[Insert name and address of relevant licensing authority and its reference number (optional)]

Application for the mandatory alcohol condition under the Licensing Act 2003 requiring a Designated Premises Supervisor in respect of a premises licence to be disapplied

- 1 FEB 2018

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 in written black ink. Use additional sheets if necessary.

Once completed please give your application to *[insert name and address of relevant licensing authority]*. You may wish to keep a copy of the completed form for your records.

being a board or committee of individuals with responsibility for the management of the community premises described in Part 1 below, and being the applicant for a premises licence / premises licence holder [delete as applicable] in respect of those premises apply for the condition referred to in section 19(4) of the Licensing Act 2003 to be included in the licence instead of the conditions referred to in section 19(2) and (3) of the said Act. (see guidance note 2).

Part 1 - Community premises details

Name of premises ACE SPACE	
Postal address of premises or, if none, ordn	ance survey map reference, or description NEWBURY RS14 SPR
Post town NEWBULY	Postcode RS14 5PR
Telephone number at premises (if any)	
Premises licence number (if applicable)	

	the proprietor of an educational establishment				please comp	lete section (B)			
f)	a health service body					please complete section (B)			
g)	Care Standard	erson who is registered under Part 2 of the estandards Act 2000 (c14) in respect of an ependent hospital in Wales					please complete section (B)		
ga)	a person who is registered under Chapter 2 of Part please complete section (1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England						lete section (B)		
h)	the chief officer of police of a police force in please complete se England and Wales						lete section (B)		
* If you are applying as a person described in (a) or (b) please confirm (by ticking yes to one box below):									
1 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 func		rine of Her M:	aiesty's pr	erogat	ive			
a function discharged by virtue of Her Majesty's prerogative									
(A) IN	NDIVIDUAL A	APPLICANTS	S (fill in as ap	plicable)					
(A) IN	NDIVIDUAL A	APPLICANTS Miss		plicable) Ms		er Title (for nple, Rev)			
	☐ Mrs				exan				
Mr	☐ Mrs			Ms First na	exan	nple, Rev)	se tick yes		
Mr	☐ Mrs			Ms First na	exan	nple, Rev)	se tick yes		
Mr Surna Date o	☐ Mrs			Ms First na	exan	nple, Rev)	se tick yes		
Mr Surna Date o Nation	☐ Mrs	Miss		Ms First na	exan	nple, Rev)	se tick yes		
Mr Surna Date o Nation	Mrs me of birth nality nt residential se if different freses address	Miss		Ms First na	exan	nple, Rev)	se tick yes		
Mr Surna Date of Nation Currer address premis	Mrs me of birth nality nt residential se if different freses address	Miss	1 am 18 ye	Ms First na	exan	nple, Rev)	se tick yes		

Please tick *yes as appropriate						
l have enclosed the premises licence						
I have enclosed the relevant part of the premises licence						
This form accompanies a new premises licence application	,					
If you are varying an existing licence and have not ticked one of the first please explain why in the box below.	two boxes above,					
Reasons why you have failed to enclose the premises licence or releven we have operated under a Club of Oate but believe this does not be needs in Juliue.	ant parts L'Celle to est soutour					
Any further information to support your application We believe that ACES pace fits the criterio building due to the nature and liversity of its believe the Current Club Licence no long model we have established. The Committee mature, practical and responsible people with an interest in Supporting local a community.	is made up of					
CHECKLIST:- Pleas	se tick - yes					
If applying to remove the mandatory requirements from an existing premises licence that already authorises alcohol sales						
- I have made or enclosed payment of the fee						
- I have included documents (if available) which identify the premises and how it is managed						
- I have included copies of any hiring agreements						
- I have sent a copy of this application to the chief officer of police						
- I understand that if I do not comply with the above requirements my application will be rejected						
If applying alongside a new application or variation for a permission	to allow alcohol sales					

- this application accompanies a new premises licence application / this application accompanies an application to vary an existing premises licence [delete as applicable]

- I understand that if I do not comply with th my application will be rejected	e above requirements	V				
IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.						
Part 3 - Signatures (Please see guidance note	5)					
Signature of applicants. Please provide two sign committee stating in what capacity they represent	nt the premises licence hold					
First Signature Adam Kotz						
First Signature Adam Kotz Date 19.01.18						
Capacity Charman (Second Signature	or belatt	of the				
Second Signature	see list	- wertest				
Date						
Capacity						
Contact name (where not previously given) with this application	and address for correspon	dence associated				
ARAM KOTE 21 CRAVEN RO						
Post town	Postcode					
NEUBURY	RG 14	5N4				
Telephone number (if any) 07905 590 214						
If you would prefer us to correspond with you by e mail your e mail address (optional) acespaceneshing Obtintemet. Com						

- I have enclosed the premises licence or relevant part of it or provided an explanation

ACE Space Committee Members 2018

Adam Kotz Chairman DOB 21/08/61

21 Craven Road, Newbury, RG14 5NG

Bryan Drew Trustee DOB 11/11/66

35 Pear Tree Lane, Newbury RG14 2LU

Richard Markham Treasurer DOB 20/05/57

Falkland House, Falkland Drive, Newbury RG14 6JQ

Paula Mitchell Trustee DOB 12/12/64

21 Angel Court, Pelican Lane, Newbury RG14 1NQ

Christopher Martin Trustee DOB 15/07/44

Swandene, Mount Rd, Highclere Newbury RG20 9QZ

Jim Crockatt Trustee DOB 26/05/52

13 Charles St, Newbury RG14 6QP

James Hollis Trustee DOB 08/09/77

Flat 9, Bartholomew Court, Bartholomew St, Newbury RG14 5HF

Stephen Ottner Trustee DOB 06/06/50

The Dell House, 6 Charmwood Close, Newbury RG14 1XA

All British citizens.