

13/010581KQN

R/N 226300084130 £190



West Berkshire Council, Market Street, Newbury, RG14 5LD
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 **Hungerford Town Football Club**

(Insert name(s) of applicant)

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

Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description			
Town Ground Bulpit Lane			
Post town	Hungerford	Postcode	RG17 0AY

Telephone number at premises (if any)	01488 682939
Non-domestic rateable value of premises	£10,500

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- 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)

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/>	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 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 Hungerford Town Football Club
Address Town Ground Bulpit Lane Hungerford West Berkshire. RG17 0AY
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.) Unincorporated Association
Telephone number (if any) 01488 682939
E-mail address (optional) Htfc125@talktalk.net

- 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 in Wales please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England 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 yes

- 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 <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
01	07	2013

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

DD	MM	YYYY

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

Hungerford Town football club is a detached property within its own ground with perimeter fence and gates for security. The club is situated between a residential area, playing fields and Hungerford common. The club has its own car park for customers, the building comprises of a members bar, function room, kitchen, 2 sets of toilets including disabled toilet. It has 2 bars for the serving of alcohol in the members bar, function room and outside seated areas in the stands and ground

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

--

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

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

Provision of regulated entertainment

Please tick any that apply

- 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) performances 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 late night refreshment (if ticking yes, fill in box I)

Supply of alcohol (if ticking yes, fill in box J)

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3) N/A		
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur					
Fri			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 (please read guidance note 5)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3) N/A		
Mon					
Tue			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)		
Wed					
Thur			<u>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</u> (please read guidance note 5)		
Fri					
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon	1800	2330	Darts & Pool
Tue	1800	2330	State any seasonal variations for indoor sporting events (please read guidance note 4)
Wed	1800	2330	
Thur	1800	2330	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	1800	2330	
Sat	1000	2330	
Sun	1000	2200	

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Both	<input type="checkbox"/>				
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3) N/A		
Mon					
			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Tue					
			<u>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</u> (please read guidance note 5)		
Wed					
Thur					
Fri					
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon	12.00	23.00	Individual singers/ Groups / bands. Music would be amplified		
Tue	12.00	23.00			
Wed	12.00	23.00	State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur	12.00	23.00	Christmas eve/Christmas day/Boxing day/New years day/Spring and August bank holidays/Good Friday/Easter Sunday/Easter Monday plus any other bank holidays 12.00 – 01.30		
Fri	12.00	00.00	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 (please read guidance note 5)		
Sat	12.00	00.00			
Sun	12.00	22.00			

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) Amplified and Unamplified music		
Mon	12.00	23.00			
Tue	12.00	23.00	State any seasonal variations for the playing of recorded music (please read guidance note 4) Christmas eve/Christmas day/Boxing day/New years day/Spring and August bank holidays/Good Friday/Easter Sunday/Easter Monday plus any other bank holidays 12.00 – 01.30		
Wed	12.00	23.00			
Thur	12.00	23.00	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 (please read guidance note 5)		
Fri	12.00	00.00			
Sat	12.00	00.00			
Sun	12.00	22.00			

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	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon	12.00	23.00			
Tue	12.00	23.00			
Wed	12.00	23.00			
			State any seasonal variations for the performance of dance (please read guidance note 4)		
Thur	12.00	23.00	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 (please read guidance note 5)		
Fri	12.00	00.00			
Sat	12.00	00.00			
Sun	12.00	22.00			

H

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 entertainment you will be providing Discothèque, Weddings and Parties		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon	12.00	23.00		Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Tue	12.00	23.00	<u>Please give further details here</u> (please read guidance note 3) Live music amplified		
Wed	12.00	23.00			
Thur	12.00	23.00	<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)		
Fri	12.00	00.00	Christmas eve/Christmas day/Boxing day/New years day/Spring and August bank holidays/Good Friday/Easter Sunday/Easter Monday plus any other bank holidays 12.00 – 01.30		
Sat	12.00	00.00	<u>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</u> (please read guidance note 5)		
Sun	12.00	22.00			

