11/01034/104

MN 137332 £100

1 1 JUL 2011

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.

app des the	(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										
Bee Wo	Postal address of premises or, if none, ordnance survey map reference or description Beech Hill Memorial Hall Wood Lane Beech Hill										
Pos	t town	Reading			Post code	RG7 2BE					
Tele	enhone	number at premises (if any)	none			<u></u>					
 		stic rateable value of premises	£1925								
		Sho rateable value of prefinees	21020			· 					
Par	t 2 - A _l	oplicant Details									
Plea	ase sta	te whether you are applying for	•	ence a se tick							
a)	an in	dividual or individuals			please comple	ete section (A)					
b)	a per	son other than an individual *									
	i.	as a limited company			please comple	ete section (B)					
	ii.	as a partnership			please comple	ete section (B)					
	iii.	as an unincorporated associatio	n or		please comple	ete section (B)					
	ìv.	other (for example a statutory co	orporation)		please comple	ete section (B)					
c)	a rec	ognised club			please comple	ete section (B)					
d)	a cha	arity		\boxtimes	please comple	ete section (B)					

e) the proprietor of an educational estable	ishment	please complete section (B)								
f) a health service body		please complete section (B)								
g) a person who is registered under Part Care Standards Act 2000 (c14) in resp 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) pleas									
		Please tick yes								
 I am carrying on or proposing to carrying the premises for licensable activities 		which involves the use of								
 I am making the application pursuant 	nt to a									
 statutory function or 										
 a function discharged by virtu 	ue of Her Maj <mark>esty</mark>	s prerogative								
(A) INDIVIDUAL APPLICANTS (fill in as ap	oplicable)									
	100	- II / I								
Mr Mrs Miss		her Title (for ample, Rev)								
l <u>a</u>	Cinct mana	. /								
Surname	First name									
I am 18 years old or over	First name	☐ Please tick yes								
	First name									
I am 18 years old or over Current postal address if different from premises	First name									
I am 18 years old or over Current postal address if different from premises address	First name	Please tick yes								
I am 18 years old or over Current postal address if different from premises address Post Town	First name	Please tick yes								
I am 18 years old or over Current postal address if different from premises address Post Town Daytime contact telephone number E-mail address		Please tick yes								
I am 18 years old or over Current postal address if different from premises address Post Town Daytime contact telephone number E-mail address (optional)	olicable)	Postcode Postcode her Title (for ample, Rev)								
Current postal address if different from premises address Post Town Daytime contact telephone number E-mail address (optional) SECOND INDIVIDUAL APPLICANT (if app	olicable)	Postcode Postcode her Title (for ample, Rev)								

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
Beech Hill Memorial Hall Trustees
Address
Beech Hill Memorial Hall
Wood Lane
Beech Hill
Reading
RG7 2BE
Desirtand number (alternative Control
Registered numbe r (where applicable) Charity No 300116
Description of applicant (for example, partnership, company, unincorporated association etc.)
Village Hall Truste es
Telephone number (if any)
none
E-mail address (optional)
gc.jabell@btintern et.com

Part 3 Operating Schedule

When do you want the premises licence to start?	Day Month Year 0 1 0 7 2 0 1 1
If you wish the licence to be valid only for a limited period, when do you want it to end?	Day Month Year

Please give a general description of the premises (please read guidance note1) Village Hall within its own grounds with dedicated parking, the hall is for use by the village community and by persons who hire the hall for charity, dance, keep fit, party and social events. The parish council meets in the hall.						
	000 or more people are expected to attend the premises at any time, please state the number expected to attend.					
Wha	at licensable activities do you intend to carry on from the premises?					
	ase see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and nsing Act 2003)	2 to the				
<u>Prov</u>	vision of regulated entertainment	Please tick yes				
a)	plays (if ticking yes, fill in box A)	\boxtimes				
b)	films (if ticking yes, fill in box B)	\boxtimes				
c)	indoor sporting events (if ticking yes, fill in box C)	\boxtimes				
d) -	boxing or wrestling entertainment (if ticking yes, fill in box D)					
e)	live music (if ticking yes, fill in box E)	\boxtimes				
f)	recorded music (if ticking yes, fill in box F)	\boxtimes				
g)	performances of dance (if ticking yes, fill in box G)	\boxtimes				
h)	anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)					
Prov	vision of entertainment facilities:					
i)	making music (if ticking yes, fill in box I)					
j)	dancing (if ticking yes, fill in box J)	\boxtimes				
k)	entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)	\boxtimes				
Prov	vision of late night refreshment (if ticking yes, fill in box L)					
Sup	ply of alcohol (if ticking yes, fill in box M)	\boxtimes				
In al	Il cases complete boxes N, O and P					

