

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.

We, Medicine Events C.I.C.
(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			
Land at Wasing Park near Grid Reference SU 57996 64184			
Post town		Postcode	RG7 4NG

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£0

Part 2 - Applicant details

Please state whether you are applying for a premises licence as **Please tick as appropriate**

- | | | |
|--|-------------------------------------|-----------------------------|
| a) an individual or individuals * | <input type="checkbox"/> | please complete section (A) |
| b) a person other than an individual * | | |
| i as a limited company/limited liability partnership | <input checked="" type="checkbox"/> | please complete section (B) |
| ii as a partnership (other than limited liability) | <input type="checkbox"/> | please complete section (B) |
| iii as an unincorporated association or | <input type="checkbox"/> | please complete section (B) |
| iv other (for example a statutory corporation) | <input type="checkbox"/> | please complete section (B) |
| c) a recognised club | <input type="checkbox"/> | please complete section (B) |
| d) a charity | <input type="checkbox"/> | 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 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 (by ticking yes to one box below):

- 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 Ansell			First names Jenna		
Date of birth		I am 18 years old or over <input type="checkbox"/>		Please tick yes	
Nationality					
Current residential address if different from premises address					
Post town			Postcode		
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 15 for information)					

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		
Date of birth		I am 18 years old or over		<input type="checkbox"/> Please tick yes	
Nationality					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service: (please see note 15 for information)					
Current residential 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 Medicine Events C.I.C.
Address 82 St. John Street, London, EC1M 4JN
Registered number (where applicable) 12163886
Description of applicant (for example, partnership, company, unincorporated association etc.) Community Interest Company (Private Limited Company)
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?
As soon as possible

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

Land comprising fields and woodland on private estate. The area is some distance from properties in separate ownership and occupation and protected by a dip in the landscape.

The event is intended to focus on physical, mental, environmental and social health.

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 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all 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 7)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	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 4)		
Mon	09:00				
		16:00			
Tue					
Wed					
Thur	12:00				
		00:00			
Fri	09:00				
		00:00			
Sat	09:00				
		00:00			
Sun	09:00				
		00:00			
			State any seasonal variations for performing plays (please read guidance note 5)		
			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 6)		

B

Films Standard days and timings (please read guidance note 7)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	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 4)		
Mon	00:00	16:00			
Tue			State any seasonal variations for the exhibition of films (please read guidance note 5)		
Wed					
Thur	12:00	00:00	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 (please read guidance note 6)		
Fri	00:00	02:00			
	08:00	00:00			
Sat	00:00	02:00			
	08:00	00:00			
Sun	00:00	02:00			
	08:00	00:00			

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Wed			
Thur			<u>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</u> (please read guidance note 6)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)		Indoors <input type="checkbox"/>	
					Outdoors <input type="checkbox"/>	
					Both <input type="checkbox"/>	
Day	Start	Finish	Please give further details here (please read guidance note 4)			
Mon						
			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 5)			
Tue						
			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 (please read guidance note 6)			
Wed						
Thur						
Fri						
Sat						
Sun						

E

Live music Standard days and timings (please read guidance note 7)			Will the performance of live music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) Outdoor performance of live music is to cease by 00:00 on each day. Live music outside of these times is likely to be at background and may consist of performances such as an acoustic guitar or within small groups of individuals		
Mon	08:00	16:00			
Tue					
Wed					
Thur	12:00	00:00			
Fri	12:00	00:00			
Sat	12:00	00:00			
Sun	12:00	00:00			

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	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 4)		
Mon	08:00	16:00			
Tue					
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 5)		
Thur	12:00	00:00			
Fri	08:00	00:00	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 6)		
Sat	00:00	04:00			
	08:00	00:00			
Sun	00:00	04:00			
	08:00	00:00			

