

[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.

HARROW ST MARY'S CRICKET CLUB

I/We apply for a premises licence under section 17 of
(Insert name(s) of applicant)
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	
MILLHILLIANS SPORTS CLUB HEADSTONE LANE HARROW MIDDLESEX HA2 6NF	
Post town	Post code
HARROW	HA2 6NF

Telephone number at premises (if any)

Non-domestic rateable value of premises

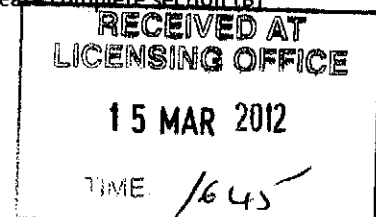
£ 10,250

Part 2 - Applicant details

Please state whether you are applying for a premises licence as

Please tick yes

- 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)
- 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 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 Mrs Miss Ms Other title (for example, Rev)

Surname First names

I am 18 years old or over 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)

Mr Mrs Miss Ms Other title (for example, Rev)

Surname First names

Please tick
 ✓ yes

I am 18 years old or over

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	HARROW ST. MARYS CRICKET CLUB
Address	MILLHILLIAMS SPORTS GROUND READSTONE LANE HARROW MIZ GNF
Registered number (where applicable)	
Description of applicant (for example partnership, company, unincorporated association etc)	MEMBERS SPORTS CLUB
Telephone number (if any)	
E-mail address (optional)	

Part 3 Operating Schedule

When do you want the premises licence to start?

Day		Month		Year			
0	3	0	4	2	0	1	2

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

Day		Month		Year			

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

N/A

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

THE BUILDING IS A SPORTS PAVILLION USED FOR
CRICKET, RUGBY & FOOTBALL WITH AN UPSTAIRS
MAIN BAR PLUS A FUNCTION ROOM DOWNSTAIRS
WITH A SMALL BAR.

What licensable activities do you intend to carry on from the premises?
(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Please tick yes

Provision of regulated entertainment

- 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 entertainment facilities for:

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j)
(if ticking yes, fill in box K)

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

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

In all cases complete boxes N, O and P

A

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)	Indoors		
Day	Start	Finish		Outdoors		
Mon			Please give further details here (please read guidance note 3)	Both		
Tue						
Wed				State any seasonal variations for performing plays (please read guidance note 4)		
Thur						
Fri			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 (please read guidance note 5)			
Sat						
Sun						

B

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

C

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

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 [Y]</u> (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Both		<u>Please give further details here</u> (please read guidance note 3)
Tue					
Wed					State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)
Thur					
Fri					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 (please read guidance note 5)
Sat					
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 [Y] (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	1900	0000	<p>Please give further details here (please read guidance note 3)</p> <p>THIS WILL ALLOW THE CLUB TO PROVIDE ADDITIONAL ENTERTAINMENT FOR ITS MEMBERS. IT IS NOT EXPECTED THAT THIS WILL TAKE PLACE ON A REGULAR BASIS</p>	Both	<input type="checkbox"/>
Tue	1900	0000			
Wed	1900	0000			
Thur	1900	0000			
Fri	1900	0100			
Sat	1900	0100			
Sun	1900	0000			
			<p>State any seasonal variations for the performance of live music (please read guidance note 4)</p>		
			<p>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 (please read guidance note 5)</p>		

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 [Y] (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	1100	0000	<p>Please give further details here (please read guidance note 3)</p> <p>THIS WILL PERMIT THE PLAYING OF BACKGROUND MUSIC IN THE PAVILION AND ALSO FOR DISC JOCKEYS ON THE OCCASION OF CLUB SOCIAL EVENTS</p>	Both	<input type="checkbox"/>
Tue	1100	0000			
Wed	1100	0000			
Thur	1100	0000			
Fri	1100	0100			
Sat	1100	0100			
Sun	1100	0000			
			<p>State any seasonal variations for playing recorded music (please read guidance note 4)</p>		
			<p>Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)</p>		

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</u>	Indoors		
Day	Start	Finish		Outdoors		
Mon			<u>Please give further details here (please read guidance note 3)</u>	Both		
Tue						
Wed				<u>State any seasonal variations for the performance of dance (please read guidance note 4)</u>		
Thur						
Fri				<u>Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)</u>		
Sat						
Sun						

