

[Insert name and address of relevant licensing authority and its reference number (optional).]

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 TAMWORTH PROGRESSIVE CLUB
(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	
HALFORD STREET	
Post town	TAMWORTH
Postcode	B79 7RD

Telephone number at premises (if any)	XXXXXXXXXX
Non-domestic rateable value of premises	£ XXXXXXXXXX

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- 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)

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- 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:

Please tick yes

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

SECOND INDIVIDUAL APPLICANT (if applicable)

<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	<input type="checkbox"/> Other Title (for example, Rev)
Surname		First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes
Current postal address if different from premises address				
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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	TAMWORTH PROGRESSIVE CLUBS
Address	HALFORD STREET TAMWORTH STAFFORDSHIRE B79 7RO
Registered number (where applicable)	
Description of applicant (for example, partnership, company, unincorporated association etc.)	WORKING MENS CLUB
Telephone number (if any)	01827 52324
E-mail address (optional)	01827 52324

Part 3 Operating Schedule

When do you want the premises licence to start?

								YYYY
				2				

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

									Y

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

LOCAL WORKING MENS CLUB (C10 AFFILIATED)
FAMILY FRIENDLY CLUB

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

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

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

Provision of regulated entertainment

Please tick any 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 6)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)					
Mon								
Tue								
Wed						<u>State any seasonal variations for performing plays</u> (please read guidance note 4)		
Thur								
Fri						<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 5)		
Sat								
Sun								

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors <input type="checkbox"/>	
					Outdoors <input type="checkbox"/>	
					Both <input type="checkbox"/>	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)			
Mon						
Tue			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)			
Wed						
Thur			<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 5)			
Fri						
Sat						
Sun						

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon	11.00	23.00	Pool, DARTS, Pool HINDS
Tue	11.00	23.00	
Wed	11.00	23.00	State any seasonal variations for indoor sporting events (please read guidance note 4)
Thur	11.00	23.30	
Fri	11.00	00.00	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 (please read guidance note 5)
Sat	11.00	00.00	
Sun	12.00	23.00	
			NEW YEARS EVE OPEN TIL 01.30AM

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Thur					
Fri	11.00	00.00	<u>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</u> (please read guidance note 5)		
Sat	11.00	00.00			
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon	11.00	23.00			
Tue	11.00	23.00			
Wed	11.00	23.00	<u>State any seasonal variations for the performance of live music</u> (please read guidance note 4)		
Thur	11.00	23.30			
Fri	11.00	00.00	<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 5)		
Sat	11.00	00.00			
Sun	12.00	23.00			

NEW YEARS EVE OPEN TIL 01 30 AM

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	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 3)		
Mon	11.00	23.00			
Tue	11.00	23.00			
Wed	11.00	23.00	State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur	11.00	23.30			
Fri	11.00	00.00	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 (please read guidance note 5)		
Sat	11.00	00.00			
Sun	12.00	23.00			
			New Year's Eve open till 01 30 AM		

G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon	11.00	23.00			
Tue	11.00	23.00			
			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)		
Wed	11.00	23.00			
Thur	11.00	23.30			
Fri	11.00	00.00			
			<u>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</u> (please read guidance note 5)		
Sat	11.00	00.00	NEW YEARS EVE OPEN TIL 01.30 AM		
Sun	12.00	23.00			

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Mon	11.00	23.00		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue	11.00	23.00	Please give further details here (please read guidance note 3)		
Wed	11.00	23.00			
Thur	11.00	23.30	State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)		
Fri	11.00	00.00			
Sat	11.00	00.00	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 (please read guidance note 5)		
Sun	12.00	23.00	NEW YEARS E & OPEN TIL 01 30 AM		

I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue					
Wed					
			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Thur			<u>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</u> (please read guidance note 5)		
Fri					
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – <u>please tick</u> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	11.00	23.00			
Tue	11.00	23.00			
Wed	11.00	23.00			
Thur	11.00	23.30			
Fri	11.00	00.00			
Sat	11.00	00.00			
Sun	12.00	23.00			
			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 (please read guidance note 5)		
			NEW YEARS EVE OPEN TIL 01 30AM		

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor:

Name	ROSS MANTON
Address	21 SHAKESPEARE CLOSE THE LEYS TAMWORTH
Postcode	B79 8DS
Personal licence number (if known)	
Issuing licensing authority (if known)	TAMWORTH BOROUGH COUNCIL

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 8).

