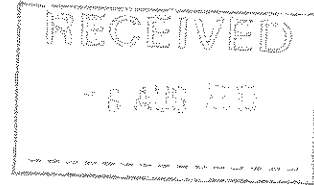


WBC/20154306  
4/9/15



**WAVERLEY BOROUGH COUNCIL**

Licensing Team, Chief Executive's Dept, Waverley Borough Council, The Burys, Godalming, Surrey GU7 1HR

**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 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 The Clockhouse (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 <u>The Clockhouse</u> <u>Chapel Lane</u>	
Post town <u>MILFORD</u>	Post code <u>GU8 5EZ</u>

Telephone number at premises (if any) 01483 420668

Non domestic rateable value of premises £

**Part 2 – Applicant Details**

Please state whether you are applying for a Premises Licence as:

- Please tick ✓
- 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  | <input type="checkbox"/>            | please complete section (B) |
| d) a charity  | <input checked="" type="checkbox"/> | please complete section (B) |
| e) The proprietor of an educational establishment   | <input type="checkbox"/>            | please complete section (B) |
| f) A health service body  | <input type="checkbox"/>            | 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  | <input type="checkbox"/>            | 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 | <input type="checkbox"/>            | please complete section (B) |
| h) The chief officer of police of a police force in England and Wales   | <input type="checkbox"/>            | please complete section (B) |

**Please tick ✓**

\*If you are applying as a person described in (a) or (b) please confirm:

- 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



**Please tick ✓**

I am 18 years old or over

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone number

Email address (optional)

**SECOND INDIVIDUAL APPLICANT (if applicable)**

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

Surname

First names

Please tick

I am 18 years old or over

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone number

Email address (optional)

**(B) OTHER APPLICANTS**

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

Name	<i>The Clockhouse</i>
Address	<i>Chapel Lane Mildford Surrey GU8 5E2</i>
Registered number (where applicable)	<i>Registered Charity Number 1059045</i>
Description of applicant (for example, partnership, company, unincorporated association etc.)	<i>Charity</i>
Telephone number (if any)	<i>01483 420668</i>
E-mail address (optional)	<i>manager@clockhouse.org.uk</i>

### Part 3 Operating Schedule

When do you want the premises licence to start?

Day	Month	Year

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

Day	Month	Year

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

The Clockhouse is a Day Centre for older people. The building is purpose built with a reception area, lounge with individual seating, a dining room with seating for up to 80 people. There is a fully equipped kitchen as well as separate rooms which are used for art classes, computer classes and meetings.

There are five offices: for the manager, the finance administrator, the chef, CRUISE and one for WRU.

There is a small shop for use by the members.

3 WC areas.

Functions are held in the lounge and dining room and corridor and sometimes the use of the kitchen.

The sale of alcohol is restricted to the main areas including the corridor.

If 5000 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 Schedule 1 and 2 to the Licensing Act 2003)

**Provision of regulated entertainment**

**Please tick ✓**

- |    |  |                                     |
|----|--|-------------------------------------|
| a) | plays (if ticking yes, fill in box A)  | <input checked="" type="checkbox"/> |
| b) | films (if ticking yes, fill in box B)  | <input checked="" type="checkbox"/> |
| c) | indoor sporting events (if ticking yes, fill in box C)   | <input type="checkbox"/>            |
| d) | boxing or wrestling entertainment (if ticking yes, fill in box D)  | <input type="checkbox"/>            |
| e) | live music (if ticking yes, fill in box E)   | <input checked="" type="checkbox"/> |
| f) | recorded music (if ticking yes, fill in box F)   | <input checked="" type="checkbox"/> |
| g) | performance of dance (if ticking yes, fill in box G)   | <input checked="" type="checkbox"/> |
| h) | anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input checked="" type="checkbox"/> |

**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

<b>Plays</b> Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	
Mon	9.00	0.00	Please give further details here (please read guidance note 3)	Both	
Tue	9.00	0.00			
Wed	9.00	0.00	State any seasonal variations for performing plays (please read guidance note 4)		
Thur	9.00	0.00			
Fri	9.00	0.00	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	9.00	0.00			
Sun	9.00	0.00			

# B

<b>Films</b> Standard days and timings (please read guidance note 6)			Will the exhibition of films take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	
Mon	9.00	0.00	Please give further details here (please read guidance note 3)	Both	
Tue	9.00	0.00			
Wed	9.00	0.00	State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur	9.00	0.00			
Fri	9.00	0.00	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	9.00	0.00			
Sun	9.00	0.00			

# 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 (✓) (please read guidance note 2)</b>	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	9.00	0.00	<b>Please give further details here (please read guidance note 3)</b>	Both	<input type="checkbox"/>
Tue	9.00	0.00			
Wed	9.00	0.00	<b>State any seasonal variations for the performance of live music (please read guidance note 4)</b>		
Thur	9.00	0.00			
Fri	9.00	0.00	<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. (Please read guidance note 5)</b>		
Sat	9.00	0.00			
Sun	9.00	0.00			