Α

	Plays Standard days and timings (please read		Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	\boxtimes
	ice note 6		(prease road guidance note 2)	Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read guant any performance would be within the general hire from 12 noon to 12 midnight		
Tue					
Wed			State any seasonal variations for performing puidance note 4)	olays (please r	ead
Thur					
Fri			Non standard timings. Where you intend to us for the performance of plays at different times the column on the left, please list (please read	to those liste	d in
Sat			periodically, if requested by hirers		
Sun					

Films Standard days and timings (please read			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	X		
guidar	nce note 6	5)		Outdoors			
Day	Start	Finish		Both			
Mon			Please give further details here (please read guidance note 3) any exhibition would be within the general hire times and typically from 12 noon to 12 midnight				
Tue							
Wed			State any seasonal variations for the exhibition of films (please read guidance note 4)				
Thur							
Fri			Non standard timings. Where you intend to us for the exhibition of films at different times to column on the left, please list (please read guid	those listed ir			
Sat			periodically, if requested by hirers				
Sun							

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3) any indoor sport would be within the general hire times and typically from 12 noon to 12 midnight; the opportunity is limited to keep fit and perhaps badminton
Day	Start	Finish	•
Mon			
Tue			State any seasonal variations for indoor sporting events (please read guidance note 4)
Wed			
Thur			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			periodically, if requested by hirers
Sat			
Sun			

D					
Boxing or wrestling entertainments Standard days and			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	
timings	(please r ce note 6)	read	please tick (please read guidance note 2)	Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read gun/a	idance note 3)	
Tue					
Wed	·#####################################		State any seasonal variations for boxing or wrentertainment (please read guidance note 4)	estling	
Thur					
Fri			Non standard timings. Where you intend to us for boxing or wrestling entertainment at different listed in the column on the left, please list (please)	ent times to th	iose
Sat			note 5) n/a		
Sun					

Live music Standard days and timings (please read			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	\boxtimes	
	nce note 6		(produce road gardenies road 2)	Outdoors	\boxtimes	
Day	Start	Finish		Both	X	
Mon			Please give further details here (please read guany performance would be within the general hire from 12 noon to 12 midnight			
Tue						
Wed			State any seasonal variations for the performance of live mus (please read guidance note 4)		usic	
Thur					!	
Fri			Non standard timings. Where you intend to us for the performance of live music at different to listed in the column on the left, please list (please)	imes to those		
Sat			note 5) periodically, if requested by hirers			
Sun						

Recorded music Standard days and timings (please read		ind	Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	\boxtimes	
	ice note 6		(piedes read galdarios rioto 2)	Outdoors	×	
Day	Start	Finish		Both	×	
Mon			Please give further details here (please read guany performance would be within the general hire from 12 noon to 12 midnight			
Tue	-EVARAL - SALE					
Wed			State any seasonal variations for the playing of recorded mu (please read guidance note 4)			
Thur						
			Non standard timings. Where you intend to us for the playing of recorded music at different to listed in the column on the left, please list (please list).	imes to those	2	
Sat	ARSSANIS L.		note 5) periodically, if requested by hirers			
Sun						

Performances of dance Standard days and timings (please read		ınd read	Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors			
	Start	Finish	1	D-41-			
Day	Start	rinisn		Both			
Mon			Please give further details here (please read guidance note 3) any performance would be within the general hire times and typically from 12 noon to 12 midnight				
Tue							
Wed			State any seasonal variations for the performance of dance (please read guidance note 4)				
Thur)						
Fri			Non standard timings. Where you intend to us for the performance of dance at different times the column on the left, please list (please read	to those liste	ed in		
Sat			periodically, if requested by hirers		,		
Sun	***************************************						

