

## Appendix 1

# Application Form for Intime Craft Bar – Rear of White Hart

KSK100003975  
Pd. 19.9.17 CLO2/8090/LOT



**Application for a premises licence to be granted  
under the Licensing Act 2003**

**PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST**

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

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

I/We ADRIAN BROWN  
(Insert name(s) of applicant)

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	
CHURCH STREET REAR OF THE WHITE HART HOTEL	
Post town	GAINSBOROUGH
Postcode	
Telephone number at premises (if any)	
Non-domestic rateable value of premises	£

## Part 2 - Applicant details

Please state whether you are applying for a premises licence as Please tick as appropriate

- a) an individual or individuals \* A/B  please complete section (A)
- b) a person other than an individual \* A/B
- i as a limited company/limited liability partnership  please complete section (B)
- ii as a partnership (other than limited liability)  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 in Wales  please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England  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 (by ticking yes to one box below):

- 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)


Mr <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	MR
Surname			First names		
BROWN			ADRIAN		
Date of birth		I am 18 years old or over		Please tick yes	
18-12-70		<input checked="" type="checkbox"/>			
Nationality					
BRITISH					
Current residential address if different from premises address			73 SUNNINGDALE WAY		
Post town		Postcode			
GAINSBOROUGH		DN21 1FZ			
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
Date of birth			I am 18 years old or over		Please tick yes
			<input type="checkbox"/>		
Nationality					
Current postal address if different from premises address					
Post town		Postcode			
Daytime contact telephone number					
E-mail address (optional)					

**(B) OTHER APPLICANTS**

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

Name	INTIME CRAFT BAR
Address	4/0 73 SUNNINGDALE WAY GAINSBOROUGH LINCOLNSHIRE DN21 1FZ
Registered number (where applicable)	
Description of applicant (for example, partnership, company, unincorporated association etc.)	ADRIAN BROWN <del>ADRIAN</del> <del>ROSELINE BROWN</del>
Telephone number (if any)	
E-mail address (optional)	

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD	MM	YYYY
18	09	2017

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

DD	MM	YYYY

Please give a general description of the premises (please read guidance note 1)

BAR AREA AT THE REAR OF THE WHITE HART HOTEL GAINSBOROUGH. MAIN DOORS LEADING THROUGH TO BAR AREA. TOILETS NEAR MAIN DOORS ON THE RIGHT. A RAISED AREA IN MAIN ROOM SITUATED TO THE RIGHT. FIRE EXIT LOCATED NEXT TO BAR

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

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What licensable activities do you intend to carry on from the premises?

(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

**Provision of regulated entertainment** (please read guidance note 2)

Please tick all that apply

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

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

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

**In all cases complete boxes K, L and M**

**A**

Plays Standard days and timings (please read guidance note 7)			Will the performance of a play take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b><u>Please give further details here</u></b> (please read guidance note 4)	Both	<input type="checkbox"/>
Tue					
Wed			<b><u>State any seasonal variations for performing plays</u></b> (please read guidance note 5)		
Thur					
Fri			<b><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></b> (please read guidance note 6)		
Sat					
Sun					

**B**

<b>Films</b> Standard days and timings (please read guidance note 7)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish		Both	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 4)		
Tue			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 5)		
Wed			<b>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</b> (please read guidance note 6)		
Thur					
Fri					
Sat					
Sun					



C

Indoor sporting events Standard days and timings (please read guidance note 7)			<b><u>Please give further details</u></b> (please read guidance note 4)	
Day	Start	Finish		
Mon			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 5)	
Tue				
Wed				
Thur				<b><u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u></b> (please read guidance note 6)
Fri				
Sat				
Sun				

2.

**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 7)			<b>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Both	<input type="checkbox"/>				
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 4)		
Mon					
			<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 5)		
Tue					
			<b>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 6)		
Wed					
Thur					
Fri					
Sat					
Sun					

**E**

<b>Live music</b> Standard days and timings (please read guidance note 7)			<b>Will the performance of live music take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 4) EITHER USE TICKET ONLY ON LIVE BAND NIGHTS OR USE DOORSTAFF TO LIMIT AMOUNT OF PEOPLE IN BUILDING.		
Mon	/	/			
Tue	/	/			
Wed	/	/	<b>State any seasonal variations for the performance of live music</b> (please read guidance note 5) BANK HOLIDAY MONDAY } 19.00 CHRISTMAS EVE / CHRISTMAS DAY } TILL NEW YEARS EVE / NEW YEARS DAY } 12.00 GOOD FRIDAY / EASTER SUNDAY } A.M		
Thur	19.30	12.00 A.M			
Fri	19.30	12.00 A.M			
Sat	19.30	12.00 A.M	<b>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</b> (please read guidance note 6)		
Sun	19.30	12.00 A.M			