# 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 (✓) (please read guidance note 2)</b>	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	9.00	0.00	<b>Please give further details here (please read guidance note 3)</b>	Both	<input type="checkbox"/>
Tue	9.00	0.00			
Wed	9.00	0.00	<b>State any seasonal variations for the playing of recorded music (please read guidance note 4)</b>		
Thur	9.00	0.00			
Fri	9.00	0.00	<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. (please read guidance note 5)</b>		
Sat	9.00	0.00			
Sun	9.00	0.00			

# 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"/>	
Day	Start	Finish		Outdoors		
Mon	9.00	0.00	Please give further details here (please read guidance note 3)	Both		
Tue	9.00	0.00				
Wed	9.00	0.00		State any seasonal variations for the performance of dance (please read guidance note 4)		
Thur	9.00	0.00				
Fri	9.00	0.00		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 5)		
Sat	9.00	0.00				
Sun	9.00	0.00				

# 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	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input checked="" type="checkbox"/>
Mon	9.00	0.00	Please give further details here (please read guidance note 3) <del>We have a summer fair at which if the weather is good we occasionally have games in the front of the building.</del>	Both	
Tue	9.00	0.00			
Wed	9.00	0.00	State any seasonal variations for the entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)		
Thur	9.00	0.00			
Fri	9.00	0.00	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)		
Sat	9.00	0.00			
Sun	9.00	0.00			



<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	
Day	Start	Finish		Outdoors	
Mon			<b>Please give further details here</b> (please read guidance note 3)	Both	
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>Sale of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the sale of alcohol be for consumption on or off the premises or both – please tick (✓)</b> (please read guidance note 7)	On the premises	<input checked="" type="checkbox"/>
Day	Start	Finish		Off the premises	
Mon	11.00	23.00	<b>State any seasonal variations for the sale of alcohol</b> (please read guidance note 4)	Both	
Tue	11.00	23.00			
Wed	11.00	23.00	<b>Non standard timings. Where you intend to use the premises for the sale of alcohol at different times to those listed in the column on the left, please list.</b> (please read guidance note 5)		
Thur	11.00	23.00			
Fri	11.00	23.00			
Sat	11.00	23.00			
Sun	11.00	23.00			

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

**Name** Mrs Jessica Hilsdon

**Address** Silverdale  
Moors Lane  
Eblead

**Postcode** GU8 6DN

**Personal licence number (if known)** LN / 000004180

**Issuing licensing authority (if known)** Waverley Borough Council

**Personal licence expiry date (if known)** 17th April 2022

## 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)**

We hold film evenings. Film ratings is indicated and attendees monitored. Children may accompany an adult to these events according to the film rating. Alcohol is sold at some events including film and quiz evenings. If a child attends they would be required to be supervised by an adult. No alcohol is served to a person under the age of 18.

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 4)
Day	Start	Finish	
Mon	9.00	0.00	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)
Tue	9.00	0.00	
Wed	9.00	0.00	
Thur	9.00	0.00	
Fri	9.00	0.00	
Sat	9.00	0.00	
Sun	9.00	0.00	

## M

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 building is operated by a registered charity with a publicly accountable board of trustees to which neighbours or anyone in the community can make representations. There is a close liaison with Waverley Borough Council whose representatives are invited to and attend trustee board meetings. Hires shall be a minimum age of 21. All hiring is discussed with the manager.

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

The conditions of the Hire Agreement prohibit drunk and disorderly behaviour either on the premises or in the vicinity. No illegal drugs shall be taken on to the premises. Drinking water is available at all times.

There is adequate lighting both inside and outside the building. The Hiree shall be responsible for obtaining any licences which may be needed.

**c) Public safety**

The maximum number of people using the premises is 170. Smoking is not allowed in the premises. Fire exits are sign posted. Hirees shall be responsible for the observance of the regulations pertaining to the premises stipulated by the fire authority, the local Authority and the licensing Authority. The manager of the blockhouse shall provide hirees on fire safety and evacuation procedures. All electrical appliances brought on to the premises must be in good working order. The manager undertakes regular health and safety checks.

**d) The prevention of public nuisance**

The Hire agreement requires the hiree to ensure that the minimum of noise is made on arrival and departure. At the end of an event the hiree is required to ask people present to respect the neighbours and leave quietly. The hire agreement shall stipulate that if music is played it stops at 23.00. The building must be vacated by 0.00 at the latest. External lighting is off by 0.00. No drinks of alcohol shall be taken outside the building.

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

All film evenings have a film rating indicated and attendees are monitored. Children may accompany an adult according to the film rating. Alcohol shall not be served to any person under the age of 18. As part of the Hire agreement children should be accompanied by an adult at all times. Hirees shall be a minimum of 21 years of age.

Please tick ✓

- I have made or enclosed payment of the fee
- I have enclosed a 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: William Gahmali  
 Date: 1 July 2011  
 Capacity: TRUSTEE AND SOLICITOR

**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 12). **If signing on behalf of the applicant please state in what capacity.**

Signature: .....  
 Date: .....  
 Capacity: .....

<b>Contact Name (where not previously given) and postal address for correspondence associated with this application</b> (please read guidance note 13)	
<b>Post town</b>	<b>Post code</b>
<b>Telephone number (if any)</b>	
<b>If you would prefer us to correspond with you by e-mail, your e-mail address (optional)</b>	