

14 OCT 2016

Working in partnership  
Mental Health Partnership



**Application to vary a premises licence 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

Fareham Working mens club  
(Insert name(s) of applicant)

being the premises licence holder, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number	8891
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**Part 1 – Premises Details**

Postal address of premises or, if none, ordnance survey map reference or description			
8 mill Road Fareham			
Post town		Postcode	PO16 0TN

Telephone number at premises (if any)	01329 232575
Non-domestic rateable value of premises	£

**Part 2 – Applicant details**

Daytime contact telephone number	01329 232575		
E-mail address (optional)	fwmc.sec54@yahoo.co.uk		
Current postal address if different from premises address			
Post town		Postcode	

**Part 3 - Variation**

Do you want the proposed variation to have effect as soon as possible? Please tick as appropriate  
 Yes   
No

If not, from what date do you want the variation to take effect? DD MM YYYY  

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**Please describe briefly the nature of the proposed variation** (Please see guidance note 1)

Extend alcohol hours in concert hall.

If your proposed variation would mean that 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend:

## Part 4 Operating Schedule

Please complete those parts of the Operating Schedule below which would be subject to change if this application to vary is successful.

### Provision of regulated entertainment

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)

**Sale by retail 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"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	-----	-----	<u>Please give further details here</u> (please read guidance note 3)	Both	<input type="checkbox"/>
Tue	-----	-----			
Wed	-----	-----			
Thur	-----	-----	<u>State any seasonal variations for performing plays</u> (please read guidance note 4)		
Fri	-----	-----			
Sat	-----	-----	<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)		
Sun	-----	-----			

**B**

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

**C**

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			<b>Please give further details</b> (please read guidance note 3)		
Day	Start	Finish			
Mon	-----	-----			
Tue	-----	-----	<b>State any seasonal variations for indoor sporting events</b> (please read guidance note 4)		
Wed	-----	-----			
Thur	-----	-----	<b>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</b> (please read guidance note 5)		
Fri	-----	-----			
Sat	-----	-----			
Sun	-----	-----			
	-----	-----			

**D**

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

**E**

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

**F**

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

**G**

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

H

<p><b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (read guidance note 6)</p>			<p>Please give a description of the type of entertainment you will be providing</p>		
Day	Start	Finish	<p><b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)</p>	Indoors	<input type="checkbox"/>
Mon	-----	-----		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue	-----	-----	<p><b><u>Please give further details here</u></b> (please read guidance note 3)</p>		
Wed	-----	-----			
Thur	-----	-----	<p><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 4)</p>		
Fri	-----	-----			
Sat	-----	-----	<p><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 5)</p>		
Sun	-----	-----			



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

† J

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 7)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Mon	10	2330			
Tue	10	2330			
Wed	10	2330			
Thur	10	2330			
Fri					
Sat					
Sun					
			<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 5)		

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

Name	
Address	
Postcode	
Personal licence number (if known)	
Issuing licensing authority (if known)	

K

<p>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).</p>
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L

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variations</b> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			<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 5)

Please identify those conditions currently imposed on the licence which you believe could be removed as a consequence of the proposed variation you are seeking.

Please tick as appropriate

- I have enclosed the premises licence
- I have enclosed the relevant part of the premises licence

If you have not ticked one of these boxes, please fill in reasons for not including the licence or part of it below

Reasons why I have not enclosed the premises licence or relevant part of premises licence.

**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**

**c) Public safety**

**d) The prevention of public nuisance**

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

**Checklist:**

**Please tick to indicate agreement**

- I have made or enclosed payment of the fee.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I understand that I must now advertise my application.
- I have enclosed the premises licence or relevant part of it or explanation.
- 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 5 – Signatures** (please read guidance note 10)

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

Signature	K. Clark
Date	11 Oct 2016
Capacity	Secretary

**Where the premises licence is jointly held, signature of 2nd applicant (the current premises licence holder) 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	11/10/16
Capacity	TREASURER

**Contact name (where not previously given) and address for correspondence associated with this application** (please read guidance note 13)

Post town		Post code	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			
fwmc.sec54@yahoo.co.uk			

**Data Processing Fair Processing Statement**

The information that you provide is used to determine whether or not to grant a Premises Variation. We have a duty to protect the public funds we administer and may use your information for the prevention and detection of fraud. The information may also be used for auditing, monitoring, statistical and other research. Some of the information we hold may be shared with other Council or Government departments, agencies and similar organisations (including law enforcement agencies) to enable them to perform their duties or for comparison purposes. The information we hold about you is normally retained for seven years after the end of the licence period. For further information about the National Fraud Initiative see [www.fareham.gov.uk/dpnfi](http://www.fareham.gov.uk/dpnfi)

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Civic Offices  
Civic Way  
Fareham  
PO16 7AZ  
Tel: 01329 236100  
[www.fareham.gov.uk](http://www.fareham.gov.uk)

Date: 14/10/2016 11:51

Fund: Miscellaneous  
Reference No: 03219331  
CAN: 01871  
Machine: CASH1  
Cashier: 1310  
Amount Paid: £315.00  
Method of Payment: Cheque

VAT REG No. 108420894

Thank You

Please retain this receipt for  
your records