

Crawley Temporary Event Notice Licensing Act 2003

For help contact licensing@crawley.gov.uk

Telephone: 1293438000

* required information

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	half of the applicant? Io	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	ld prefer not to be contacted by telephone					
Are you:						
Applying as a business of Applying as an individual	or organisation, including as a sole trader	A sole trader is a business owned by one 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?	YesNo	Note: completing the Applicant Business section is optional in this form.				
Registration number	11442589					
Business name	DIPPLE TIPPLE & CO	If your business is registered, use its registered name.				
VAT number -	300256459	Put "none" if you are not registered for VAT.				
Legal status	Private Limited Company					
		_				

Continued from previous page		
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 area		
Postcode		
Country		
Section 2 of 9		
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	
Enter details of any previous na	ames or maiden names	
First name		
Family name		
	Add another previous name	 1
***	The direction provides having	Applicant must be 18 years of age or older
* Your date of birth	dd mm yyyy	Applicant must be 10 years of age of older
National Insurance number		This box need not be completed if you are an
		individual not liable to pay UK national
		insurance.

Continued from previous page					
Correspondence Address	similar to) the address given in costion and?	16.34			
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 from section one, or amend them as			
Yes	○ No	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					
Additional Contact Details					
Are the contact details the sam	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					
Section 3 of 9					
THE PREMISES					
activity at the premises described Give the address of the premised description (including the Ord	es where you intend to carry on the licensable a nance Survey references). (See also guidance o	activities or if it has no address give a detailed			
* Does the premises have an a	ddress?				
○ Yes	No				
* Does a premises licence or cl to the premises (or any part of	ub premises certificate have effect in relation the premises)?				
Neither	es licence Club premises certificate				
Location Details					
Give an Ordance Survey (OS) map reference (if a full address has not been given)		Give an Ordnance Survey (National Grid) reference e.g. TL683365			
* Provide further details about	the location of the event				
Queens Square, Crawley RH10	1HG				

Continued from previous page						
	rt of the premises at this address or int ow <u>(see also guidance on completing t</u>	end to restrict the area to which this notice applies, give a <u>he form, note 3)</u>				
We intend to operate from Events.	We intend to operate from our 3x3m gazebo pitch, as part of the larger Crawley Continental Street Market, organised by RR Events.					
Describe the nature of the p	premises below <u>(see also guidance on c</u>	completing the form, note 4)				
We intend to just operate fi	rom our 3x3m gazebo pitch					
Describe the nature of the e	event below <u>(see also guidance on com</u>	upleting the form, note 5)				
We intend to sell sealed bo	ttles of alcohol for off-site consumptio	n				
	·					
Section 4 of 9						
LICENSABLE ACTIVITIES						
(see also guidance on comp	-	emises				
	cohol					
The supply of alcohol member of the club	by or on behalf of a club to, or to the o	rder of, a				
☐ The provision of regul	The provision of regulated entertainment (See also guidance on completing the form note 7).					
☐ The provision of late r	night refreshment					
☐ The giving of a late te	mporary 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						
•	t least 10 working days between the da se premises for licensable activities.	ate you submit this form and the date of the earliest event				
State the dates on which yo	ou intend to use these premises for lice	nsable activities				
(see also guidance on comp	oleting the form, note 9)					
Event start date	26 / 10 / 2023 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	29 / 10 / 2023 dd mm yyyy					

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)	10:00 - 19:00	
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 intend to carry on licensable activities, including any staff, organisers or performers (see also guidance on completing the form, note 11)	15	Note that the maximum number of people cannot exceed 499.
supplies will be for consumption (see also guidance on completing)	nclude the supply of alcohol, state whether the on on or off the premises, or both ing the form, note 12):	
 On the premises only 		
Off the premises only		
○ Both		
Section 5 of 9		
RELEVANT ENTERTAINMENT	(See also guidance on completing the form	n, note 13)
State if the licensable activities period that you propose to pro	will include the provision of relevant entertains vide relevant entertainment	ment. If so, state the times during the event
N/A		
Section 6 of 9		
PERSONAL LICENCE HOLDERS	(See also guidance on completing the forn	n, note 14)
Do you currently hold a valid personal licence?	YesNo	
Provide the details of your pers	sonal licence below.	
Issuing licensing authority		
Licence number		
Date of issue	dd mm yyyy	
Any further relevant details		

Continued from previous page									
Section 7 of 9									
PREVIOUS TEMPORARY EVEN	TNO	OTICES (See also guid	lar	nce on completin	ng th	e form, n	ote 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?	•	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	43								
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	•		No				
Section 8 of 9									
ASSOCIATES AND BUSINESS (COLI	EAGUES	(See also gu	Jid	lance on comple	eting	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	•		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	•		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 guida	nce on completing the f	orm	<u>, note 18)</u>	
			ne relevant licensable activities described in Sections 4 and 5 re 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 gui	dance on completing th	e fo	rm, note 19)	
(i) to knowingly or recklessly make a false statement in connection with this temporary event notice and that a person is liable on summary conviction for such an offence to a fine of any amount; and				
 (ii) to permit an unauthorised licensable activity to be carried on at any place and that a person is liable on summary * conviction for any such offence to a fine of any amount, or to imprisonment for a term not exceeding six (6) months, or to both. 				
☐ Ticking this box indicates you have read and understood the above declaration				
This section should be comple behalf of the applicant?"	eted by the applicant, unle	ess y	ou answered "Yes" to the question "Are you an agent acting on	
* Full name				
* Capacity	Director			
* Date	04 / 10 / 202 dd mm yyyy			
	Add another	r sigr	natory	

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/crawley/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** 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

Next >

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>