

Licensing Authority: *The Licensing Partnership*

Licensing Partnership
P.O. Box 182
Sevenoaks
Kent TN13 1GP

Ref:

Application for a Premises Licence under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes found at bottom of Page 4 of this form.

Use the blank page at the end of the form to provide further details if necessary.

When it is complete you can submit the form directly to us - click on the Submit Form button.

You may wish to print and keep a copy of the completed form for your records.

For help information about filling in this type of electronic form, click on the help information button.

I / We 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

Postal address of premises or, if none, ordnance survey map reference or description

Post town

Post code

Telephone number of premises (if any)

Non-domestic rateable value of premises

£

If the premises is under construction please check here

If the premises hasn't been assigned a rateable value yet, please check here

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please make selection with an "x"

- a) An individual or individuals* please complete section (A)
- b) a person other than an individual*
- i as a limited company please complete section (B)
- ii. as a partnership please complete section (B)
- iii. as an unincorporated association or please complete section (B)
- iv. other (for example a statutory corporation) please complete section (B)
- c) A recognised club please complete section (B)
- d) a charity please complete section (B)

- e) the proprietor of an educational establishment please complete section (B)
- f) a health service body please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an 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) please confirm:

Please make selection with an "x"

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a:
 - statutory function or
 - a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Title

Mr

Surname

King

First names

Scott Michael

Are you 18 years or older?

- Yes
- No

Date of Birth

[Redacted]

Nationality

[Redacted]

Current postal address if different from premises address

[Redacted]

Post Town

[Redacted]

Postcode

[Redacted]

Daytime contact telephone number

[Redacted]

Email address (optional)

[Redacted]

SECOND INDIVIDUAL APPLICANT (IF APPLICABLE)

Title

Mrs

Surname

King

First names

Laura Anne

Date of Birth
(you must be 18
years old or over)

Nationality

Current postal
address
if different from
premises address

Postcode

Post Town

Daytime contact telephone number

Email address
(optional)**(B) OTHER APPLICANTS** *You do not have to fill in this section.*

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint nature (other than a body corporate), please give the name and address of each party concerned.

Name

Address

Registered number (where applicable)

Description of applicant (for example,
partnership, company, unincorporated
association etc.)

Telephone number (if any)

E-mail address (optional)

Part 3 - Operating Schedule

When do you want the premises licence to start?

11/02/2022

If you wish the licence to be valid only for a limited period, when do you want it to end?

If 5,000 or more people attend the premises at any one time, please state the number expected to attend

General description of premises (please read guidance note 1)

The premises comprises a 10 acre field and is bordered by a 2.5 acre ash plantation/woodland along the eastern side. The closest neighbours are at Elses Farm, which lies to the north. The main entrance to the premises is from Morleys Road.

Any events held on the field or in the woodland would be 'pop-up' events as the premises is largely unused the rest of the time. There will only be alcohol at the events held on the site, and this would be consumed as part of the general event.

What licensable activities do you intend to carry on from the premises?
(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Please check all relevant boxes

Provision of regulated entertainment (please read guidance note 2)

- | | |
|--|-------------------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input checked="" type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input checked="" type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g)
(if ticking yes, fill in box H) | <input checked="" type="checkbox"/> |

Provision of late night refreshment (if ticking yes, fill in box L)

Supply of alcohol (if ticking yes, fill in box M)

In all cases complete boxes N, O and P

A

Plays Standard days and timings (please read guidance note 7)			<u>Will the performance of a play take place indoors or outdoors or both - please make selection with an "x"</u> (please read guidance note 3).	Indoors	
Day	Start	Finish		Outdoors	
Mon			<u>Please give further details here</u> (please read guidance note 4)	Both	
Tue					
Wed					
Thur			<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun					

B

Films Standard days and timings (please read guidance note 7)			<u>Will the exhibition of films take place indoors or outdoors or both - please make selection with an "x"</u> (please read guidance note 3).	Indoors	
Day	Start	Finish		Outdoors	X
Mon	15:00	22:00	<u>Please give further details here</u> (please read guidance note 4) The activity would consist of a pop-up outdoor cinema, organised by an external company and adhering to the premises standards. This would be for the local community/town of Sevenoaks to enjoy and open to all.	Both	
Tue	15:00	22:00			
Wed	15:00	22:00	<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)		
Thur	15:00	22:00			
Fri	15:00	23:00	<u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat	15:00	23:00			
Sun	15:00	21:00			

