

* required information

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| Section 1 of 9 | | |
| You can save the form at any t | ime and resume it later. You do not need to be | logged in when you resume. |
| System reference | Not Currently In Use | This is the unique reference for this application generated by the system. |
| Your reference | | 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 be O Yes | half of the applicant? No | Put "no" if you are applying on your own behalf or on behalf of a business you own or work for. |
| Applicant Details | | |
| * First name | |] |
| * Family name | |] |
| * E-mail | |] |
| Main telephone number | |] Include country code. |
| Other telephone number | |] |
| 🔲 Indicate here if you wou | Id prefer not to be contacted by telephone | |
| Are you: | | |
| Applying as a business of | or organisation, including as a sole trader | A sole trader is a business owned by one |
| Applying as an individual | al | person without any special legal structure. 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? | Yes O No | Note: completing the Applicant Business section is optional in this form. |
| Registration number | 12880294 |] |
| Business name | Globetrotters Bar & Golf Ltd | If your business is registered, use its registered name. |
| VAT number GB | 380187784 | Put "none" if you are not registered for VAT. |
| Legal status | Private Limited Company |] |
| | | |

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|---|---|--|
| Your position in the business | Director | |
| Home country | United Kingdom | The country where the headquarters of your business is located. |
| Registered Address | | Address registered with Companies House. |
| Building number or name | | |
| Street | | |
| District | | |
| City or town | | |
| County or administrative | | |
| Postcode | | |
| Country | United Kingdom | |
| | | |
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| APPLICATION DETAILS (See a | also guidance on completing the form, gener | ral notes and note 1) |
| Have you had any previous or | maiden names? | |
| ⊖ Yes | • No | |
| * Your date of birth | | 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. |
| Place of birth | | |
| Correspondence Address Is the address the same as (or s | similar to) the address given in section one? | If "Yes" is selected you can re-use the details |
| • Yes | ○ No | from section one, or amend them as required. Select "No" to enter a completely new set of details. |
| Building number or name | | |
| Street | | |
| District | | |
| City or town | | |
| County or administrative area | | |
| Postcode | | |
| Country | United Kingdom | |

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| Additional Contact Details | | |
| Are the contact details the same | ne as (or similar to) those given in section one? | If "Yes" is selected you can re-use the details from section one, or amend them as |
| • Yes | ○ No | required. Select "No" to enter a completely new set of details. |
| E-mail | | |
| Telephone number | | |
| Other telephone number | | |
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| THE PREMISES | | |
| activity at the premises describ Give the address of the premis | es where you intend to carry on the licensable a nance Survey references). <u>(See also guidance o</u> | activities or if it has no address give a detailed |
| Address | | |
| | imilar to) the address given in section one? | If "Yes" is selected you can re-use the details from section one, or amend them as |
| ⊖ Yes | No | required. Select "No" to enter a completely new set of details. |
| * Building number or name | County Mall Shopping Centre | |
| * Street | Southgate Avenue | |
| District | | |
| * City or town | Crawley | |
| County or administrative area | West Sussex | |
| * Postcode | RH10 1FG | |
| * Country | United Kingdom | |
| * Does a premises licence or cl to the premises (or any part of | ub premises certificate have effect in relation the premises)? | |
| • Neither O Premise | es licence O Club premises certificate | |
| Location Details | | |
| * Provide further details about | the location of the event | |
| Unit 79 - 80 | | |
| | f the premises at this address or intend to restri (see also guidance on completing the form, not | |

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Describe the nature of the premises below (see also guidance on completing the form, note 4)

Describe the nature of the event below (see also guidance on completing the form, note 5)

Indoor 9 hole mini golf course, games venue and cafe.

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LICENSABLE ACTIVITIES

State the licensable activities that you intend to carry on at the premises (see also guidance on completing the form, note 6):

The sale by retail of alcohol

The supply of alcohol by or on behalf of a club to, or to the order of, a member of the club

The provision of regulated entertainment

- The provision of late night refreshment
- The giving of a late temporary event notice

(See also guidance on completing the form, note 7).

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 least 10 working days between the date you submit this form and the date of the earliest event when you will be using these premises for licensable activities.

State the dates on which you intend to use these premises for licensable activities

(see also guidance on completing the form, note 9)

| Event start date | 27 / 12 / 2022 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 | 31 / 12 / 2022 dd mm yyyy | |

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| 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) State the maximum number of people at any one time that you intend to allow to be present at the premises during the times when you | | Note that the maximum number of people |
| intend to carry on licensable activities, including any staff, organisers or performers (see also guidance on completing the form, note 11) | 70 | cannot exceed 499. |
| | iclude the supply of alcohol, state whether the | |
| supplies will be for consumptic | on on or off the premises, or both | |
| (see also guidance on completi | <u>ng the form, note 12)</u> : | |
| On the premises only | | |
| Off the premises only | | |
| O Both | | |
| Section 5 of 9 | | |
| RELEVANT ENTERTAINMENT | <u>(See also guidance on completing the form</u> | |
| State if the licensable activities period that you propose to pro | will include the provision of relevant entertain vide relevant entertainment | ment. If so, state the times during the event |
| | | |
| Section 6 of 9 | | |
| PERSONAL LICENCE HOLDERS | <u>(See also guidance on completing the form</u> | <u>n, note 14)</u> |
| Do you currently hold a valid personal licence? | • Yes 🔿 No | |
| Provide the details of your pers | | |
| | onal licence below. | |
| Issuing licensing authority | onal licence below. | |
| | onal licence below. | |
| Issuing licensing authority | onal licence below. |] |

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| Section 7 of 9 | | | | | | |
| PREVIOUS TEMPORARY EVEN | IT N | otices <mark>(s</mark> | ee <mark>also guid</mark> a | nce on completin | ng 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? | 0 | Yes | ۲ | No | | |
| 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? | 0 | Yes | ۲ | No | | |
| Section 8 of 9 | | | | | | |
| ASSOCIATES AND BUSINESS | COL | EAGUES | (See also gui | dance on comple | ting 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 | ۲ | 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? | 0 | Yes | $oldsymbol{eta}$ | No | | |
| 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? | 0 | Yes | $oldsymbol{eta}$ | No | | |

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|--|---|
| 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 |
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| CONDITION (See also guidan | ce on completing the form, note 18) |
| • | ry event notice that where the relevant licensable activities described in Sections 4 and 5 ohol that all such supplies are made by or under the authority of the premises user. |
| This fee must be paid to the au | thority. If you complete the application online, you must pay it by debit or credit card. |
| This formality requires a fixed fe | ee of £21 |
| DECLARATION (See also guid | ance on completing the form, note 19) |
| liable on summary conviction (ii) to permit an unauthorised | nake a false statement in connection with this temporary event notice and that a person is for such an offence to a fine of any amount; and licensable activity to be carried on at any place and that a person is liable on summary ce to a fine of any amount, or to imprisonment for a term not exceeding six (6) months, or to |
| \boxtimes Ticking this box indicate | es you have read and understood the above declaration |
| This section should be complet behalf of the applicant?" | ed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on |
| * Full name | |
| * Capacity | Director |
| * Date | 28 / 10 / 2022 dd mm yyyy |
| continue with your application | uter by clicking file/save as .uk/apply-for-a-licence/temporary-event-notice/crawley/apply-1 to upload this file and |

OFFICE USE ONLY

| 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</u> <u>3</u> <u>4</u> <u>5</u> <u>6</u> <u>7</u> <u>8</u> <u>9</u> Next > |