

**APPLICATION FOR A PREMISES LICENCE 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 ..... apply for a premises licence under Section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003**

*(Insert name of applicant)*

**Part 1 – Premises Details**

<b>Postal address of premises or, if none, ordinance survey map reference, or description</b>	
<b>Post town</b>	<b>Post code</b>

Telephone number of premises (if any)

Non-domestic rateable value of premises  £

**Part 2 – Applicant Details**

Please state whether you are applying for a premises licence as

*Please tick ✓*

- a) An individual or individuals\*  please complete section (A)
- b) a person other than an individual\*
  - i. as a limited company  please complete section (B)
  - ii. as a partnership  please complete section (B)
  - iii. as an unincorporated association, or  please complete section (B)
  - iv. other (for example a statutory corporation)  please complete section (B)

c) a recognised club

please complete section (B)

d) a charity

please complete section (B)

e) the proprietor of an educational establishment

please complete section (B)

f) a Health Service Body

please complete section (B)

g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital

please complete section (B)

h) the chief officer of police of a police force in England and Wales

please complete section (B)

\* If you are applying as a person described in (a) or (b) please confirm:

**Please tick ✓**

▪ 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

**(A) INDIVIDUAL APPLICANTS (fill in as applicable)**

Mr  Mrs  Miss  Ms  Other title   
(for example Rev.)

Surname

First names

**Please tick ✓ Yes**

I am 18 years old or over

Current postal address if different from premises address

Post Town  Postcode

Daytime contact telephone number

E-mail address (optional)

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr  Mrs  Miss  Ms  Other title   
(for example Rev.)

Surname

First names

I am 18 years old or over

Please tick ✓ **Yes**

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone 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 case of a partnership or other joint nature (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 etc.)
Telephone number (f any)
E-mail address (optional)

**Part 3 – Operating Schedule**

When do you want the premises licence to start?

Day		Month		Year		

If you wish the licence to be valid only for a limited period, when do you want it to end?

Day		Month		Year		

If 5,000 or more people attend the premises at any one time, please state the number

Please give a general description of the premises (please read guidance note 1)

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

**Provision of regulated entertainment**

*Please tick ✓ Yes*

- a) plays (if ticking yes, fill in Box A)
- b) films (if ticking yes, fill in Box B)
- c) indoor sporting events (if ticking yes, fill in Box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in Box D)
- e) live music (if ticking yes, fill in Box E)
- f) recorded music (if ticking yes, fill in Box F)
- g) performance of dance (if ticking yes, fill in Box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in Box H)

**Provision of entertainment facilities for:**

- i) making music (if ticking yes, fill in Box I)
- j) dancing (if ticking yes, fill in Box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in Box K)

**Provision of late night refreshment** (if ticking yes, fill in Box L)

**Supply of alcohol** (if ticking yes, fill in Box M)

**In all cases complete boxes N, O and P**

## A

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of a play take place indoors or outdoors or both – please tick [✓] (please read guidance note 2).</b>	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Thu					
Fri			<b>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

## B

<b>Films</b> Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick [✓] (please read guidance note 2).</b>	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
Thu					
Fri			<b>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

### C

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			<b>Please give further details here</b> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variations for indoor sporting events</b> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			<b>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</b> (please read guidance note 5)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

### D

<b>Boxing or wrestling entertainment</b> Standard days and timings (please read guidance note 6)			<b>Will the boxing or wrestling entertainment take place indoors or outdoors or both</b> – please tick [✓] (please read guidance note 2).	Indoors	
Day	Start	Finish		Outdoors	
Day	Start	Finish		Both	
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 4)		
Thu					
Fri			<b>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

# E

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of live music take place indoors or outdoors or both –</b> please tick [✓] (please read guidance note 2).	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)		
Thu					
Fri			<b>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

# F

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b>Will the playing of recorded music take place indoors or outdoors or both –</b> please tick [✓] (please read guidance note 2).	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for playing recorded music</b> (please read guidance note 4)		
Thu					
Fri			<b>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

## G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick [✓] (please read guidance note 2).	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for performance of dance</b> (please read guidance note 4)		
Thu					
Fri			<b>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

## H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			<b>Please give a description of the type of entertainment you will be providing</b>		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick [✓] (please read guidance note 2).	Indoors	
				Outdoors	
			Both		
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</b> (please read guidance note 4)		
Thu					
Fri			<b>Non standard timings. Where the club intends 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</b> (please read guidance note 5)		
Sat					
Sun					