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 entertable providing	inment you w	<u>rîll</u>
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick please read	Indoors	
Mon			guidance note 2)	Outdoors	
				Both	
Tue			Please give further details here (please read guidance note 3		
Wed					
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)		
Fri					
Sat			Non standard timings. Where you intend to us for the entertainment of a similar description to within (e), (f) or (g) at different times to those I column on the left, please list (please read guid	o that falling isted in the	<u>:s</u>
Sun					

Provision of facilities for making music Standard days and timings (please read guidance note 6)			Please give a description of the facilities for m will be providing sound system and equipment in the main hall	aking music y	<u>(ou</u>		
			Will the facilities for making music be indoors or outdoors or both – please tick	Indoors			
			(please read guidance note 2)	Outdoors			
Day	Start	Finish		Both	$ \Box $		
Mon Tue			Please give further details here (please read gu	idance note 3)			
Wed		State any seasonal variations for the provision of facilities for making music (please read guidance note 4)					
Thur			- -				
Fri			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				
Sat			guidance note 5) periodically, if requested by hirers				
Sun							

J

Provision of facilities for dancing Standard days and			Will the facilities for dancing be indoors or outdoors or both - please tick (see guidance note 2)	Indoors	\boxtimes
timings (please read			Hote 2)	Outdoors	
guidan	ce note 6)		Both	
			Please give a description of the facilities for de providing sound system and hall floor	ancing you wi	ll be
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed		·	State any seasonal variations for providing da (please read guidance note 4)	ncing facilitie	S
Thur					
Fri :			Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please		
Sat		-	list (please read guidance note 5) periodically, if requested by hirers		
Sun					

Provision of facilities for entertainment of a similar description to that falling within i or j Standard days and timings (please read guidance note 6)		ent of a tion to hin i or j and read	Please give a description of the type of enterta you will be providing village social events, parties ,receptions and various providing village social events.		t y	
Day	Start	Finish	Will the entertainment facility be indoors or outdoors or both – please tick (please read	Indoors	×	
Mon			guidance note 2)	Outdoors	図	
				Both		
Tue	Please give further details here (please read guidance note			uidance note 3)	
Wed						
Thur			State any seasonal variations for the provision of facility entertainment of a similar description to that falling with (please read guidance note 4)			
Fri						
				.4		
Sat			Non standard timings. Where you intend to use the premises for the 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 (please read guidance note 5) periodically, if requested by hirers			
Sun			,,,			

L

Late night refreshment Standard days and timings (please read			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	
	ce note 6		piedee Liek (piedee read galdarioe riote 2)	Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read gun/a	idance note 3)	
Tue					
Wed	Wed		State any seasonal variations for the provision refreshment (please read guidance note 4)	of late night	
Thur					
Fri			Non standard timings. Where you intend to us for the provision of late night refreshment at d those listed in the column on the left, please li	ifferent times.	to
Sat			guidance note 5) n/a		
Sun					

Supply of alcohol Standard days and timings (please read			Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises		
	nce note (guidance note 1)	Off the premises		
Day	Start	Finish		Both		
Mon			State any seasonal variations for the supply of	f alcohol (plea	se	
	12	10.30	read guidance note 4) CHRISTMAS (NEW YEAR TO 622.30)	.		
Tue			1000000			
	12	10.30				
Wed						
	12	10-30				
Thur			Non standard timings. Where you intend to us			
	12	10.30	for the supply of alcohol at different times to to column on the left, please list (please read guid	different times to those listed in the st (please read quidance note 5)		
Fri			At village functions and whenever requested by hi	rers		
	12	17-30				
Sat						
	12	14.30	4			
Sun			2			
	12	17-30				

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

Name Mr Robert W	Name Mr Robert Walton MBE					
Address Trunkwell Ma Beech Hill Beech Hill	ansion House)					
Postcode	RG7 2AT					
Personal Li 013821	cence number (if known)					
Issuing lice West Berks	ssuing licensing authority (if known) West Berks					