I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2) N/A	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Wed					
Thur			<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)		
Fri					
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4) Christmas eve/Christmas day/Boxing day/New years day/Spring and August bank holidays/Good Friday/Easter Sunday/Easter Monday plus any other bank holidays 12.00 – 01.30 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)		
Mon	12.00	23.30			
Tue	12.00	23.30			
Wed	12.00	23.30			
Thur	12.00	23.30			
Fri	12.00	00.30			
Sat	12.00	00.30			
Sun	12.00	22.30			

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

Name Lisa Marie Philpott	
Address 10 Pioneer Road Oakhurst Swindon Wiltshire	
Postcode	SN25 2HZ
Personal licence number (if known) 881120028	
Issuing licensing authority (if known) Swindon Borough Council	

K

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).

N/A

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)	
Day	Start	Finish		
Mon	09.00	00.00	Christmas eve/Christmas day/Boxing day/New years day/Spring and August bank holidays/Good Friday/Easter Sunday/Easter Monday plus any other bank holidays 12.00 – 02.00	
Tue	09.00	00.00		
Wed	09.00	00.00		
Thur	09.00	00.00		<u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 5)
Fri	09.00	01.00		
Sat	09.00	01.00		
Sun	09.00	23.00		

M Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b, c, d and e) (please read guidance note 9)

The club currently holds a Club Premises Licence and has done for a great number of years, we wish to now hold a Premises Licence to allow us the opportunity to hire out our Function Room to the general public rather than limiting our trading to members only. With our current licence we adhere to all the four licensing objectives and wish to maintain our responsible attitude and approach to these objectives

b) The prevention of crime and disorder

We will actively co-operate with the local police to ensure that we are made aware of particular problems which affect the area and which may potentially affect the Football Club

We will not countenance the use or supply of illegal drugs and our staff will inform the police immediately of any such suspected activity on or in the vicinity of our premises.

Our employment policies are designed to ensure we recruit professional and reputable staff

c) Public safety

The premises comply with all requisite health and safety legislation.

We carry out regular health and safety risk assessments

In the most unlikely event that a greater number of people congregate in the premises than is conducive to public safety, we will not hesitate to ask people to leave the premises.

d) The prevention of public nuisance

Our doors and windows will be kept closed after 2200 to prevent transmission of noise.

Customers visiting the premises will be asked to leave the premises quietly and with due consideration for our neighbours. Signs are displayed on our exit doors reminding customers of this.

e) The protection of children from harm

We will endeavour to keep children protected from strong language and sexual expletives by making it clear that this behaviour is not acceptable, customers will be politely reminded by bar staff and posters will be displayed within the premises.

We apply a Challenge 21 policy and attend regular Pub Watch meetings to keep in touch with local police and licensing authorities.

Under 16's must be accompanied by a responsible adult

Checklist:


Please tick to indicate agreement

- I have made or enclosed payment of the fee.
- I have enclosed the 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 designated 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 SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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 (see guidance note 11). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	11/6/2013
Capacity	CLUBS SECRETARY

For joint applications, signature of 2nd applicant or 2nd 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 postal address for correspondence associated with this application (please read guidance note 13)

**John Smyth
6 Priory Close**

Post town	Hungerford	Postcode	RG17 0BG
-----------	-------------------	----------	-----------------

Telephone number (if any)	07585770148
---------------------------	--------------------

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)
johnsmyth@homecall.co.uk

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 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 the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. 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 or 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, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

Consent of individual to being specified as premises supervisor

Lisa Marie Philpott

I

[full name of prospective premises supervisor]

of

10 Pioneer Road,
Oakhurst,
Swindon,
Wiltshire,
SN25 2HZ

[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

Premises Licence

[type of application]

by

Hungerford Town Football Club

[name of applicant]

relating to a premises licence

[number of existing licence, if any]

for

[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by

Hungerford Town Football Club

[name of applicant]

concerning the supply of alcohol at

Hungerford Town Football Club,
Bulpit Lane,
Hungerford,
Berkshire,
RG17 0AP

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

881120028

[insert personal licence number, if any]

Personal licence issuing authority

Swindon Borough Council

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed



Name (please print)

Lisa Marie Philpott

Date

10th June 2013