**I**

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			<u>Please give a description of the facilities for making music you will be providing</u>		
Day	Start	Finish	<b>Will the facilities for making music be indoors or outdoors or both – please tick [✓] (please read guidance note 2).</b>	Indoors	
Mon				Outdoors	
				Both	
Tue			<u>Please give further details here (please read guidance note 3)</u>		
Wed					
Thu			<u>State any seasonal variations for the provision of facilities for making music (please read guidance note 4)</u>		
Fri					
Sat			<u>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 guidance note 5)</u>		
Sun					

**J**

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			<b>Will the facilities for dancing be indoors or outdoors or both – please tick [✓] (please read guidance note 2).</b>	Indoors	
Day	Start	Finish		Outdoors	
Mon				Both	
Tue			<u>Please give a description of the facilities for dancing you will be providing</u>		
Wed			<u>Please give further details here (read guidance note 3)</u>		
Thu			<u>State any seasonal variations for the provision of dancing facilities (please read guidance note 4)</u>		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)</u>		
Sun					

# K

<b>Provision of facilities for entertainment of a similar description to that falling within I or J</b> Standard days and timings (please read guidance note 6)			<u>Please give a description of the type of entertainment facility you will be providing</u>		
Day	Start	Finish	<b>Will the entertainment be indoors or outdoors or both</b> – please tick [✓] (please read guidance note 2).	Indoors	
Mon				Outdoors	
				Both	
Tue			<u>Please give further details here</u> (please read guidance note 3)		
Wed					
Thu			<u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within I or J</u> (please read guidance note 4)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for provision of facilities for entertainment of a similar description to that falling within I or J at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sun					

# L

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			<b>Will the provision of late night refreshment take place indoors or outdoors or both</b> – please tick [✓] (please read guidance note 2).	Indoors	
Day	Start	Finish		Outdoors	
Mon				Both	
Tue			<u>Please give further details here</u> (please read guidance note 3)		
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Thu					
Fri			<u>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</u> (please read guidance note 5)		
Sat					
Sun					

# M

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the sale of alcohol be for consumption</b> (please tick box ✓) (please read guidance note 7)	On the premises				
				Off the premises				
				Both				
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)					
Mon								
Tue								
Wed								
Thu						<b>Non standard timings. Where you intend to use the premises for the for the supply of alcohol at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Fri								
Sat								
Sun								

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name.....

Address.....

.....

Postcode.....

Personal Licence number (if known).....

Issuing licensing authority (if known).....

# N

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)

# O

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<u>State any seasonal variation (please read guidance note 4)</u>
Day	Start	Finish	
Mon			<b><u>Non standard timings. Where you intend to use the premises to be open to the public at different times to those listed in the column on the left, please list (please read guidance note 5)</u></b>
Tue			
Wed			
Thu			
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

- I have made or enclosed payment of the fee
- I have enclosed a plan of the premises
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable
- I understand that I must now advertise my application
- I understand that if I do not comply with the above requirements my application will be rejected

**IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION**

**Part 4 – Signatures** (please read guidance note 10)

**Signature of applicant or applicant’s solicitor or other duly authorised agent.** (Please read guidance note 11.) **If signing on behalf of the applicant please state in what capacity.**

Signature .....

Date .....

Capacity .....

**For joint applications signature of 2<sup>nd</sup> applicants or 2<sup>nd</sup> applicant’s solicitor or other authorised agent.** (Please read guidance note 12.) **If signing on behalf of the applicant please state in what capacity.**

Signature .....

Date .....

Capacity .....

**Contact name (where not previously given) and address for correspondence associated with this application** (please read guidance note 13).

Post town


Post code

Telephone number (if any)

If you would prefer us to correspond with you by e-mail your email address (optional)

**Notes for Guidance**

1. 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 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 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.

 <p><b>Data Protection</b></p>	<p>The information you supply will be used by Licensing to assess and administer your application for a premises licence. It may be shared with other Divisions of the Council and external organisations including the Police, Fire Service and other responsible authorities for this purpose. Your name and address will be included on a Register of Applications available for public inspection and published on Solihull MBC's website. Your information may also be shared with other council services and partner organisations to ensure your records are kept accurate and help us to identify services you may be entitled to or interested in. For further details of how we may use your information contact Licensing on tel: 0121 704 8003</p>
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