

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.

I/We Cheadle Carnival committee

(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			
Recreation Ground Tea Road Cheadle Staffs			
Post town	Cheadle	Postcode	ST10 1LG

Telephone number at premises (if any)	None
Non-domestic rateable value of premises	£

Part 2 - Applicant details

Please state whether you are applying for a premises licence as **appropriate** **Please tick as**

a)	an individual or individuals *		please complete section (A)
b)	a person other than an individual *		
	i as a limited company/limited liability partnership		please complete section (B)
	ii as a partnership (other than limited liability)		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 in Wales		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		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 (by ticking yes to one box below):

- 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		
Date of birth			I am 18 years old or over		Please tick yes
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service (please see note 15 for information)					

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Second individual applicant (if applicable)

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
Date of birth or over		I am 18 years old		Please tick yes	
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service: (please see note 15 for information)					

(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 Cheadle Carnival Committee
Address 2 Froghall Rd Cheadle Staffordshire St10 1JT

Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
0	5	0 7 2 0 2 4

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

DD	MM	YYYY
0	7	0 7 2 0 2 4

Please give a general description of the premises (please read guidance note 1)
Open park land with perimeter fence near to the centre of Cheadle adjacent to the A522
Co ordinates
Longitude; 1.98538720105
Latitude; 52.9823003087

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

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What licensable activities do you intend to carry on from the premises?

(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)	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)	x
e)	live music (if ticking yes, fill in box E)	x
f)	recorded music (if ticking yes, fill in box F)	x
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)	x

<u>Provision of late night refreshment</u> (if ticking yes, fill in box I)	
<u>Supply of alcohol</u> (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 7)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 5)		
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 6)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 7)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for the exhibition of films (please read guidance note 5)		
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 6)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Wed			
Thur			
Fri			<u>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</u> (please read guidance note 6)
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	x
				Both	
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 5)		
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 6)		
Sat	13.00	16.00			
Sun					

E

Live music Standard days and timings (please read guidance note 7)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	x
				Both	
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon					
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 5)		
Thur					
Fri	17.00	23.00			
Sat	13.00	20.30	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 6)		
Sun	12.00	18.00			

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	x
				Both	
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 5)		
Thur					
Fri	17.00	23.00	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 6)		
Sat	13.00	10.30			
Sun	12.00	18.00			

G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for the performance of dance (please read guidance note 5)		
Thur					
Fri			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 6)		
Sat					
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing Arena shows		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Mon				Outdoors	x
				Both	
Tue			<u>Please give further details here</u> (please read guidance note 4)		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5)		
Fri					
Sat	13.00	17.00	<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> (please read guidance note 6)		
Sun	12.00	17.00			

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
Thur					
Fri			<u>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</u> (please read guidance note 6)		
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises	x
				Off the premises	
				Both	
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Mon					
Tue					
Wed					
Thur					
Fri	17.00	22.30			
Sat	13.00	22.30			
Sun	12.00	18.00	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 6)		

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

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

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 9).

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variations</u> (please read guidance note 5)
Day	Start	Finish	
Mon			
Tue			
Wed			<u>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</u> (please read guidance note 6)
Thur			
Fri	16.00	23.00	
Sat	12.00	22.30	
Sun	11.00	18.00	

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 10)

b) The prevention of crime and disorder

SEE ATTACHED PROPOSED CONDITIONS.
RISK ASSESSMENT TO ALSO FORM PART OF THE OPERATING SCHEDULE

c) Public safety

SEE ATTACHED PROPOSED CONDITIONS.
RISK ASSESSMENT TO ALSO FORM PART OF THE OPERATING SCHEDULE

d) The prevention of public nuisance

SEE ATTACHED PROPOSED CONDITIONS.
RISK ASSESSMENT TO ALSO FORM PART OF THE OPERATING SCHEDULE

e) The protection of children from harm

SEE ATTACHED PROPOSED CONDITIONS.
RISK ASSESSMENT TO ALSO FORM PART OF THE OPERATING SCHEDULE

Checklist:

Please tick to indicate agreement

<input type="checkbox"/>	I have made or enclosed payment of the fee.	
<input type="checkbox"/>	I have enclosed the plan of the premises.	
<input type="checkbox"/>	I have sent copies of this application and the plan to responsible authorities and others where applicable.	
<input type="checkbox"/>	I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.	
<input type="checkbox"/>	I understand that I must now advertise my application.	
<input type="checkbox"/>	<ul style="list-style-type: none"> I understand that if I do not comply with the above requirements my application will be rejected. [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15). 	

It is an offence, under Section 158 of the Licensing Act 2003, to make a false statement in or in connection with this application. Those who make a false statement may be liable on summary conviction to a fine of any amount.

