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 an	y time 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. is passed to the authority.
Are you an agent acting on b		Put "no" if you are applying on your own behalf or on behalf of a business you own owork for.
Applicant Details		
* First name		
* Family name		
* E-mail		
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if you wo	uld prefer not to be contacted by telephone	
Are you:		
<ul><li>Applying as a business</li></ul>	s or organisation, including as a sole trader	A sole trader is a business owned by one person without any special legal structure.
<ul> <li>Applying as an individu</li> </ul>	ual	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?	n • Yes    No	Note: completing the Applicant Business section is optional in this form.
Registration number	4488714	
Business name	Crawley Community Action	If your business is registered, use its registered name.
VAT number -		Put "none" if you are not registered for VAT
Legal status	Charity or Association	

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Your position in the business	Volunteers Manager	
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	1-2	
Street	Gleneagles Court, Brighton Road	
District	West Sussex	
City or town	Crawley	
County or administrative area		
Postcode	RH10 6AD	
Country	United Kingdom	
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APPLICATION DETAILSSee	also guidance on completing the form, gene	ral notes and note 1)
Have you had any previous o	or maiden names?	
* Your date of birth	dd mm yyyy	Applicant must be 18 years of age or older
National Insurance number	Street Gleneagles	This box need not be completed if you are an individual not liable to pay UK national Court 3 beet ansk oad
Place of birth		
Correspondence Address Is the address the same as (	or similar to) the address given in section on	ef "Yes" is selected you can re-use the details from section one, or amend them as
<ul><li>Yes</li></ul>	○ No	required. Select "No" to enter a completely new set of details.
Building number or name	1-2	
Street	Gleneagles Court, Brighton Road	

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Additional Contact Details		

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Describe the nature of the premises below	

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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)	Note that the maximum number of people cannot exceed 499.
If the licensable activities will include the supply of alcohol, state whether 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	the .
Off the premises only	
○ Both	
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RELEVANT ENTERTAINMENT(See also guidance on completing the form	m, note 13)
2-2:20PM Dance Hub Performance Cir	tainment. If so, state the times during the ever s Workshop cus Workshop Circus Workshop
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PERSONAL LICENCE HOLDERSe also guidance on completing the form	m, note 14)
Do you currently hold a valid personal licence? Yes • No	
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PREVIOUS TEMPORARY EVENT NOTICES also guidance on completi	ng the form, note 15)
Have you previously given a temporary event notice in respect of any premises for events falling in the same Yes No calendar year as the event for which you are now giving this temporary event notice?	

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Have you already given a	

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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 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.



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	
Is Digitally signed	
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