**F**

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>	
Day	Start	Finish		Outdoors	<input type="checkbox"/>	
Mon	11.00	12.00	<b>Please give further details here</b> (please read guidance note 4) Background recorded music to be played	Both	<input type="checkbox"/>	
	A.m	A.m				
Tue	11.00	12.00				
	A.m	A.m				
Wed	11.00	12.00		<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 5) CHRISTMAS EVE 11.00 A.M TILL 02.00 A.M NEW YEARS EVE 11.00 A.M TILL 02.00 A.M GOOD FRIDAY 11.00 A.M TILL 02.00 A.M	Both	<input type="checkbox"/>
	A.m	A.m				
Thur	11.00	02.00				
	A.m	A.m				
Fri	11.00	02.00	<b>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</b> (please read guidance note 6)		Both	<input type="checkbox"/>
	A.m	A.m				
Sat	11.00	02.00				
	A.m	A.m				
Sun	11.00	12.00				
	A.m	A.m				

2.

**G**

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4) RE-ARRANGEMENT OF FURNITURE TO ENABLE DANCE ON WEEKENDS ONLY UNLESS STATED BELOW		
Mon					
Tue					
Wed			State any seasonal variations for the performance of dance (please read guidance note 5)		
Thur	19.30	02.00	BANK HOLIDAY MONDAY } CHRISTMAS DAY } 19.30 till 12.00 a.m NEW YEARS DAY } CHRISTMAS EVE } 19.30 till 02.00 a.m NEW YEARS EVE }		
		A.m			
Fri	19.30	02.00	Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list (please read guidance note 6)		
		A.m			
Sat	19.30	02.00			
		A.m			
Sun	19.30	12.00			
		A.m			

# H

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 4)		
Wed					
Thur			<b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 5)		
Fri					
Sat			<b><u>Non standard timings. Where you intend to use the premises for the 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</u></b> (please read guidance note 6)		
Sun					

I

<b>Late night refreshment</b> Standard days and timings (please read guidance note 7)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish			
Mon	<del>23.00</del>		<b>Please give further details here</b> (please read guidance note 4) HOT DRINKS SERVED IN ALIGN WITH ALCOHOL		
Tue					
Wed	23.00	12.00	<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 5) BANK HOLIDAY MONDAY } 23.00 CHRISTMAS DAY } TILL NEW YEARS DAY } 12.00 A.M CHRISTMAS EVE } 23.00 TILL 02.00 A.M NEW YEARS EVE }		
Thur	23.00	02.00			
Fri	23.00	02.00	<b>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</b> (please read guidance note 6)		
		A.M			
Sat	23.00	02.00			
		A.M			
Sun					

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b>Will the supply of alcohol be for consumption</b> - please tick (please read guidance note 8)	On the premises	<input type="checkbox"/>			
				Off the premises	<input type="checkbox"/>			
				Both	<input checked="" type="checkbox"/>			
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5) BANK HOLIDAY MONDAY } 11.00 A.M CHRISTMAS DAY } TILL NEW YEARS DAY } 12.00 A.M CHRISTMAS EVE } 11.00 A.M NEW YEARS EVE } TILL 02.00 A.M					
Mon	11.00 A.M	23.30						
Tue	11.00 A.M	23.30						
Wed	11.00 A.M	12.00 A.M						
Thur	11.00 A.M	02.00 A.M						
Fri	11.00 A.M	02.00 A.M						
Sat	11.00 A.M	02.00 A.M						
Sun	11.00 A.M	12.00 A.M						
						<b>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</b> (please read guidance note 6)		

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

Name	ADRIAN BROWN
Date of birth	18-12-70
Address	73 SUNNINGDALE WAY GAINSBOROUGH LINCOLNSHIRE
Postcode	DN21 1FZ
Personal licence number (if known)	32UHA16037
Issuing licensing authority (if known)	WLDC



**K**

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).

