Appendix 1 211778

City of Bradford MDC

Bradford Temporary Event Notice Licensing Act 2003

For help contact licensingteam@bradford.gov.uk Telephone: 01274 432240

			* required Information
Section 1 of 9			
You can save the form at any	time and resume it l	ater. You do not need	to be logged in when you resume.
System reference	Not Currently In U	se	This is the unique reference for this application generated by the system.
Your reference	The Commercial in	n	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
Are you an agent acting on b	ehalf of the applican	t?	Put "no" if you are applying on your own
C Yes @	No		behalf or on behalf of a business you own or work for.
Applicant Details			
* First name	jodie		
* Family name	rayner		
* E-mail			
Main telephone number			Include country code.
Other telephone number		···· · · · · · · · · · · · · · · · · ·	
Indicate here if you wo	uld prefer not to be c	ontacted by telephon	e
Are you:			
 Applying as a business 	or organisation, inclu	ding as a sole trader	A sole trader is a business owned by one person without any special legal structure.
 Applying as an individu 	ıal		Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.
Applicant Business			
Is your business registered in the UK with Companies House?	C Yes	No	Note: completing the Applicant Business section is optional in this form.
ls your business registered outside the UK?	C Yes	No	
Business name	The Commercial Inc	n	If your business is registered, use its registered name.
VAT number	262410045		Put "none" if you are not registered for VAT.
Legal status	Partnership		

Continued from previous page		
		, i
Your position in the business	drinks premises superviser	
Home country	United Kingdom	The country where the headquarters of your business is located.
Business Address		If you have one, this should be your official address - that is an address required of you
Building number or name	61	by law for receiving communications.
Street	park road	-
District	thackley	
City or town	bradford	
County or administrative area	west yorkshire	
Postcode	bd10 Orr	
Country	United Kingdom	
Section 2 of 9		
APPLICATION DETAILS (See	also guidance on completing the form, gen	eral notes and note 1)
Have you had any previous or	maiden names?	
C Yes		
the second as a set to be the		Annlicant must be 18 years of age or older
* Your date of birth	del mm sisses	Applicant must be 18 years of age or older
National Insurance number	dd mm yyyy	This box need not be completed if you are an individual not liable to pay UK national insurance.
	dd mm yyyy bradford	This box need not be completed if you are an individual not liable to pay UK national
National Insurance number		This box need not be completed if you are an individual not liable to pay UK national
National Insurance number Place of birth Correspondence Address		This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details
National Insurance number Place of birth Correspondence Address	bradford	This box need not be completed if you are an individual not liable to pay UK national insurance.
National Insurance number Place of birth Correspondence Address Is the address the same as (or a	bradford similar to) the address given in section one?	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely
National Insurance number Place of birth Correspondence Address Is the address the same as (or a great state).	bradford similar to) the address given in section one?	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely
National Insurance number Place of birth Correspondence Address Is the address the same as (or a yes) Building number or name	bradford similar to) the address given in section one? No	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely
National Insurance number Place of birth Correspondence Address Is the address the same as (or a great or name) Building number or name Street	bradford similar to) the address given in section one? No 81 park road	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely
National Insurance number Place of birth Correspondence Address Is the address the same as (or a yes) Building number or name Street District	bradford similar to) the address given in section one? C No 61 park road thackley bradford	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely
National Insurance number Place of birth Correspondence Address Is the address the same as (or a yes) Building number or name Street District City or town	bradford similar to) the address given in section one? C No 61 park road thackley bradford	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely

0 11 11			
Continued from previous page.	199		
Additional Contact Details			
Are the contact details the sa	me as (or similar to) those given in section one?	If "Yes" is selected you can re-use the details	
	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.	
E-mail			
Telephone number			
Other telephone nui			
Section 3 of 9			
THE PREMISES			
Give the address of the premi	ses where you intend to carry on the licensable a Inance Survey references). (<u>See also guidance o</u>	activities or if it has no address give a detailed	
© Yes	C No		
-	(NO		
Address Is the address the same as for	similar to) the address given in section one?	Idas and a second	
• Yes	No	If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.	
* Building number or name	61		
* Street	park road		
District	thackley		
* City or town	bradford		
County or administrative area	west yorkshire		
* Postcode	bd10 0rr		
* Country	United Kingdom		
* Does a premises licence or club premises certificate have effect in relation to the premises (or any part of the premises)?			
C Neither © Premise	c Club premises certificate		
* Premises licence number	072501		
Location Details			
* Provide further details about the location of the event			
Outside in the car park at the s	aid addresss, This is a charity event or local peop	e.	

Continued from previous page If you intend to use only part of description and details below (the premises at this address or intend t see also guidance on completing the fo	o restrict the area to which this notice applies, give a
No we intend to use all of the premises.		
		1
Describe the nature of the pren	nises below (see also guidance on comp	leting the form, note 4)
public house		
Describe the nature of the ever	nt below (see also guidance on complete	ing the form, note 5)
Charity Event with live music	(Academia e a a a a a a a a a a a a a a a a a a	
Section 4 of 9		
LICENSABLE ACTIVITIES		
	hat you intend to carry on at the premis	es
(see also guidance on complet		
The sale by retail of alcoh		
The supply of alcohol by member of the club	or on behalf of a club to, or to the order	rof, a
The provision of regulate	ed entertainment	(See also guidance on completing the form. note 7).
The provision of late nig	ht refreshment	
☐ The giving of a late temp	porary event notice	Late notices can be given no later than 5 working days but no earlier than 9 working days before the event.
		(See also guidance on completing the form, note 8).
Event Dates		
There must be a period of at I when you will be using these	east 10 working days between the date premises for licensable activities.	you submit this form and the date of the earliest event
State the dates on which you	intend to use these premises for licensa	ble activities
(see also guldance on comple	ating the form, note 9)	
Event start date	04 / 08 / 2018 dd mm yyyy	The maximum period for using premises for licensable activities under the authority of a temporary event notice is 168 hours or seven days.
		-
Event end date	04 / 08 / 2018 dd mm yyyy	