E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both - please make selection with an "x"</u> (please read guidance note 3).	Indoors		
Day	Start	Finish		Outdoors	X	
				Both		
Mon	09:00	22:00	<p><u>Please give further details here</u> (please read guidance note 4)</p> <p>Any live music events will be family-friendly and conscious of the setting. No large music festivals or undesirable live music will be permitted. Where music will be amplified, there will be strict cut off times. Unamplified music might also be used.</p>			
Tue	09:00	22:00				
Wed	09:00	22:00		<p><u>State any seasonal variations for performance of live music</u> (please read guidance note 5)</p>		
Thur	09:00	22:00				
Fri	09:00	23:00			<p><u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)</p>	
Sat	09:00	23:00				
Sun	09:00	21:00				

F

Recorded music Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music take place indoors or outdoors or both - please make selection with an "x"</u> (please read guidance note 3).	Indoors	
Day	Start	Finish		Outdoors	
				Both	
Mon			<p><u>Please give further details here</u> (please read guidance note 4)</p>		
Tue					
Wed			<p><u>State any seasonal variations for playing recorded music</u> (please read guidance note 5)</p>		
Thur					
Fri				<p><u>Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 6)</p>	
Sat					
Sun					

G

Performance of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place indoors or outdoors or both - please make selection with an "x" (please read guidance note 3).	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 4)	Both	
Tue					
Wed				State any seasonal variations for the performance of dance (please read guidance note 5)	
Thur					
Fri			Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list (please read guidance note 6)		
Sat					
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
			Food festivals including various different stalls from local businesses. Marquee based weddings. Live comedy.		
Day	Start	Finish	Will the entertainment take place indoors or outdoors or both - please make selection with an "x" (please read guidance note 3).	Indoors	
Mon	09:00	22:00		Outdoors	X
Tue	09:00	22:00	Please give further details here (please read guidance note 4)	Both	
Wed	09:00	22:00			
Thur	09:00	22:00		State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)	
Fri	09:00	23:00			
Sat	09:00	23:00	Non standard timings. Where you intend to use the premises for entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list (please read guidance note 6)		
Sun	09:00	21:00			

M

Supply of alcohol Standard days and timings (please read guidance note 7)			<u>Will the supply of alcohol be for consumption</u> <u>please make selection with an "x"</u> (please read guidance note 8).	On the premises	X
Day	Start	Finish		Off the premises	
Mon	12:00	22:00			
Tue	12:00	22:00	<u>State any proposed seasonal variations for the supply of alcohol</u> (please read guidance note 5) Supply of alcohol will only correspond to any event being held on the premises, and will be organised and set up by the event company running the event. Alcohol will not be supplied at any other time, if there is no event being held.		
Wed	12:00	22:00			
Thur	12:00	22:00			
Fri	12:00	23:00			
Sat	12:00	23:00	<u>Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun	12:00	21:00			

State the name and details of the individual whom you wish to specify on the licence as premises supervisor. (Please see declaration about the entitlement to work in the checklist at the end of the form):

Title	Mr
Surname	Bass
First Name(s)	Mark
Date of Birth	[REDACTED]
Address	[REDACTED]
Postcode	[REDACTED]
Personal Licence number (if known)	[REDACTED]
Issuing licensing authority (if known)	Tonbridge & Malling Borough Council

Please print the 'Consent of individual to being specified as premises supervisor' form (shown on pages 19 and 20), and have the person specified above sign and confirm the details given.

N

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 9)

NA

O

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variation</u> (please read guidance note 5)
Day	Start	Finish	
Mon	08:00	23:00	
Tue	08:00	23:00	
Wed	08:00	23:00	
Thur	08:00	23:00	<u>Non standard timings. Where you intend to use the premises to be open to the public at different times to those listed in the column on the left, please list</u> (please read guidance note 6)
Fri	08:00	23:00	
Sat	08:00	23:00	
Sun	08:00	22:00	

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 10)

Every event will be organised by experienced event companies. We are providing a space where the events can be held. As the site owners, our responsibilities to the licensing objectives are important to us and are something we always take into consideration when discussing any event possibility. Security too, and most events we'd like to host on our site are geared to be family friendly. We have also safely fenced our field from the public footpath that runs along the woodland border, to ensure the public have uninterrupted access to the fields beyond, without being caused inconvenience.

b) The prevention of crime and disorder

Every event company making use of our premises will be required to have a team member present for responsible management of the premises and the event. At events where alcohol is present, licensed security staff (amount of staff dependent on size of the event) will be employed to ensure drunkenness and drunk behaviour is prevented and/or dealt with in the least disruptive way possible. It is a premises requirement that there are no glass items of any kind, disposable containers only. Waste disposal areas will be provided by the event companies, and under contract they must ensure the premises is left as clean and tidy as when they arrived. Where events are continuing into dark hours, lighting will be provided to ensure safety of event attendees and to discourage disruptive behaviour.

