

Licensing Section, Town Hall, Crawley, West Sussex, RH10 1UZ

Temporary Event Notice

Before completing this notice, please read the guidance notes at the end of the notice. If you are completing this notice by hand, please write legibly in block capitals. In all cases, ensure that your answers are inside the boxes and written in black ink or typed. Use additional sheets if necessary. You should keep a copy of the completed notice for your records. You must send at least one copy of this notice to the licensing authority and additional copies must be sent to the chief officer of police and the local authority exercising environmental health functions for the area in which the premises are situated. The licensing authority will give to you written acknowledgement of the receipt of the notice.

I, the proposed premises user, hereby give notice under section 100 of the Licensing Act 2003 of my proposal to carry on a temporary activity at the premises described below.

1. The personal details of premises user (Please read note 1)				
1. Your name				
Title	Mr☐ Mrs ☑ Miss☐ Ms ☐ Other (please state)			
Surname				
Forenames				
2. Previous names (Please enter Please continue on a separate s	er details of any previous names or maiden names, if applicable.			
Title	Mr Mrs Miss Ms Other (please state)			
Surname				
Forenames				
3. Your date of birth				
4. Your place of birth				
5. National Insurance Number				
	use this address to correspond with you unless you complete the			
separate correspondence box b	elow)			
CIGITY V C.				
Post town	Postcode			
7. Other contact details				
Telephone numbers				
Daytime				
Evening (optional)				
Mobile (optional)				
Fax number (optional)				
E-Mail address				
(if available)				

8. Alternative address for correspondence (If you complete the details below, we will use this address to correspond with you)
address to correspond with you)
Post town Postcode
Post town Postcode
9. Alternative contact details (if applicable)
Telephone numbers:
Daytime
Evening (optional)
Mobile (optional)
Fax number (optional)
E-Mail address (if available)
(If available)
2. The premises
Please give the address of the premises where you intend to carry on the licensable activities or, if it
has no address, give a detailed description (including the Ordnance Survey references)
(Please read note 2)
MAIDENBOWER COMMUNITY CENTRE
HAPILEST ROAD
HARVEST ROAD
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3. The licensable activities					
Please state the licensable activities the licensable activities you intend to carry		the premises (please tick all			
The sale by retail of alcohol					
The supply of alcohol by or on behalf of, a member of the club					
The provision of regulated entertainment					
The provision of late night refreshmen					
Are you giving a late temporary event (Please read note 8)					
Please state the dates on which you in for licensable activities. (Please read	4# MAY 2024				
Please state the times during the even (please give times in 24 hour clock). (Fig. 1830 - 23.00)					
Please state the maximum number of you intend to allow to be present at the when you intend to carry on licensable staff, organisers or performers. (Pleas	120				
If the licensable activities will include the supply of alcohol, please state whethe	r				
the supplies will be for consumption or or off the premises, or both (please tick					
as appropriate). (Please read note 12)	Both				
Please state if the licensable activities please state the times during the even Pole dancing, Lap dancing, Striptease / PIECE LICE	t that you propose to provide etc). (Please read note 13)				
4. Personal licence holders					
Do you currently hold a valid personal licence? (Please tick) Yes No					
If "Yes" please provide the details of your leaving licensing outbority	our personal licence below.				
Issuing licensing authority Licence number					
Date of issue Any further relevant details					

5. Previous temporary event notices you have given (Please read note 15 and tick the boxes that apply to you)				
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		
If answering yes, please 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				
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 b) begins 24 hours or less after the event period proposed in this notice?	Yes	No		
6 Associatos and business celles que				
6. Associates and business colleagues (Please read note 16 and tick the boxes that apply to you)				
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		
If answering yes, please state the total number of temporary event notices (including the number of late temporary event notices, if any) your associate(s) have given for events in the same calendar year.				
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 b) begins 24 hours or less after	Yes	No		
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		
If answering yes, please state the total number of temporary event notices (including the number of late temporary event notices, if any) your business colleague(s) have given for events in the same calendar year.	Š.	I		
Has any person with whom you are in business carrying on	Yes	No /		
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?				
7. Checklist (Please read note 17)	***************************************			
I have: (Please tick the appropriate boxes)				
Sent at least one copy of this notice to the licensing authority for the in which the premises are situated	area			
Sent a copy of this notice to the chief officer of police for the area in which the premises are situated	U			
Sent a copy of this notice to the local authority exercising environment health functions for the area in which the premises are situated	ntal			
If the premises are situated in one or more licensing authority areas, at least one copy of this notice to each additional licensing authority	sent			

If the premises are situated in one or more police areas, sent a copy of this notice to each additional chief officer of police	
If the premises are situated in one or more local authority areas, sent a copy of this notice to each additional local authority exercising environmental health functions	
Made or enclosed payment of the fee for the application	
Signed the declaration in Section 9 below	
8. Condition (Please read note 18) It is a condition of this temporary event notice that where the relevant lice in Section 3 above include the supply of alcohol that all such supplies a authority of the premises user.	
9. Declarations (Please read note 19) The information contained in this form is correct to the best of my knowled and that it is an offence: (i) to knowingly or recklessly make a false statement in or in connection notice and that a person is liable on summary conviction for such an offence amount; and (ii) to permit an unauthorised licensable activity to be carried on at any pliable on summary conviction for any such offence to a fine of any amounterm not exceeding six months, or to both.	with this temporary event ence to a fine of any place and that a person is
Date 21 APRIL 2024	
Name of Person signing	
For completion by the licensing authority	J.
10. Acknowledgement (Please read note 20)	
I acknowledge receipt of this temporary event notice.	
Signature	
On behalf of the licensing authority Date	·
Name of Officer signing	