G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>	
Day	Start	Finish		Outdoors	<input type="checkbox"/>	
				Both	<input checked="" type="checkbox"/>	
Mon	00:00		16:00	<u>Please give further details here</u> (please read guidance note 4)		
Tue						
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)			
Thur	09:00		00:00			
Fri	00:00		00:00		<u>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</u> (please read guidance note 6)	
Sat	00:00		00:00			
Sun	00:00		00:00			

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
Mon	00:00			Outdoors	<input type="checkbox"/>
		16:00		Both	<input checked="" type="checkbox"/>
Tue			Please give further details here (please read guidance note 4)		
Wed					
Thur	09:00		State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)		
		00:00			
Fri	00:00				
		00:00	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 (please read guidance note 6)		
Sat	00:00				
		00:00			
Sun	00:00				
		00:00			

I

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon	00:00	03:00			
Tue					
			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
Wed					
Thur					
	23:00	00:00	<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 6)		
Fri	00:00	03:00			
	23:00	00:00			
Sat	00:00	03:00			
	23:00	00:00			
Sun	00:00	03:00			
	23:00	00:00			

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises <input type="checkbox"/>
				Off the premises <input type="checkbox"/>
				Both <input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)	
Mon				
Tue				
Wed				
Thur				
Fri				
Sat				
Sun				
			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 6)	

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name	
Date of birth	
Address	
NOTE THAT ALCOHOL SALES HAVE NOT BEEN APPLIED FOR AND ACCORDINGLY THERE IS NO NEED TO APPOINT A DPS	
Postcode	
Personal licence number (if known)	
Issuing licensing authority (if known)	

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 9).

None

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	00:00		<p><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 6)</p> <p>NOTES: Persons may camp on the site during the event. The area may be used for activities that are not licensable and therefore no restriction should be imposed on the presence of the public</p>
		21:00	
Tue			
Wed			
Thur	12:00		
		00:00	
Fri	00:00		
		00:00	
Sat	00:00		
		00:00	
Sun	00:00		
		00:00	

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 10)

1. This licence shall **only** have effect for one 120-hour period (ie from Thursday to Monday) each calendar year
2. At least three calendar months prior to an event that is planned to be operated under this licence, an Event Management Plan ('EMP') shall be made available to the licensing authority, authority responsible for safety, the authority responsible for environmental protection and to the police.
 - a) This plan shall address itself, as appropriate, to the provisions of the current Approved Code of Practice entitled "The guide to Health, Safety and Welfare at Music and Other Events" ("The Purple Guide") issued under section 16 of the Health and Safety at Work Act 1974, the CIEH National Guidance for Outdoor and Mobile Catering.
 - b) The plan shall have regard to and set out :
 - The profile of the audience
 - The type of Regulated Entertainment to be provided
 - Details of any performance artists that have been booked or are anticipated to be booked for a licensable activity
 - The capacity anticipated
 - A plan of the areas to be used for licensable activities (this to be taken as the plan for the purposes of this licence for the event)
 - Details of any temporary structures to be used
 - Glass Management
 - Traffic Management, including emergency access and egress
 - Details of water supplies to be installed
3. Terms and Conditions of Entry including a list of prohibited and/or contraband items shall be set by the Event Organiser and advertised in advance using the methods outlined in the EMP
4. The Event Organiser shall ensure a policy is contained within the EMP and on the ticketing advice regarding the possession of psychoactive substances on the premises. The Event Organiser shall refuse entry or eject individual/s from the event as per the Eviction Policy and Terms and Conditions of Entry.
5. All staff will be provided with training in relation to the licensing objectives that are commensurate with their duties. This will include the individual's responsibilities, age verification and licensing offences, as appropriate. Details of the training will be recorded in a personnel file or log book and will be refreshed at regular intervals
6. The Event Organiser shall maintain an incident/refusals logbook or log books in bound format which shall be used to record full details of all incidents. This shall give the details of the persons involved, their apparent age and a description of them or their name, a description of the incident, the date and time, actions taken, final outcome of the situation and the date and time of entry, along with the name of the person making the entry. This shall be completed as soon as possible and in any case no later than the close of business on the day of the incident. The record shall be maintained available for inspection throughout the event and at a notified address thereafter.