c) Public safety

Although a spacious premises, as license holders we eventually plan to live on site, so keeping event capacity to sensible levels is desired. We don't want thousands of event attendees and will always work with any event company to ensure numbers are kept reasonable. This will mitigate any risks posed by events with thousands of attendees, which would be inappropriate for the premises. Events will take place outdoors only, in areas fenced from the public to ensure their safety and to cause as little inconvenience to them as possible. Site/parking attendants will be provided by the events company and will be responsible for the safe arrival and exit of all attendees in an orderly manner.

d) The prevention of public nuisance

A majority of the events held on site will be catered to be family-friendly and we are conscious of the surrounding area. Noise which might affect neighbours and other members of the public will be kept in accordance with an events contract between ourselves and the company running an event. Event closing times must be strictly adhered to by the event company. Some larger events might put on their own transport for attendees to limit dependence on public transport to the area, and to limit any event attendees leaving the event in a disorderly manner.

e) The protection of children from harm

At events which have been marked clearly as unsuitable for children, no child or underage person will be allowed access to the event. Any other event run will be family-friendly, where adults must accompany young children during the event, and the event will end at an appropriate time. Trained event company staff will ask for ID from persons who look under 21 before being sold alcohol. Any movies shown as part of the outdoor cinema events will clearly state the rating on any marketing and children will not be permitted entry to the event unless suitable ID can be provided. Any live comedy shows which are deemed unsuitable for children will be shown on the marketing and under 18s will not be allowed entry.

Please make selection with an "x"

I have enclosed the plan of the premises

I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable

I understand that I must now advertise my application

I understand that if I do not comply with the above requirements my application will be rejected

[Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships.] I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15).

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

Part 5 - Declaration (please read guidance note 11)

Confirmation of applicant or applicant's solicitor or other duly authorised agent. (See guidance note 12) **If confirming on behalf of the applicant please state in what capacity.**

• [Applicable to all individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15).

• The DPS named in this application form is entitled to work in the UK, (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15).

Confirmation

Name Date

Capacity

Please print the 'Consent of individual to being specified as premises supervisor form (shown on pages 19 and 20), and have the person specified above sign and confirm the details given.

For joint applications confirmation of 2nd applicant or 2nd applicant's solicitor or other authorised agent. (please read guidance note 13) **If confirming on behalf of the applicant please state in what capacity.**

Confirmation

Name Date

Capacity

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)

Name

Address

Post Town

Postcode

Telephone number (if any)

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

Use this page if there is any other information that you think we should know about.
Information entered on this page will be sent to us, along with the data on the rest of the form when you use the "Submit" option.

'Consent of individual as designated premises supervisor' form is being completed by Mark Bass and a hard copy will be sent in the post to the specified address ASAP.

Notes for Guidance are available online

Consent of individual to being specified as premises supervisor

Please print this form and ask the person being specified as premises supervisor to fill in the below.

Certain details have been pre-populated from data given on this online form. Please amend any incorrect information or add details where necessary.

Please return this completed form to:

Licensing Partnership
P.O. Box 182
Sevenoaks
Kent TN13 1GP

I, **Mr Mark Bass**

[Full name of prospective premises supervisor]

of

[Redacted address]

[Home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

A premises licence

[Type of application]

by **We**

[name of applicant]

relating to a premises licence

[Number of existing licence, if any]

for **Little Elses
Morleys Road
Sevenoaks Weald**

[Name and address of the premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by

We

[Name of applicant]

concerning the supply of alcohol at

**Little Elses
Morleys Road
Sevenoaks Weald**

[Name and address of the premises to which the application relates]

Consent of individual to being specified as premises supervisor (cont.)

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

[insert personal licence number, if any]

Personal licence issuing authority

Tonbridge & Malling Borough Council

[Name and address and telephone number of personal licence issuing authority, if any]

Signed

Name (please print)

Date

Form end

You have now reached the end of the form. If you have entered all the necessary information, and read all the guidance notes, please now submit the form.

