. | | | | |
| Applicant Details | | | | | | |
| * First name | clinton | | | | | |
| * Family name | moulton | | | | | |
| * E-mail | clintonmoulton@yahoo.com | | | | | |
| Main telephone number | +447974145778 | Include country code. | | | | |
| Other telephone number | +441438723739 | | | | | |
| ☐ Indicate here if you wou | ld prefer not to be contacted by telephone | _ | | | | |
| Are you: | | | | | | |
| Applying as a business of | or organisation, including as a sole trader | A sole trader is a business owned by one person without any special legal structure. | | | | |
| Applying as an individual | al | Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby. | | | | |
| Applicant Business | | | | | | |
| Is your business registered in the UK with Companies House? | YesNo | Note: completing the Applicant Business section is optional in this form. | | | | |
| Registration number | 11864141 | | | | | |
| Business name | Ritty's Place LTD | If your business is registered, use its registered name. | | | | |
| VAT number - | 354389765 | Put "none" if you are not registered for VAT. | | | | |
| Legal status | Private Limited Company | | | | | |
| | | | | | | |

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|-------------------------------|---|--|
| Your position in the business | Director | |
| Home country | United Kingdom | The country where the headquarters of your business is located. |
| Registered Address | | Address registered with Companies House. |
| Building number or name | Building 15, | |
| Street | 1000 Gateway | |
| District | | |
| City or town | Stevenage | |
| County or administrative area | Hertfordshire | |
| Postcode | SG1 2FP | |
| Country | United Kingdom | |
| | | |
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| APPLICATION DETAILS (See a | also guidance on completing the form, gene | ral notes and note 1) |
| Llove you had any provious or | maidan namaa? | |
| Have you had any previous or | | |
| ○ Yes | ● No | Applicant must be 18 years of age or older |
| * Your date of birth | 02 / 05 / 1966 dd mm yyyy | Applicant must be 16 years of age of older |
| National Insurance number | N yyyy | This box need not be completed if you are an |
| National insulance number | IN | individual not liable to pay UK national insurance. |
| Place of birth | Hitchin | |
| Correspondence Address | | |
| | similar to) the address given in section one? | If "Yes" is selected you can re-use the details |
| ○ Yes | No | from section one, or amend them as required. Select "No" to enter a completely new set of details. |
| Building number or name | 6 | |
| Street | Baker Street | |
| District | | |
| City or town | Stevenage | |
| County or administrative area | Hertfordshire | |
| Postcode | SG1 3AL | |
| Country | United Kingdom | |

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|--|--|--|
| Additional 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 | clintonmoulton@yahoo.com | |
| Telephone number | +447974145778 | |
| Other telephone number | +441438723739 | |
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| THE PREMISES | | |
| activity at the premises describ Give the address of the premise description (including the Ordr | es where you intend to carry on the licensable anance Survey references). (See also guidance o | activities or if it has no address give a detailed |
| * Does the premises have an ac | daress? | |
| Yes | ○ No | |
| Address Is the address the same as (or s | imilar 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 | 6 | |
| * Street | Baker Street | |
| District | | |
| * City or town | Stevenage | |
| County or administrative area | | |
| * Postcode | SG1 3AL | |
| * Country | United Kingdom | |
| * Does a premises licence or clu to the premises (or any part of | ub premises certificate have effect in relation the premises)? | |
| NeitherPremise | es licence Club premises certificate | |
| * Premises licence number | SBCL0238 | |
| Location Details | | |
| * Provide further details about | the location of the event | |
| This is my permanent business | s address, we are open until 10pm daily. | |

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| | of the premises at this address or into (see also guidance on completing the | end to restrict the area to which this notice applies, give a ne form, note 3) |
| | | |
| Describe the nature of the pro | emises below <u>(see also guidance on c</u> | ompleting the form, note 4) |
| I would like permission to pla | ay music in and outside of my premiso | es until 11pm, including the sale of food and alcohol. |
| Describe the nature of the ev | ent below <u>(see also guidance on com</u> | pleting the form, note 5) |
| | | vould like to participate but from our own premises as it is from. We will also like to use this oppotunity to celebrate |
| Section 4 of 9 | | |
| LICENSABLE ACTIVITIES | | |
| (see also guidance on comple | | emises |
| The sale by retail of alcommember of the club | y or on behalf of a club to, or to the o | rder of, a |
| | ted entertainment | (See also guidance on completing the form, note 7). |
| | ght refreshment | |
| ☐ The giving of a late tem | porary event notice | Late notices can be given no later than 5 working days but no earlier than 9 working days before the event. (See also guidance on completing the form, note 8). |
| Event Dates | | |
| | east 10 working days between the da premises for licensable activities. | ate you submit this form and the date of the earliest event |
| State the dates on which you | intend to use these premises for licer | nsable activities |
| (see also guidance on comple | eting the form, note 9) | |
| Event start date | 06 / 08 / 2022 dd mm yyyy | The maximum period for using premises for licensable activities under the authority of a temporary event notice is 168 hours or seven days. |
| Event end date | 06 / 08 / 2022 dd mm yyyy | |

