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Entertainment Licensing, Leeds City Council, Civic Hall, Leeds, LS1 1UR

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		
Surname	Robinson		
Forenames	Ashley David		
2. Previous names: (Please enter details of any previous names or maiden names, if applicable. Please continue on a separate sheet if necessary).			
Title			
Surname			
Forenames			
3. Your date of birth	Day 14	Month 10	Year 1990
4. Your place of birth	Stockton-on-tees		
5. National Insurance Number	TBA		
6. Your current address: (We will use this address to correspond with you unless you complete the separate correspondence box below).			
16 Ice Works, 4 Cross York Street			
Post town	Leeds	Post code	LS2 7EE
7. Other contact details			
Telephone numbers:	07528048104		
Daytime	07528048104		
Evening (optional)			
Mobile (optional)			
FAX NUMBER (optional)			
E-Mail Address (if available)	Ashley.robinson@beat-bar.co.uk		

25 NOV 2003

RECEIVED

8. Alternative address for correspondence (if you complete the detail below, we will use this address to correspond with you)

Post town

Post code

9. Alternative contact details (if applicable)

Telephone numbers:

Daytime

Evening (optional)

Mobile (optional)

FAX NUMBER (optional)

E-Mail Address (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)

Beat Bar
66 Merrion Steet
Leeds
LS2 9LW

Does a premises licence or club premises certificate have effect in relation to the premises (or any part of the premises)? If so please enter the licence or certificate number below.

Premises licence number

PREM/03146/001

Club premises certificate number

If you intend to use only part of the premises at this address or intend to restrict the area to which this notice applies, please give a description and details below. (Please read note 3)

Please describe the nature of the premises below. (Please read note 4)

Music venue/Nightclub

Please describe the nature of the event below. (Please read note 5)

Music Entertainment by DJ playing recorded music.

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3. The licensable activities

Please state the licensable activities that you intend to carry on at the premises (please tick all licensable activities you intend to carry on). (Please read note 6)

The sale by retail of alcohol	<input checked="" type="checkbox"/>
The supply of alcohol by or on behalf of a club to, or to the order of, a member of the club	<input type="checkbox"/>
The provision of regulated entertainment	<input checked="" type="checkbox"/>
The provision of late night refreshment	<input checked="" type="checkbox"/>
Are you giving a late temporary event notice? (Please read note 7)	<input checked="" type="checkbox"/>

Please state the dates on which you intend to use these premises for licensable activities. (Please read note 8)

26/12/2013

Please state the times during the event period that you propose to carry on licensable activities (please give times in 24 hour clock). (Please read note 9)

23:00 – 06:00

Please state the maximum number of people at any one time that you intend to allow to be present at the premises during the times when you intend to carry on licensable activities, including any staff, organisers or performers. (Please read note 10)	300
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If the licensable activities will include the supply of alcohol, please state whether the supplies will be for consumption on or off the premises, or both (please mark an "X" next to the appropriate box). (Please read note 11)	On the premises only	<input checked="" type="checkbox"/>
	Off the premises only	<input type="checkbox"/>
	Both	<input type="checkbox"/>

4. Personal licence holders (Please read note 12)

Do you currently hold a valid personal licence? (Please tick)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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If "Yes" please provide the details of your personal licence below.

Issuing licensing authority	Leeds City Council
Licence number	LEEDS/PERL/07195/13
Date of issue	
Date of expiry	31/10/2023

Any further relevant details	
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5. Previous temporary event notices you have given (Please read note 13 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 <input type="checkbox"/>	No X
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	0	
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 <input type="checkbox"/>	No X

6. Associates and business colleagues (Please read note 14 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 X	No <input type="checkbox"/>
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.	5	
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; the event period proposed in this notice?	Yes <input type="checkbox"/>	No X
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 <input type="checkbox"/>	No X
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.		
Has any person with whom you are in business carrying on 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?	Yes <input type="checkbox"/>	No X

7. Checklist (Please read note 15)

I have: (Please tick the appropriate boxes)

Sent at least one copy of this notice to the licensing authority for the area in which the premises are situated	<input checked="" type="checkbox"/>
Sent a copy of this notice to the chief officer of police for the area in which the premises are situated;	<input type="checkbox"/>
Sent a copy of this notice to the local authority exercising environmental health functions for the area in which the premises are situated	<input type="checkbox"/>
If the premises are situated in one or more licensing authority areas, sent at least one copy of this notice to each additional licensing authority	<input type="checkbox"/>
If the premises are situated in one or more police areas, sent a copy of this notice to each additional chief officer of police	<input type="checkbox"/>
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	<input type="checkbox"/>
Made or enclose payment of the fee for the application	<input type="checkbox"/>
Signed the declaration in Section 9 below	<input type="checkbox"/>

8. Condition Please read note 15

It is a condition of this temporary event notice that where the relevant licensable activities described in Section 3 above include the supply of alcohol that all such supplies are made by or under the authority of the premises user.

9. Declarations Please read note 16

The information contained in this form is correct to the best of my knowledge and belief.