b) The prevention of crime and disorder

7. The event organiser shall ensure that the following details for each door supervisor, are contemporaneously entered into a bound register kept for that purpose:
- (i) Full name,
 - (ii) SIA Certificate number and or badge number, or registration number of any accreditation scheme recognised by the Licensing Authority (including expiry date of that registration or accreditation),
 - (iii) The time they began their duty
 - (iv) The time they completed their duty.

This register is to be kept at the premises at all times during the course of the event and at a notified address after the event. The register shall be maintained so as to enable an authorised officer of the Licensing Authority or a constable to establish the particulars of all door stewards engaged at the premises during the event and shall be open to inspection by authorised officers of the Licensing Authority or a constable upon request

8. The Event organiser shall define behaviours likely to invoke an eviction (including but not limited to causing disturbance, anti-social behaviour, entry without a valid ticket, drug dealing, unauthorised selling) under the Evictions policy. This policy shall also include details on the process for removing persons from the event site by the event security staff as expediently as possible, duty of care procedures in particular for juveniles and other vulnerable people, onwards travel arrangements where required for evictees and where necessary the handing over of persons to Police where a substantive criminal offence has occurred.

c) Public safety

All safety matters at the premises are adequately covered by statutory provisions such as The Health and Safety at Work (etc) Act 1974 and The Regulatory Reform (Fire Safety) Order 2005.

d) The prevention of public nuisance

9. The Event Organiser shall develop and comply with a noise management plan specific for the event that will have regard to The Noise Council published 'Code of Practice on Environmental Noise Control at Concerts'. The completion of the preparation of this plan shall be notified to the Licensing Authority no less than two months prior to the event date, unless otherwise agreed in writing or the plan is the same as in previous years. A copy of the plan shall be provided to any Responsible Authority upon request.

NB: Although the event is not a 'concert', this guide is noted as being the most appropriate guidance on noise control that is currently available.

10. Noise monitoring points shall be established for each event, having regard to any advice provided by the Responsible Authority for protection of the environment. Details of the date and time of any sound propagation test shall be provided to this Authority as soon as they are confirmed.
11. Where noise monitoring indicates that the planned limits for licensable activities as set out in the noise management plan are exceeded, the Event Organiser shall take immediate action to arrange that the sound level is reduced.
12. The outdoor performance of amplified live music is to cease by 00:00 on each day.

NB: It is recognised that the provisions of the Environmental Protection Act 1990 and the Noise Act 1996 will apply to these premises and accordingly there will be additional statutory controls in place.

13. Waste receptacles for use by patrons shall be provided and emptied at appropriate intervals.
14. A telephone number shall be provided to the Licensing Authority, published on the Event Organiser's website and made available to any member of the public in the locality or a parish council or responsible authority that requests it. This number will be monitored whilst licensable activities are taking place and a record made of any complaints that are received. Any complaints will be responded to as soon as reasonably practicable and the resultant actions recorded in the Incident Log

e) The protection of children from harm

15. A lost child policy shall be established between the Event Organiser and the Security contractor. Details shall be included within the Event Management Plan. 21.
16. A dedicated area is provided for vulnerable patrons (i.e. through alcohol, drugs isolation, underage, etc.) that have come to the attention of staff employed at the premises. This area will be for the safeguarding and appropriate support and first aid (if required) of such persons.

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.
- [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15).

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.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 12). If signing on behalf of the applicant, please state in what capacity.

Declaration	<ul style="list-style-type: none">• [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15)• The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)
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Signature	
Date	3/1/2020
Capacity	Lawyers and agents for the applicant

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 13). 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 14)			
Post town		Postcode	
Telephone number (if any)	(/	/
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) applications@licensinglawyers.co.uk			