

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						
You can save the form at an	y time and resume it later. You do not need to	be logged in when you resume.				
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.				
Your reference		You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.				
Are you an agent acting on  Yes  •	behalf of the applicant? No	Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.				
Applicant Details						
* First name						
* Family name						
* E-mail						
Main telephone number		Include country code.				
Other telephone number						
☐ Indicate here if you w	ould prefer not to be contacted by telephone					
Are you:						
<ul><li>Applying as a busines</li><li>Applying as an individ</li></ul>	ss or organisation, including as a sole trader dual	A sole trader is a business owned by one person without any special legal structure. 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 i the UK with Companies House?	n • Yes           No	Note: completing the Applicant Business section is optional in this form.				
Registration number	16371028					
Business name	Valley Way Pub Company	If your business is registered, use its registered name.				
VAT number GB	NONE	Put "none" if you are not registered for VAT.				
Legal status	Private Limited Company					

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Your position in the business	Licensee	
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	THE PEAR TREE	
Street	VALLEY WAY	
District		
City or town	STEVENAGE	
County or administrative area	HERTS	
Postcode	SG29DG	
Country	United Kingdom	
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APPLICATION DETAILS (See 2	also guidance on completing the form, gener	ral notes and note 1)
Have you had any previous or I	maiden names?	
Yes	<ul><li>No</li></ul>	
* Your date of birth		Applicant must be 18 years of age or older
	dd mm yyyy	
National Insurance number		This box need not be completed if you are an individual not liable to pay UK national insurance.
Place of birth		
Correspondence Address		
	imilar to) the address given in section one?	If "Yes" is selected you can re-use the details
○ Yes	<ul><li>No</li></ul>	from section one, or amend them as required. Select "No" to enter a completely new set of details.
Building number or name	THE ROYAL OAK	
Street	WALKERN ROAD	
District		
City or town	STEVENAGE	
County or administrative area	HERTS	
Postcode	SG13RA	
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
<ul><li>Yes</li></ul>	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
E-mail		
Telephone number		
Other telephone number		
Section 3 of 9		
THE PREMISES		
activity at the premises describ Give the address of the premise		
* Does the premises have an ac	ddress?	
<ul><li>Yes</li></ul>	○ No	
<b>Address</b> 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	<ul><li>No</li></ul>	required. Select "No" to enter a completely new set of details.
* Building number or name	THE ROYAL OAK	
* Street	WALKERN ROAD	
District		
* City or town	STEVENAGE	
County or administrative area	HERTS	
* Postcode	SG13RA	
* 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)?	
○ Neither	es licence Club premises certificate	
* Premises licence number	SBCL0076	
Location Details		
* Provide further details about	the location of the event	
MAIN BAR OF THE PREMISES &	SPORTS BAR	

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	of the premises at this address or (see also guidance on completing	intend to restrict the area to which this notice applies, give a ng the form, note 3)
Describe the nature of the pre	emises below <u>(see also guidance o</u>	on completing the form, note 4)
PUBLIC HOUSE		
Describe the nature of the eve	ent below <u>(see also guidance on c</u>	completing the form, note 5)
Live band in main bar of the p	oremises.	
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LICENSABLE ACTIVITIES		
State the licensable activities (see also guidance on comple	that you intend to carry on at the	premises
The supply of alcohol by member of the club	, or on behalf of a club to, or to th	ne order of, a
	ed entertainment	(See also guidance on completing the form, note 7).
	ht refreshment	<u>note 7).</u>
☐ The giving of a late temp		Late notices can be given no later than 5
	sorally event metter	working days but no earlier than 9 working days before the event.
		(See also guidance on completing the form,
Event Dates		<u>note 8).</u>
	east 10 working days between th	e date you submit this form and the date of the earliest event
•	premises for licensable activities.	
State the dates on which you	intend to use these premises for	licensable activities
(see also guidance on comple	ting the form, note 9)	
Event start date	19 / 12 / 2025 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.
		<i>y</i>
Event end date	20 / 12 / 2025 dd mm yyyy	

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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)	19:00-01:00	
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 (see also guidance on completing the form, note 11)	110	Note that the maximum number of people cannot exceed 499.
supplies will be for consumption (see also guidance on complete	nclude the supply of alcohol, state whether the on on or off the premises, or both and the form, note 12):	
<ul> <li>On the premises only</li> </ul>		
<ul> <li>Off the premises only</li> </ul>		
<ul><li>Both</li></ul>		
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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
Section 6 of 9		
PERSONAL LICENCE HOLDERS	S (See also guidance on completing the form	n, note 14 <u>)</u>
Do you currently hold a valid personal licence?	<ul><li>Yes</li><li>No</li></ul>	
Provide the details of your pers	sonal licence below.	
Issuing licensing authority	HORSHAM	
Licence number	176/05/0499/PERS	
Date of issue	dd mm yyyy	
Any further relevant details		

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PREVIOUS TEMPORARY EVEN	IT N	OTICES (S	ee also guida	nce or	n completii	ng the form,	<u>note 15)</u>	
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	0	No				
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	4							
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				
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ASSOCIATES AND BUSINESS (	COL	LEAGUES	(See also gu	idance	on comple	ting the for	m, note 16)	
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				

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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 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?	Yes	•	No	
Section 9 of 9				
CONDITION (See also guida	nce on completing the fo	orm,	<u>note 18)</u>	
above include the supply of al	-		ne relevant licensable activities described in Sections 4 and 5 e 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 qui		o for	m noto 10)	
			<u>`</u>	
<ul><li>* The information contained in</li><li>* Lunderstand that it is an offe</li></ul>		e bes	st of my knowleage and belief	
(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				
* Capacity	Licensee			
* Date	26 / 11 / 2025 dd mm yyyy			

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	Add another signatory	
continue with your application.	uter by clicking file/save as .uk/apply-for-a-licence/temporary-event-notice	
OFFICE USE ONLY		
Applicant reference number		
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

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