MONITOR CONTENT OF ENTERTAINMENT  
AND ADJUST TO AFTER 21.00 IF  
NECESSARY

**L**

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)	
Day	Start	Finish	<p>BANK HOLIDAY MONDAY } 11.00 A.M CHRISTMAS DAY } TILL NEW YEARS DAY } 12.30 A.M</p> <p>CHRISTMAS EVE } 11.00 A.M NEW YEARS EVE } TILL 02.30 A.M</p>	
Mon	11.00 A.M	12.00 A.M		
Tue	11.00 A.M	12.00 A.M		
Wed	11.00 A.M	12.30 A.M		
Thur	11.00 A.M	02.30 A.M		
Fri	11.00 A.M	02.30 A.M		
Sat	11.00 A.M	02.30 A.M		
Sun	11.00 A.M	12.30 A.M		
				<p><b>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</b> (please read guidance note 6)</p>

**M** Describe the steps you intend to take to promote the four licensing objectives:

**a) General – all four licensing objectives (b, c, d and e) (please read guidance note 10)**

PREVENTION OF CRIME AND DISORDER  
PUBLIC SAFETY  
- PREVENTION OF PUBLIC NUISANCE  
PROTECTION OF CHILDREN FROM HARM

**b) The prevention of crime and disorder**

INSTALLATION OF A GOOD CCTV SYSTEM.  
SHARE ANY INTELLIGENCE GATHERED WITH  
AUTHORITIES. MAINTAIN GOOD COMMUNICATION  
AND WORKING RELATIONSHIP WITH LICENSING  
AUTHORITY, OFFICERS AND BODIES. HAVE PROVISION  
FOR SAFE TRANSPORT HOME. DEVELOP ZERO  
TOLERANCE POLICIES FOR DRUG MISUSE AND  
ABUSIVE BEHAVIOUR

**c) Public safety**

ENSURE ALL SMOKE DETECTORS, FIRE EXTINGUISHERS  
ARE IN GOOD WORKING ORDER. USE TOUGHENED  
GLASSWARE AND PROMOTE SENSIBLE DRINKING.  
DISPLAY ALL POLICIES WITH REGARD TO BEHAVIOUR,  
DRUG MISUSE AND CHALLENGE 21. ENSURE STAFF  
ARE FULLY TRAINED IN PUBLIC SAFETY, FIRE TRAINING,  
UNDER AGE DRINKING AND BASIC FIRST AID. HAVE  
AMNESTY BOXES NEAR MAIN DOORS TO BE EMPTIED  
BY POLICE. ON LIVE NIGHTS USE DOORSTAFF OR HAVE TICKET  
ONLY TO PREVENT OVERCROWDING

**d) The prevention of public nuisance**

ALL WINDOWS AND DOORS TO BE CLOSED FROM 21:00  
ON LIVE MUSIC NIGHTS. MUSIC TO BE KEPT  
AT A REASONABLE LEVEL. MONITOR BEHAVIOUR  
OF CUSTOMERS LEAVING THE VENUE AND  
ENCOURAGE NOISE LEVELS TO BE KEPT TO A  
MINIMUM. KEEP ALL AREAS CLEAN AND NO  
GLASSWARE BEYOND CERTAIN POINTS

**e) The protection of children from harm**

NOBODY UNDER 18 IN PREMISES WITHOUT A  
PARENT. ALL CHILDREN TO VACATE PREMISES  
BEFORE 21:00. SPEAK TO INDIVIDUALS IF EXPOSURE  
OF STRONG LANGUAGE, SEXUAL REFERENCES AND  
ALCOHOL INTAKE EXCEEDS EXPECTATION WITH CHILDREN  
AROUND. NO CHILD UNDER 11 TO GO UNACCOMPANIED  
TO THE TOILET. POLICIES TO BE DISPLAYED OF  
THIS. ZERO DRUG POLICY ENFORCED.

## Checklist:

Please tick to indicate agreement


- I have made or enclosed payment of the fee.
- I have enclosed the plan of the premises.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I have enclosed the consent form completed by the individual I wish to be designated 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 4 – Signatures** (please read guidance note 11)

**Signature of applicant or applicant’s solicitor or other duly authorised agent** (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