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			<u>Please give a description of the type of entertainment you will be providing</u>	Indoor			
Day	Start	Finish		Outdoor			
Mon			<u>Will this entertainment take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</u>	Both			
Tue				<u>Please give further details here (please read guidance note 3)</u>			
Wed							
Thur					<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)</u>		
Fri							

Sat			Non standard timings. Where you intend to use the premises for the entertainment of 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			

Provision of facilities for making music Standard days and timings (please read guidance note 6)			Please give a description of the facilities for making music you will be providing	
			Will the facilities for making music be indoors or outdoors or both – please tick [Y] (please read guidance note 2)	
Day	Start	Finish	Indoors	
			Outdoors	
			Both	
Mon			Please give further details here (please read guidance note 3)	
Tue				
Wed			State any seasonal variations for the provision of facilities for making music (please read guidance note 4)	
Thur				
Fri			Non standard timings. Where you intend to use the premises for provision of facilities for making music entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)	
Sat				
Sun				

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick [Y] (see guidance note 2)	
			Please give a description of the facilities for dancing you will be providing	
Day	Start	Finish	Indoors	
			Outdoors	
			Both	

Mon	1100	0000	Please give further details here (please read guidance note 3)
Tue	1100	0000	
Wed	1100	0000	State any seasonal variations for providing dancing facilities (please read guidance note 4)
Thur	1100	0000	
Fri	1100	0000	Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)
Sat	0000	0100	
	1100	0000	
Sun	0000	0100	
	1100	0000	

K

Provision of facilities for entertainment of a similar description to that falling within I or J Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment facility you will be providing	
Day	Start	Finish	Will the entertainment facility be indoors or outdoors or both – please tick [Y] (please read guidance note 2)	Indoor
				Outdoor
Mon				Both
Tue			Please give further details here (please read guidance note 3)	
Wed				
Thur			State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within j or k (please read guidance note 4)	
Fri				
Sat			Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times to those listed in the column on the left, please list (please read guidance note 5)	
Sun				

L

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 [Y] (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	
Mon	2300	0200	Please give further details here (please read guidance note 3)	Both	
Tue	2300	0000			
Wed	2300	0000	State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Thur	2300	0000			
Fri	2300	0100	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 (please read guidance note 5)		
Sat	2300	0100			
Sun	2300	0000			

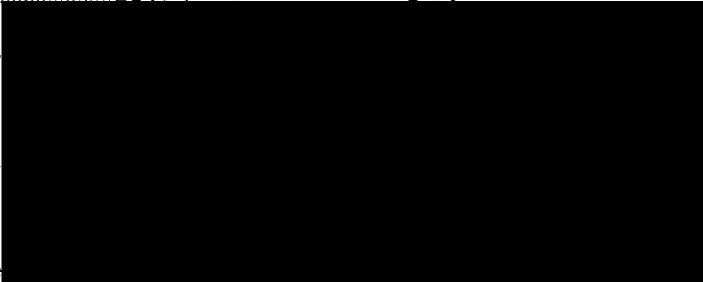
M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption (Please tick box Y) (please read guidance note 7)	On the premises	
Day	Start	Finish		Off the premises	
Mon	1100	0200	State any seasonal variations for the supply of alcohol (please read guidance note 4) WE ALSO WISH TO APPLY TO VARY THE HOURS ON CHRISTMAS EVE TO 0100 IF THIS DOES NOT FALL ON EITHER A FRIDAY OR SATURDAY	Both	<input checked="" type="checkbox"/>
Tue	1100	0200			
Wed	1100	0200			
Thur	1100	0200	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)		
Fri	1100	0100			
Sat	1100	0100			

Sun	1100	0000	

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

Name..... JACQUELINE ANN FURBER

Address..... 

Postcode.....

Personal Li.....

Issuing lice.....

N

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)

THERE WILL BE NO ADULT ENTERTAINMENT OF SERVICES AT THE CLUB AS THESE ARE CONTRARY TO THE OBJECTIVES OF A CRICKET CLUB. ~~THERE~~.

