

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	time and resume it later. You do not need to b	oe 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	JO/206 - The Jubilee Oak, Crawley	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 behalf of the applicant? • Yes • 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	Reece	
* Family name	Messenger	
* E-mail		
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if the app	licant would prefer not to be contacted by tel	ephone
Is the applicant:		
Applying as a business of Applying as an individue	or organisation, including as a sole trader al	A sole trader is a business owned by one person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.
Applicant Business		
Is the applicant's business registered in the UK with Companies House?	YesNo	Note: completing the Applicant Business section is optional in this form.
Registration number	1709784	
Business name	JD Wetherspoon plc	If the applicant's business is registered, use its registered name.
VAT number	396331433	Put "none" if the applicant is not registered for VAT.
Legal status	Public Limited Company	

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Applicant's position in the business	Pub Manager			
	United Kingdom	The country where the applicant's		
Home country	Offited Kingdoffi	headquarters are.		
Registered Address		Address registered with Companies House.		
Building number or name	Wetherspoon House			
Street	Reeds Crescent			
District				
City or town	Watford			
County or administrative area				
Postcode	WD24 4QL			
Country	United Kingdom			
Agent Details				
* First name	Jennie			
* Family name	Odell			
* 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:				
 An agent that is a busine 	ess or organisation, including a sole trader	A sole trader is a business owned by one person without any special legal structure.		
A private individual acting as an agent				
Agent Business				
Is your business registered in the UK with Companies House?	Yes	Note: completing the Applicant Business section is optional in this form.		
Registration number	1709784			
Business name	JD Wetherspoon plc	If your business is registered, use its registered name.		
VAT number -	396331433	Put "none" if you are not registered for VAT.		
Legal status	Public Limited Company			

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Your position in the business	Licensing Paralegal	
Home country	United Kingdom	The country where the headquarters of your business is located.
Agent Registered Address		Address registered with Companies House.
Building number or name	Wetherspoon House	
Street	Reeds Crescent	
District		
City or town	Watford	
County or administrative area		
Postcode	WD24 4QL	
Country	United Kingdom	
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 I		
○ Yes	● No	
* Your date of birth	dd mm yyyy	Applicant must be 18 years of age or older
National Insurance number		This box need not be completed if you are an individual not liable to pay UK national insurance.
Place of birth		
Address		
Is the address the same as (or s	imilar 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	Wetherspoon House	
Street	Reeds Crescent	
District		
City or town	Watford	
County or administrative area		
Postcode	WD24 4QL	
Country	United Kingdom	

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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 required. Select "No" to enter a completely new set of details.	
○ Yes	No		
You must enter a valid email	address		
E-mail			
Telephone number			
Other telephone number			
Section 3 of 9			
THE PREMISES			
activity at the premises describ Give the address of the premis	ve notice under section 100 of the Licensing Acced below. es where you intend to carry on the licensable and annue 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		
Address Is the address the same as (or s	similar to) the address given in section one? • 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	The Jubilee Oak		
* Street	Grand Parade, 6 High Street		
District			
* City or town	Crawley		
County or administrative area			
* Postcode	RH10 1BA		
* 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)?		
O Neither Premise	es licence Club premises certificate		
* Premises licence number	05/00001/LAPRE		
Location Details			
* Provide further details about the location of the event			

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Whole Premises		
If you intend to use only description and details b	part of the premises at this address or intend pelow (see also guidance on completing the	d to restrict the area to which this notice applies, give a form, note 3)
Whole Premises		
Describe the nature of the	ne premises below <u>(see also guidance on con</u>	npleting the form, note 4)
Public House		
Describe the nature of the	ne event below (see also guidance on comple	eting the form, note 5)
To extend the terminal I	hour for the sale of alcohol and late night refi	reshment for the Christmas Festvities
Section 4 of 9		
LICENSABLE ACTIVITIES	S	
State the licensable activ	vities that you intend to carry on at the premi	ises
(see also guidance on co	ompleting the form, note 6):	
	f alcohol	
The supply of alcol member of the clu	hol by or on behalf of a club to, or to the orde b	er of, a
☐ The provision of re	gulated entertainment	(See also guidance on completing the form, note 7).
	te night refreshment	
☐ The giving of a late temporary 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		
	of at least 10 working days between the date these premises for licensable activities.	you submit this form and the date of the earliest event
State the dates on which	n you intend to use these premises for license	able activities
(see also guidance on co	ompleting the form, note 9)	
Event start date	21 / 12 / 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.

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Event end date	22 / 12 / 2023 dd mm yyyy	
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 intend to carry on licensable activities, including any staff, organisers or performers (see also guidance on completing the form, note 11)	499	Note that the maximum number of people cannot exceed 499.
	nclude the supply of alcohol, state whether the on or off the premises, or both ing the form, note 12):	
On the premises only		
Off the premises only		
Both		
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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 entertain ovide relevant entertainment	ment. If so, state the times during the event
Section 6 of 9		
PERSONAL LICENCE HOLDERS	S (See also guidance on completing the form	n, note 14)
Do you currently hold a valid personal licence?	Yes	
Provide the details of your pers	sonal licence below.	
Issuing licensing authority		

icence numb	er		
/	ууууу		
NOTICES (S	ee also guida	nce on completir	ng the form, note 15)
) Yes	•	No	
) Yes	•	No	
LLEAGUES	(See also gui	dance on comple	eting the form, note 16)
) Yes	•	No	
) Yes	•	No	
	Yes Yes Yes Yes	Yes Yes LLEAGUES (See also guidant) Yes Yes	Yes • No NOTICES (See also guidance on completing the second of the sec

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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
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CONDITION (See also guidan	nce on completing the f	orm	, <u>note 18)</u>
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 guid	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. \(\times\) Ticking this box indicates you have read and understood the above declaration 			
This section should be comple behalf of the applicant?"	ted by the applicant, unl	ess y	ou answered "Yes" to the question "Are you an agent acting on
* Full name	Jennie Odell		
* Capacity	Licensing Paralegal		
* Date	28 / 09 / 202 dd mm yyyy		
	Add anothe	r sign	atory

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 provider reference

ELMS Payment Reference

Payment status

Payment authorisation code

Payment authorisation date

Date and time submitted

Approval deadline

Error message

Is Digitally signed

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