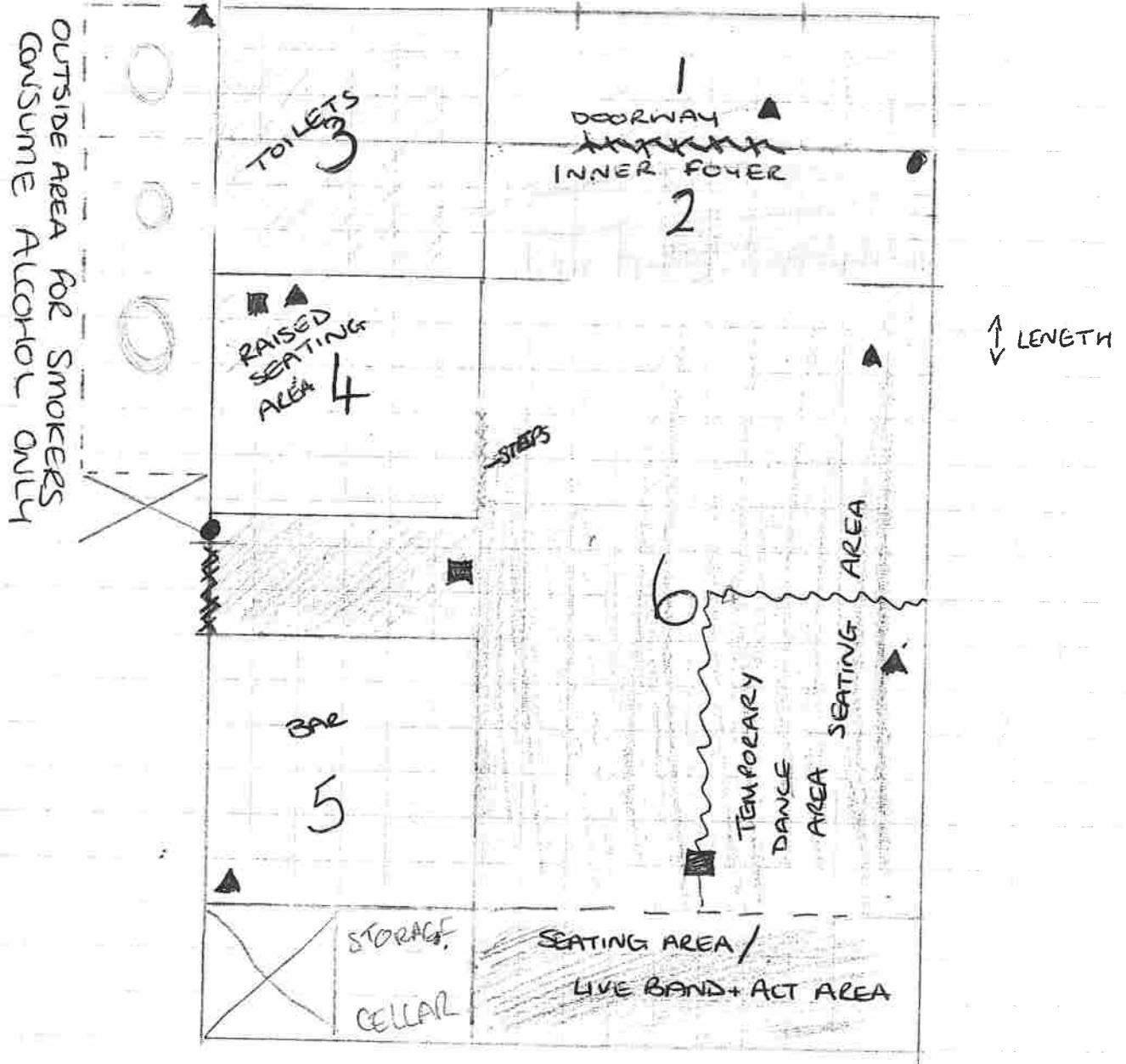
<b>Declaration</b>	<ul style="list-style-type: none"> <li>• [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (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).</li> <li>• 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)</li> </ul>
Signature	
Date	18-09-17
Capacity	

**For joint applications, signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant’s solicitor or other authorised agent** (please read guidance note 13). **If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

← WIDTH



- 1 WIDTH 1 METRE 80 cm x 2 METRE DOORWAY
- 2 WIDTH 1 METRE 80 cm x 2 METRE 5cm INNER FOYER
- 3 WIDTH 2 METRE 82 cm x 4 METRE 5cm LADIES/GENTS TOILETS
- 4 WIDTH 1 METRE 50 cm x 5 METRES HEIGHT 20 cm RAISED SEATING AREA

5 WIDTH 2 METRES 20 cm x 4 METRES 70 cm BAR

6 WIDTH 5 METRES 56 cm x 13 METRES 12 cm SEATING AREA TO INCLUDE

----- SHOWS POSSIBLE AREA FOR SMOKERS OUTSIDE | AREA FOR LIVE BANDS/ACTS

\*\*\* FIRE EXITS

- SMOKE DETECTORS
- FIRE EXTINGUISHERS
- ▲ SECURITY CAMERAS

outside area plan

LORD STREET

WHITE HART HOTEL

CAR PARK

5 metres 50cm

13 metres 12 cm

INTIME  
CRAFT  
BAR

X

CHURCH STREET

X = SECURITY  
CAMERA