XML Specific

Application Type

Licence Case Type

Licence Status

XML Template

CAPS Reference

Payments request

CallingAppID

CallingAppRef

PaymentSourceCode

Customer Message

Empty text area for Customer Message

Response response

PaymentAuthorisationCode

IncomeManagementReceiptNumber

OriginatorsReference

CardScheme

CardType

PaymentAmount

ResponseCode

ResponseDescription

Number of payment lines

Service Message

Empty text area for Service Message

Payment 1

Receipt Number

DueDate

PaymentType

Pay Description

XML Description

PaymentDue VAT

Paid

Payment Date

Fund

Reference

Payment 2

Receipt Number

DueDate

PaymentType

Pay Description

XMLDescription

PaymentDue VAT

Paid

Payment Date

Fund

Reference

Payment 3

Receipt Number

DueDate

PaymentType

Pay Description

XML Description

PaymentDue VAT

Paid

Payment Date

Fund

Reference

Payment 4

Receipt Number

DueDate

PaymentType

Pay Description

XML Description

PaymentDue VAT

Paid

Payment Date

Fund

Reference

Payment 5

Receipt Number

DueDate

PaymentType

Pay Description

XML Description

PaymentDue VAT

Paid

Payment Date

Fund

Reference

Case Overview

Form file name:	<input type="text"/>	Current Date	<input type="text"/>
Form data set reference	<input type="text" value="We/"/>	Date From	<input type="text"/>
Has been E-Signed	<input type="checkbox"/> Date/Time E-Signed		<input type="text"/>
Date/Time Submitted to main server	<input type="text"/>	Data Validation Reference	<input type="text"/>
Date/Time Submitted to external server	<input type="text"/>	Date/Time form Started	<input type="text" value="11/02/2022 11:08:57"/>

Automatic Messaging

Receipt Email Address	<input type="text"/>	Notification Email Address	<input type="text"/>
Receipt Email Subject	<input type="text"/>	Notification Email Subject	<input type="text"/>
Receipt Email Message	<input type="text"/>	Notification Email Message	<input type="text"/>
Mobile Number	<input type="text"/>		

Case Notes

CRM Integration

CRM Case Ref

Form History

11/02/2022 17:17:24 | Received on Remote Server
 11/2/2022 17:20:39 | Submitted | (,) | Application for a premises licence (1.0).wdf, 77973, Licence Inc Bexley, new | Ref: 077973-20211-GFBN8HB
 11/02/2022 17:17:24 | Received on Remote Server
 11/2/2022 17:20:39 | Submitted | (,) | Application for a premises licence (1.0).wdf, 77973, Licence Inc Bexley, new | Ref: 077973-20211-GFBN8HB

Form Database

Primary Record ID	<input type="text"/>	Secondary Record ID	<input type="text"/>
Department Name	<input type="text"/>	Form Status	<input type="text"/>
Depart Classification / Priority	<input type="text"/>	Search Field 3	<input type="text" value="Little Elses
Morleys Road
TN14 6QX"/>
Dept Case Reference	<input type="text"/>		
Date Record Started	<input type="text"/>		
Date Last Modified	<input type="text"/>		

Current User

Title	<input type="text"/>	Surname	<input type="text"/>	First Name	<input type="text"/>	User Record Id	<input type="text"/>
Tel No	<input type="text"/>	Email address	<input type="text"/>		Address	<input type="text"/>	
User Classification	<input type="text"/>						
Portal Username	<input type="text"/>	Expert for this form	<input type="text"/>				

System Data

Pages active with dynamic paging	<input type="text" value="1,2,3,4,5,13,14,15,16,17,20,21,22,6,8,9,12,18,19"/>				
Data Locked for Editing	<input type="text"/>	Date of offline forms creation	<input type="text"/>	Enable high-quality print (WDF)	<input type="checkbox"/>
Type of form - ufx, wdf or txt	<input type="text"/>	If TXT - Optimised for screen-readers	<input type="checkbox"/>	Enable top controls on opening	<input type="checkbox"/>
Start page for expert users	<input type="text"/>	Print Collation Config	<input type="text"/>		

Form Design Settings

Dynamic paging enabled	<input type="checkbox"/>	Use page titles for page menu	<input type="checkbox"/>	ESigning is available	<input type="checkbox"/>	After ESigning/Submission - go to page No?	<input type="checkbox"/>	TXT form is available	<input checked="" type="checkbox"/>
Pages with forced error checking	<input type="text"/>								
Pages that override forced error checking	<input type="text"/>								
Last visible page:	Unregistered users	<input type="checkbox"/>	Registered users:	<input type="checkbox"/>	Expert users:	<input type="checkbox"/>	Override for TXT version	<input type="checkbox"/>	
Default branding file:	<input type="text" value="UK Revenues & Benefits Branding (1.0)"/>		e.g. 'UK Revenues & Benefits Branding (1.0)'						
Shared Data Dictionary	<input type="text" value="Victoria Forms UK Licensing Data (1.0)"/>		e.g. 'Victoria Forms UK Government Data (1.0)'						
HTML pages within WDF	<input type="text" value="1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,20"/>					Page no for thumbnail	<input type="checkbox"/>		