O

Hours premises are open to the public Standard timings (please read guidance note 6)			State any seasonal variation (please read guidance note 4)
Day	Start	Finish	
Mon	1100	0100	Non standard timings. Where you intend to use 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)
Tue	1100	0100	
Wed	1100	0100	
Thur	1100	0100	
Fri	1100	0200	
Sat	1100	0200	
Sun	1100	0000	

P

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

a) General - all four licensing objectives (b,c,d,e) (please read guidance note 9)

THE CLUB WILL REGULARLY REVIEW THE ACTIVITIES WITHIN THE CLUB WITH PARTICULAR RESPECT TO THE FOUR LICENCING OBJECTIVES. IF IT BELIEVES THAT ANY OF THE FOUR OBJECTIVES ARE NO LONGER BEING MET THEN STEPS TO ENSURE THAT OBJECTIVES ARE MET WILL BE PUT IN PLACE

b) The prevention of crime and disorder

THE CLUB DOES NOT OPERATE ANY HAPPY HOUR OR SIMILAR PROMOTION. ILLEGAL DRUGS ARE NOT PERMITTED ON THE PREMISES. ANY MEMBER FOUND IN POSSESSION WILL BE IMMEDIATELY SUSPENDED PENDING A DISCIPLINARY HEARING & REPORTED TO THE LOCAL POLICE. THE MEMBERSHIP OF ANY PERSON FOUND GUILTY AT A HEARING & WILL BE EXPELLED. ANY GUEST FOUND IN POSSESSION WILL NOT BE PERMITTED TO VISIT THE CLUB AGAIN.

c) Public safety

THE CLUB TAKES THE SAFETY OF MEMBERS AND GUESTS SERIOUSLY. THE CLUB HAS A HEALTH & SAFETY COMMITTEE WHOSE ROLE IS TO THE SAFETY OF MEMBERS & GUESTS. THE PREMISES AND FACILITIES ARE INSPECTED ON A REGULAR BASIS AND THEIR FINDINGS REPORTED TO THE MANAGEMENT COMMITTEE AND ACTED UPON PROMPTLY. SAFETY EQUIPMENT IS MAINTAINED ON AN ANNUAL AGREEMENT. THE CLUB HAS A NUMBER OF FIRST AIDERS TRAINED.

d) The prevention of public nuisance

THE PREMISES ARE IN A PRIVATE AREA & ONLY ACCESSIBLE BY FOOT OR DRIVE THROUGH TO THE CAR PARK. MEMBERS AND GUESTS ARE REQUESTED TO LEAVE THE PREMISES QUIETLY SO NOT TO DISTURB LOCAL RESIDENTS. THERE IS A LIMIT CAPACITY TO THE PREMISES WHICH LIMITS THE NUISANCE LEVEL. ANY LIVE OR RECORDED MUSIC BEING PLAYED WILL BE MONITORED FOR NOISE LEVEL AND REDUCED TO AN ACCEPTABLE LEVEL.

e) The protection of children from harm

THE CLUB HAS A LARGE JUNIOR SECTION AND AS SUCH UNDER 18'S ARE PERMITTED IN THE BAR. IF THE EVENT IS SOLELY FOR UNDER 18'S THE BAR WILL NOT BE OPEN. A MEMBERSHIP LIST WHICH INCLUDES THE DATE OF BIRTH OF ALL MEMBERS IS HELD AT THE CLUB. ALL COMMITTEE MEMBERS HAVE BEEN CRB CHECKED AS HAVE TEAM MANAGERS. ALL OTHER VOLUNTEERS MAKE VOLUNTARY DECLARATIONS. THE CLUB HAS APPROVED THE ECB CHILD PROTECTION POLICY TO ENSURE A SAFE PLACE FOR CHILDREN.

Please tick yes

- 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 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 CONVICTION TO A FINE UP TO 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

[Redacted Signature]

Date

14/3/12

Capacity

GROUND & FACILITIES OFFICER PARSON ST. MARYS CC

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

Capacity

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

TONY WRIGHT

[Redacted Contact Address]

Pos

Tel

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

Consent of individual to being specified as premises supervisor

JACQUELINE Ann FORDS
[full name of prospective premises supervisor]

of. [REDACTED]
[ho [REDACTED]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

Premises Licence [type of application]
by Harrow St Marys Cricket Club [name of applicant]
relating to a premises licence [number of existing licence, if any]
for

[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by Harrow St. Mary's Cricket Club [name of applicant]
concerning the supply of alcohol at MILLHAMS SPORTS CLUB
HEADSTONE LANE
Harrow - MIDDX HA2 6NF.
[name and address of premises to which application relates].

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number 161786
[insert personal licence number, if any]

Personal licence issuing authority BREWT
[insert name and address and telephone number of personal licence issuing authority, if

[REDACTED] signed

JACQUELINE A FORDS name (please print)

15/3/2012 dated