



Crawley
Temporary Event Notice
Licensing Act 2003

For help contact
licensing@crawley.gov.uk
Telephone: 1293438000

* required information

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You can save the form at any time and resume it later. You do not need to be logged in when you resume.

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Your position in the business

Home country

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

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APPLICATION DETAILS [\(See also guidance on completing the form, general notes and note 1\)](#)

Have you had any previous or maiden names?

Yes No

Enter details of any previous names or maiden names

First name
Family name

* Your date of birth 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

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Address

Is the address the same as (or similar to) the address given in section one?

- 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

* Street

District

* City or town

County or administrative area

* Postcode

* Country

* Does a premises licence or club premises certificate have effect in relation to the premises (or any part of the premises)?

- Neither Premises licence Club premises certificate

* Premises licence number

Location Details

* Provide further details about the location of the event

If you intend to use only part of the premises at this address or intend to restrict the area to which this notice applies, give a description and details below [\(see also guidance on completing the form, note 3\)](#)

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

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

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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

[\(See also guidance on completing the form, 5 9.5\)](#)

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If the licensable activities will include the supply of alcohol, state whether the supplies will be for consumption on or off the premises, or both

[\(see also guidance on completing the form, note 12\):](#)

- On the premises only
- Off the premises only
- Both

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RELEVANT ENTERTAINMENT [\(See also guidance on completing the form, note 13\)](#)

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

Karaoke 20:00-00:00
Jukebox is available

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PERSONAL LICENCE HOLDERS [\(See also guidance on completing the form, note 14\)](#)

Do you currently hold a valid personal licence? Yes No

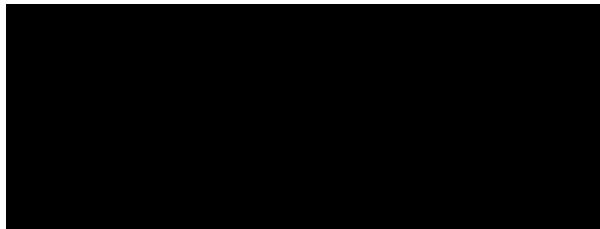
Provide the details of your personal licence below.

Issuing licensing authority

Licence number

Date of issue

Any further relevant details



Empty text box for providing further relevant details.

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PREVIOUS TEMPORARY EVENT NOTICES [\(See also guidance on completing the form, note 15\)](#)

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? Yes No

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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

1

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 Yes No
- b) Begins 24 hours or less after the event period proposed in this notice?

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ASSOCIATES AND BUSINESS COLLEAGUES [\(See also guidance on completing the form, note 16\)](#)

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?

- 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 Yes No
- b) Begins 24 hours or less after the event period proposed in this notice?

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?

- Yes 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:

Yes No

- a) Ends 24 hours or less before; or
- b) Begins 24 hours or less after the event period proposed in this notice?

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CONDITION [\(See also guidance on completing the form, note 18\)](#)

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) 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.

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OFFICE USE ONLY

Applicant reference number	<input type="text"/>
Fee paid	<input type="text"/>
Payment provider reference	<input type="text"/>
ELMS Payment Reference	<input type="text"/>
Payment status	<input type="text"/>
Payment authorisation code	<input type="text"/>
Payment authorisation date	<input type="text"/>
Date and time submitted	<input type="text"/>
Approval deadline	<input type="text"/>
Error message	<input type="text"/>
Is Digitally signed	<input type="checkbox"/>

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