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)
none

Hours premises are open to the public Standard days and timings (please read guidance note 6)		olic and read	State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			
Wed			
			Non standard timings. Where you intend the premises to be
Thur			open to the public at different times from those listed in the column on the left, please list (please read guidance note 5) Any day between 7am and midnight, as requested by hirers
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)
nothing beyond existing Health and Safety/Fire Safety etc requirements hirers and users are to adhere to the rules set down by the management committee'
b) The prevention of crime and disorder
Only specified people have the door codes. A designated trustee is present and the start and end of each individual hiring. A contact number is available for each hirer in case of problems. There is a full security system and CCTV
c) Public safety
All hirers are given a comprehensive listing of the facilities available and how they should be used safely. there is a fire alarm and security system in place with emergency lighting.
d) The prevention of public nuisance
Only specified people have the door codes. A designated trustee is present and the start and end of each individual hiring. A contact number is available for each hirer in case of problems. There is a full security system and CCTV. Neighbouring residents also have a contact phone number in case of problems - we do not allow music beyond 12 midnight
e) The protection of children from harm
Hirers sign that they are responsible for all people who attend the hiring, including children. The site is fenced and will be gated.

		Please tic	k yes		
•	I have mad	de or enclosed payment of the fee	\boxtimes		
•	I have enc	losed the plan of the premises	\boxtimes		
•	I have sen others whe	t copies of this application and the plan to responsible authorities and ere applicable	\boxtimes		
•	I have enc supervisor	losed the consent form completed by the individual I wish to be premises , if applicable	\boxtimes		
•	I understar	nd that I must now advertise my application	\boxtimes		
•	l understar be rejected	nd that if I do not comply with the above requirements my application will	\boxtimes		
STA	NDARD SC	NCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE CALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A MENT IN OR IN CONNECTION WITH THIS APPLICATION	A.		
Part	4 – Signati	ures (please read guidance note 10)			
S ign guida	ature of ap ance note 1	pplicant or applicant's solicitor or other duly authorised agent (See 1). If signing on behalf of the applicant please state in what capacity.			
Signa	ature	Bell.			
Date	C.S.	3 th July 2011			
Capa	icity	Treasurer and Vice Chairman [TAustee]			
auth	orised age	ations signature of 2 nd applicant or 2 nd applicant's solicitor or other nt. (please read guidance note 12). If signing on behalf of the applican what capacity.			
Signa	ature				
Date					
Capa	icity				
asso Graha Selbo	ciated with am Bell	where not previously given) and postal address for correspondence this application (please read guidance note 13) Chapel Drive,			
Post	town Re	eading Post code RG7 2BH			
relep	hone num	ber (if any) work 01256 766673			
f you	you would prefer us to correspond with you by e-mail your e-mail address (optional)				

Consent of individual to being specified as premises supervisor

Robert Walton MBE	
[full name of prospective pre	nises supervisor]
of	
Trunkwell Mansion House Beech Hill Road Beech Hill Reading Berks	
[home address of prospective premi	ses supervisor]
hereby confirm that I give my supervisor in relation to the ap	y consent to be specified as the designated premises
Premises Licence	
[type of application]	
by	
Beech Hill Memorial Hall Tru	stees
[name of applicant]	
relating to a premises licence	[number of existing licence, if any]
for	
Beech Hill Memorial Hall Wood Lane Beech Hill RG7 2BE	
[name and address of premises to wh	hich the application relates]

and any premises licence by	e to be granted or varied in respect of this application made
Beech Hill Memorial Ha	
[name of applicant]	······································
concerning the supply of	alcohol at
Beech Hill Memorial Hai Wood Lane Beech Hill RG7 2BH	
[name and address of premise	es to which application relates]
I also confirm that I am a licence, details of which I	applying for, intend to apply for or currently hold a personal set out below.
Personal licence number 013821	
[insert personal licence numbe	r, if any]
Personal licence issuing a	authority
[insert name and address and	telephone number of personal licence issuing authority, if any]
Signed	
Name (please print)	Robert Walton MBE
Date	8 July 2011