I understand that it is an offence:

- (i) to knowingly or recklessly make a false statement in connection with this temporary event notice and that a person is liable on conviction for such an offence to a fine up to level 5 on the standard scale, and;
- (ii) to permit an unauthorised licensable activity to be carried on at any place and that a person is liable on conviction for any such offence to a fine not exceeding £20,000 or to imprisonment for a term not exceeding six months, or to both.

SIGNATURE:- Ashley David Robinson

DATE 25/11/2013

Name of Person signing: Ashley David Robinson

For completion by the licensing authority

10. Acknowledgement (Please read note 19)

I acknowledge receipt of this temporary event notice.

SIGNATURE *Philomena Carville*
On behalf of the Licensing AuthorityDATE *27/11/2013*Name of officer signing *PHILOMENA CARVILLE*

Entertainment Licensing, Leeds City Council, Civic Hall, Leeds, LS1 1UR

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1. Your name			
Title	Mr		
Surname	Robinson		
Forenames	Ashley David		
2. Previous names: (Please enter details of any previous names or maiden names, if applicable. Please continue on a separate sheet if necessary).			
Title			
Surname			
Forenames			
3. Your date of birth		Day 14	Month 10
			Year 1990
4. Your place of birth		Stockton-on-tees	
5. National Insurance Number		TBA	
6. Your current address: (We will use this address to correspond with you unless you complete the separate correspondence box below).			
16 Ice Works, 4 Cross York Street			
Post town Leeds		Post code LS2 7EE	
7. Other contact details			
Telephone numbers:	07528048104		
Daytime	07528048104		
Evening (optional)			
Mobile (optional)			
FAX NUMBER (optional)			
E-Mail Address (if available)	Ashley.robinson@beat-bar.co.uk		

ENTERTAINMENT LICENSING

25 NOV 2003

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Post town

Post code

9. Alternative contact details (if applicable)

Telephone numbers:

Daytime

Evening (optional)

Mobile (optional)

FAX NUMBER (optional)

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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).
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Please describe the nature of the premises below. (Please read note 4)

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Please describe the nature of the event below. (Please read note 5)

Music Entertainment by DJ playing recorded music.

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The supply of alcohol by or on behalf of a club to, or to the order of, a member of the club	<input type="checkbox"/>
The provision of regulated entertainment	<input checked="" type="checkbox"/>
The provision of late night refreshment	<input checked="" type="checkbox"/>
Are you giving a late temporary event notice? (Please read note 7)	<input checked="" type="checkbox"/>

Please state the dates on which you intend to use these premises for licensable activities. (Please read note 8)

14/12/2013

Please state the times during the event period that you propose to carry on licensable activities (please give times in 24 hour clock). (Please read note 9)

23:00 – 05:00

Please state the maximum number of people at any one time that you intend to allow to be present at the premises during the times when you intend to carry on licensable activities, including any staff, organisers or performers. (Please read note 10)

300

If the licensable activities will include the supply of alcohol, please state whether the supplies will be for consumption on or off the premises, or both (please mark an "X" next to the appropriate box). (Please read note 11)

On the premises only	<input checked="" type="checkbox"/>
Off the premises only	<input type="checkbox"/>
Both	<input type="checkbox"/>

4. Personal licence holders (Please read note 12)

Do you currently hold a valid personal licence?
(Please tick)

Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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If "Yes" please provide the details of your personal licence below.

Issuing licensing authority	Leeds City Council
Licence number	LEEDS/PERL/07195/13
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Any further relevant details	
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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 <input type="checkbox"/>	No X
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	0	
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 <input type="checkbox"/>	No X

6. Associates and business colleagues (Please read note 14 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 X	No <input type="checkbox"/>
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.	5	
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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 <input type="checkbox"/>	No X
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7. Checklist (Please read note 15)

I have: (Please tick the appropriate boxes)

Sent at least one copy of this notice to the licensing authority for the area in which the premises are situated	X
Sent a copy of this notice to the chief officer of police for the area in which the premises are situated;	<input type="checkbox"/>
Sent a copy of this notice to the local authority exercising environmental health functions for the area in which the premises are situated	<input type="checkbox"/>
If the premises are situated in one or more licensing authority areas, sent at least one copy of this notice to each additional licensing authority	<input type="checkbox"/>
If the premises are situated in one or more police areas, sent a copy of this notice to each additional chief officer of police	<input type="checkbox"/>
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	<input type="checkbox"/>
Made or enclose payment of the fee for the application	<input type="checkbox"/>
Signed the declaration in Section 9 below	<input type="checkbox"/>

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SIGNATURE:- Ashley David Robinson

DATE 25/11/2013

Name of Person signing: Ashley David Robinson

For completion by the licensing authority

10. Acknowledgement (Please read note 19)

I acknowledge receipt of this temporary event notice.

SIGNATURE *Philomena Carville*
On behalf of the Licensing Authority

DATE 27/11/2013

Name of officer signing *PHILOMENA CARVILLE*