| Continued from previous page | | |
|--|---|---|
| State the times during the event period that you propose to carry on licensable activities (give times in 24 hour clock) (see also guidance on completing the form, note 10) | 12:00-23:00 | |
| activities, including any staff, organisers or performers (see also guidance on completing the form, note 11) | 40 | Note that the maximum number of people cannot exceed 499. |
| supplies will be for consumptio (see also guidance on completi | iclude the supply of alcohol, state whether the in on or off the premises, or both ng the form, note 12): | |
| On the premises only | | |
| Off the premises only | | |
| Both | | |
| Section 5 of 9 | | |
| RELEVANT ENTERTAINMENT | (See also guidance on completing the form | <u>n, note 13)</u> |
| State if the licensable activities period that you propose to pro | will include the provision of relevant entertain vide relevant entertainment | ment. If so, state the times during the event |
| Music played between the hou | rs of 12:00-22:30 | |
| Section 6 of 9 | | |
| PERSONAL LICENCE HOLDERS | (See also guidance on completing the form | n, note 14) |
| Do you currently hold a valid personal licence? | YesNo | |
| Provide the details of your pers | onal licence below. | |
| Issuing licensing authority | North Hertfordshire District Council | |
| Licence number | LICPL/01071/11 | |
| Date of issue | 21 / 03 / 2011 dd mm yyyy | |
| Any further relevant details | | |

| | | | | | | _ | | | | |
|--|------|-----------|-------------|------|------------------|--------|------------|-----------|------------|--|
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| PREVIOUS TEMPORARY EVEN | T NC | OTICES (S | ee also gui | idaı | nce on completin | ing th | ne form, i | note 15) | | |
| 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? | 0 | Yes | | • | No | | | | | |
| Have you 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? | 0 | Yes | | • | No | | | | | |
| Section 8 of 9 | | | | | | | | | | |
| ASSOCIATES AND BUSINESS O | COLL | EAGUES | (See also o | guio | dance on comple | eting | the forn | n, note 1 | <u>(6)</u> | |
| 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? | 0 | Yes | | • | No | | | | | |
| 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? | 0 | Yes | | • | 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? | 0 | Yes | | • | No | | | | | |

Continued from previous page... 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 Yes No period: a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice? Section 9 of 9 CONDITION (See also guidance on completing the form, note 18) It is a condition of this temporary event notice that where the relevant licensable activities described in Sections 4 and 5 above include the supply of alcohol that all such supplies are made by or under the authority of the premises user. **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. This formality requires a fixed fee of £21

DECLARATION (See also guidance on completing the form, note 19)

- * The information contained in this form is correct to the best of my knowledge and belief
- * Lunderstand that it is an offence:
- (i) to knowingly or recklessly make a false statement in connection with this temporary event notice and that a person is liable on conviction for such an offence to a fine up to level 5 on the standard scale; and
- (ii) to permit an unauthorised licensable activity to be carried on at any place and that a person is liable on conviction for any such offence to a fine not exceeding £20,000, or to imprisonment for a term not exceeding six months, or to both
 - ☐ Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

| * Full name | clinton moulton |
|-------------|------------------------------|
| * 0 | |
| * Capacity | director |
| * Date | 15 / 07 / 2022 |
| | dd mm yyyy |

Add another signatory

Once you're finished you need to do the following:

- 1. Save this form to your computer by clicking file/save as...
- 2. Go back to https://www.gov.uk/apply-for-a-licence/temporary-event-notice/stevenage/apply-1 to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

| OFFICE USE ONLY | | | | |
|------------------------------|---|--|--|--|
| | | | | |
| Applicant reference number | august 6th | | | |
| Fee paid | | | | |
| Payment provider reference | | | | |
| ELMS Payment Reference | | | | |
| Payment status | | | | |
| Payment authorisation code | | | | |
| Payment authorisation date | | | | |
| Date and time submitted | | | | |
| Approval deadline | | | | |
| Error message | | | | |
| Is Digitally signed | | | | |
| 1 <u>2</u> <u>3</u> <u>4</u> | <u>5</u> <u>6</u> <u>7</u> <u>8</u> <u>9</u> Next > | | | |