LADIES NIGHT
 MEN'S NIGHT
 COMEDIANS ADULT HUMOR

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	11.00	23.00	<p><u>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 (please read guidance note 5)</u></p> <p>NEW YEAR'S EVE OPEN TIL 01 30AM</p>
Tue	11.00	23.00	
Wed	11.00	23.00	
Thur	11.00	23.50	
Fri	11.00	00.00	
Sat	11.00	00.00	
Sun	12.00	23.00	

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 9)

b) The prevention of crime and disorder

PLEASE SEE ATTACHED SHEET

c) Public safety

PLEASE SEE ATTACHED SHEET

d) The prevention of public nuisance

PLEASE SEE ATTACHED SHEET

e) The protection of children from harm

PLEASE SEE ATTACHED SHEET

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.


IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 11).
If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	6 th FEBRUARY 2015
Capacity	SECRETARY

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 12). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	5/2/15
Capacity	CHAIRMAN.

**Tamworth Progressive Club, Progressive Buildings,
Halford Street, Tamworth, Staffordshire.**

Prevention of Crime and Disorder

1. All persons involved in the sale of alcohol who are not the holders of a Personal Licence to sell alcohol will receive initial and regular 6 monthly refresher training by the Designated Premises Supervisor with regards to the law and in relation to the sale of alcohol. Such training will be recorded and up to date training records of all such persons will be maintained at the premises.
2. An incident register of all occurrences and ejections from the premises will be maintained at the premises and all details of public order offences will be recorded.
3. All functions/private parties open to members of the public where licensable activities will take place to have a written risk assessment by or on behalf of the Premises Licence Holders/Designated Premises Supervisor to determine the need for door staff and the numbers required; this must be produced upon request of the Police or Local Authority.
4. A written record shall be kept on the premises by the Designated Premises Supervisor of every person employed on the premises as a door supervisor in a register kept for that purpose. That record shall contain the following details:
 - The door supervisors name, date of birth and home address
 - His/her security Authority licence number
 - The time, date he/she starts and finishes duty
 - Each entry shall be signed by the door supervisor
 - Hi visibility jackets to be worn at all times

All Records relating to the above shall be retained at the premises for a period of no less than 12 months and made available to the Police, Trading Standard Officers and the Licensing Authority on request.

Public Nuisance

5. A notice advising customers to leave the premises quietly and respect the needs of residents will be displayed at each exit of the premises.

Protection of Children from Harm

6. Challenge 25 will be operated at the premises whereby all persons who appear to be under 25 and purchasing or attempting to purchase alcohol will be asked to provide identification to prove they are over 18 years of age.
7. The only acceptable forms of identification allowed will be a valid passport, valid photo ID driving licence or valid proof of age scheme card with the PASS approved hologram.
8. A refusals book must be held at the premises and contain details of the time and date of any sales that are refused in relation to persons that are under age. The book must also contain details of the staff member refusing the sale and retained for a period of not less than 12 months.
9. All staff working at the premises involved in the sale of age restricted products will receive on going Challenge 25 training and will be refreshed at least every 6 months. This will be recorded in a staff training register.

All Records relating to the above shall be retained at the premises for a period of no less than 12 months and made available to the Police, Trading Standard Officers and the Licensing Authority on request.

I agree to the above forming part of the premises licence

Signed



Position

SECRETARY

Date

6th FEBRUARY 2015

Q

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I

E

T

Please leave
the premises

QUIETLY

to avoid
disturbing the
local residents



ssshhhh!!!