0-4				
Continued from previous page	•			
State the times during the event period that you propose to carry on licensable activities				
(give times in 24 hour clock) (see also guidance on				
completing the form, note 10	1			
State the maximum number of people at any one time that you intend to allow to be present at the premises		Note that the maximum number of people		
during the times when you intend to carry on licensable	400	cannot exceed 499.		
activities, including any staff,				
organisers or performers (see also quidance on				
completing the form, note 11)				
	nclude the supply of alcohol, state whether the on on or off the premises, or both ting the form, note 12):			
C On the premises only				
C Off the premises only				
© Both				
Section 5 of 9				
RELEVANT ENTERTAINMENT	(See also guidance on completing the form	<u>н, лоte 13)</u>		
State if the licensable activities will include the provision of relevant entertainment. If so, state the times during the event period that you propose to provide relevant entertainment				
period trial you propose to pro	THE CONTENT OF CONTENT			
14.00 till 21.30	Prido I di Ortali i di I			
	The Island of the Island			
	The Island of th			
	The state of the s			
14.00 till 21.30 Section 6 of 9	S (See also guidance on completing the form	t. note 14)		
14.00 till 21.30 Section 6 of 9		n. note 14)		
Section 6 of 9 PERSONAL LICENCE HOLDER Do you currently hold a valid	S (See also guidance on completing the form Yes No	t. note 14)		
Section 6 of 9 PERSONAL LICENCE HOLDER Do you currently hold a valid personal licence?	S (See also guidance on completing the form Yes No	t. note 14)		
Section 6 of 9 PERSONAL LICENCE HOLDER Do you currently hold a valid personal licence? Provide the details of your personal house the details of your per	S (See also guidance on completing the form Yes No sonal licence below.	t. note 14)		
Section 6 of 9 PERSONAL LICENCE HOLDER Do you currently hold a valid personal licence? Provide the details of your personal licensing authority	S (See also guidance on completing the form Yes No sonal licence below. Bradford 093702	t. note 14)		
Section 6 of 9 PERSONAL LICENCE HOLDER Do you currently hold a valid personal licence? Provide the details of your personal licensing authority Licence number	S (See also guidance on completing the form Yes No sonal licence below. Bradford	t, note 14)		

Continued from previous page					
Section 7 of 9					11/0-110-
PREVIOUS TEMPORARY EVEN	TNO	TICES (S	ee also quida	псе ог	n completing the form, note 15)
Have you previously given a temporary event notice in respect of any premises for events falling in the same calendar year as the event for which you are now giving this temporary event notice?	6	Yes	C	No	
State the number of temporary event notices (including the number of late temporary event notices, if any) you have given for events in that same calendar year	01				
Have you already given a temporary event notice for the same premises in which the event period: a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice?		Yes	િ	No	
Section 8 of 9		āra:			
ASSOCIATES AND BUSINESS	COLL	EAGUES	(See also gu	dance	e on completing the form, note 16)
Has any associate of yours given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice?	0	Yes	6	No	
Has any associate of yours already given a temporary event notice for the same premises in which the event period: a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice?	544	Yes	©	No	

Continued from previous page				
Has any person with whom you are in business carrying on licensable activities given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice?		©	No	
Has any person with whom you are in business carrying on licensable activities already given a temporary event notice for the same premises in which the event period: a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice?	(Yes	©	No	
Section 9 of 9				
CONDITION (See also quidar	nce on completing the	form.	note 18)	
It is a condition of this temporary event notice that where the relevant licensable activities described in Sections 4 and 5 above include the supply of alcohol that all such supplies are made by or under the authority of the premises user.				
PAYMENT DETAILS				
This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.				
This formality requires a fixed fee of £21				
DECLARATION (See also guidance on completing the form, note 19)				
I understand that it is an offence:(i) to knowingly or recklessly make a false statement in connection with this temporary event notice and that a person is liable on conviction for such an offence to a fine up to level 5 on the standard scale; and (ii) to permit an unauthorised licensable activity to be carried on at any place and that a person is liable on conviction for any such offence to a fine not exceeding £20,000, or to imprisonment for a term not exceeding six months, or to both. Ticking this box indicates you have read and understood the above declaration				
This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"				
* Full name	Jodie Louise Rayner			
* Capacity	Drinks Premises Super	rviser a	nd Manager	
* Date	13 / 07 / 20	18		
	dd mm yy	уу		
	Add anoth	ner signa	atory	

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Continued from previous page... Once you're finished you need to do the following: 1. Save this form to your computer by clicking file/save as... 2. Go back to https://www.gov.uk/apply-for-a-licence/temporary-event-notice/bradford/apply-1 to upload this file and continue with your application. Don't forget to make sure you have all your supporting documentation to hand. OFFICE USE ONLY The Commercial Inn Applicant reference number Fee paid Payment provider reference ELMS Payment Reference Payment status Payment authorisation code Payment authorisation date Date and time submitted Approval deadline Error message Is Digitally signed 1 <u>2 3 4 5 6 7 8 9</u> Next >