Y Crawle Borough Council		
Your reference	Arasi01	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 actir	ng on behalf 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		
Indicate here if y	ou would prefer not to be contacted by t	relephone

# Are you:

- Applying as a business or organisation, including as a sole trader
- Applying as an individual

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  $\ \bigcirc$ the UK with Companies House?

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	United Kingdom	
Section 2 of 9		
APPLICATION DETAIL See	also guidance on completing the form, gene	ral notes and note 1)
Have you had any previous of	or maiden names?	
○ Yes	<ul><li>No</li></ul>	
* 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.insurance.

0 11 16 1		
Continued from previous page		
Additional Contact Details		
Are the contact details the sa	ame as (or similar to) those given in section (	orle":Yes" is selected you can re-use the detail from section one, or amend them as
<ul><li>Yes</li></ul>	○ 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 desc Give the address of the prem	ribed below.	ng Act 2003 of my proposal to carry out a temable activities or if it has no address give a decon completing the form, note 2)
* Does the premises have a	n address?	
<ul><li>Yes</li></ul>	○ No	
Address Is the address the same as (	(or similar to) the address given in section on	eff "Yes" is selected you can re-use the detail
○ Yes	<ul><li>No</li></ul>	from section one, or amend them as required. Select "No" to enter a completely new set of details.
* Building number or name	Arasi Restaurant	
* Street	6-14 High street	
District		
* City or town	Crawley	
County or administrative are	a	
* Postcode	RH10 1BN	
* Country	United Kingdom	
* Does a premises licence o to the premises (or any part	r club premises certificate have effect in relat of the premises)?	ion
Neither	ses licence Club premises certificate	
Location Details		
* Provide further details about	ut the location of the event	
we will serve alcohol in the p	oremises to the dine in customers.	
	t of the premises at this address or intend to visee also guidance on completing the form,	restrict the area to which this notice applies, g

Continued from previous page		
Describe the nature of the premises belowee also guidance on o	completing the form, note 4)	
Describe the nature of the event belowee also guidance on com-	npleting the form, note 5)	
Continue 4 of O		
Section 4 of 9 LICENSABLE ACTIVITIES		
State the licensable activities that you intend to carry on at the p	premises	
(see also guidance on completing the form, note 6):	7.61111666	
The supply of alcohol by or on behalf of a club to, or to the member of the club	order of, a	
☐ The provision of regulated entertainment	(See also guidance on completing the form, note 7).	
☐ The provision of late 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,	
Event Dates	<u>note 8)</u> .	
There must be a period of at least 10 working days between the when you will be using these premises for licensable activities.	e date you submit this form and the date of the earliest	
State the dates on which you intend to use these premises for li	censable activities	
(see also guidance on completing the form, note 9)		
Event start date		

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)	

Continued from previous page		
Section 7 of 9		
PREVIOUS TEMPORARY EVENT NOTICES also guidance on completing the form, note 15)		
Have you previously given a temporary event notice in		

#### Continued from previous page...

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?

## Section 9 of 9

CONDITION (See also guidance on completing the form, note 18)

Yes

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.

No

### 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 i 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 both.
- ☐ Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting behalf of the applicant?"

\* Full name

\* Capacity

60

\* Date

04 / 05 / 2023

mm

Add another signatory

уууу

Once you're finished you need to do the following:

1. Save this form to your computer by clicking file/save as...

dd

2. Go back to <a href="https://www.gov.uk/apply-for-a-licence/temporary-event-notice/crawley/applyto1upload">https://www.gov.uk/apply-for-a-licence/temporary-event-notice/crawley/applyto1upload</a> 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	Arasi01	
Fee paid		
Payment provider reference		
ELMS Payment Reference		
Payment status		
Payment authorisation code		