It is an offence under Section 24b of the Immigration Act 1971 for a person to work when they know, or have reasonable cause to believe, that they are disqualified from doing so by reason of their immigration status. Those who employ an adult without leave or who is subject to conditions as to employment will be liable to a civil penalty under section 15 of the Immigration, Asylum and Nationality Act 2006 and pursuant to Section 21 of the same act, will be committing an offence where they do so in the knowledge, or with reasonable cause to believe, that the employee is disqualified.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Declaration	<ul style="list-style-type: none"> [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in
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CHEADLE CARNIVAL 2024 SECTION M OPERATING SCHEDULE - PROPOSED CONDITIONS. RISK ASSESSMENTS TO ALSO FORM PART OF THE OPERATING SCHEDULE.

1. An Event Management Plan (EMP) /Risk Assessment (RA) must be provided to Staffordshire Police Force Events Unit (email: events@staffordshire.police.uk) **14 days prior to the event taking place**. The EMP/RA must include details of security/stewarding arrangements having regard to the anticipated numbers attending the event. The Event Management Plan must include fire risk assessment, provisions for injury/ill health and emergency/evacuation plans, Policing/security/searching provisions (including a drug and weapon search policy), child protection policy including lost child procedure, noise management plan, crowd control/audience behaviour, dispersal policy, traffic management and food hygiene procedures.

2. Staff training must include procedures to deal effectively with emergency incidents including:

- Reporting an emergency to the relevant emergency service
- Safe evacuation of customers
- Dealing with terrorist threats or incidents

Staff training to also incorporate:

- Responsible Alcohol Service, including recognising signs of drunkenness, refusal skills, drugs awareness
- Managing and resolving conflict
- Premises Licence conditions
- Relevant obligations and offences under the Licensing Act 2003, including those associated with the sale of alcohol
- Safeguarding awareness in child protection matters (protecting children from harm)

Records of training must be documented and kept on the premises for inspection by the Responsible Authorities.

3. Where the Event Management Plan/Risk Assessment indicates that Security/Door Staff are required, then they must be Security Industry Authority (SIA) registered and conditions 3a and 3b, as referenced below, must be complied with.

3a. The Premises Licence Holder/Designated Premises Supervisor must identify the requirement for Security/Door Staff at all times by way of a risk assessment. Where the Risk Assessment identifies the need for Security/Door Staff to be deployed, staff must be of sufficient number to be able to control entry to the premises and deal with any instances of disorderly behaviour within the premises simultaneously. Security/Door Staff must remain at the premises until such time the premises are closed and all members of the public have left the venue. All persons utilised at the premises in the capacity of a Security/Door Staff must wear high visibility clothing and must utilise radios and Body Worn Cameras with the facility to record at all times they are deployed.

All images must be kept for a consecutive 28 day period and to be produced to the Police, Trading Standards or Local Authority Officers in relation to the investigation of crime and/or disorder issues and suspected licence breaches, upon request or within 24 hours of such request where it is necessary to do so for the prevention of crime and disorder, prosecution or apprehension of offenders or where disclosure is required by law.

3b. Where Security/Door Staff are employed there must be a register of every SIA person employed at the premises that contains the following details:

- Name, date of birth and home address
- Security Industry Authority licence number
- Time and date Security/Door Staff starts and finishes duty
- Each entry shall be signed by the Security/Door Staff

That register must be kept fully updated at all times and remain at the licensed premises and be available for inspection immediately by an authorised officer of the Licensing Authority, the Security Industry Authority or Police.

4. No entertainment, performance, service, or exhibition involving nudity or sexual stimulation permitted, except when the premises are operating under the authority of a Sexual Entertainment Venue Licence.

5. No open vessels containing alcoholic drinks must be taken from the boundaries of the premises.

6. Where the Event Management Plan/Risk Assessment indicates a requirement for non-glass drinking receptacles (including bottles), these must be of an alternative material other than glass. Any drinks not available in this packaging must be decanted and the glass/bottle retained by the staff at the location and not handed to the customer.

To incorporate conditions in section M (e) The protection of children from harm:

1. Challenge 25 must be operated at the premises whereby all persons who appear to be under 25 and purchasing or attempting to purchase alcohol must be asked to provide identification to prove they are over 18 years of age.

2. The only acceptable forms of identification allowed must be a valid passport, valid photo ID driving licence or valid proof of age scheme card with the PASS approved hologram.

3. Challenge 25 signage must be displayed in a clear and prominent public place at the premises.

4. All staff must be fully trained in relation to the Challenge 25 scheme before being allowed to sell alcohol and a record must be kept of staff training. Training must be refreshed at least every 12 calendar months. Such training must be recorded and be maintained at the premises and made available for inspection upon request by a Responsible Authority. Records for each person must be retained for a minimum of 12 months.

5. A refusals register must be held at the premises and contain details of the time and date of any sales that are refused in relation to persons that are under age. This refusals register must be checked following each event by the Designated Premises Supervisor or Duty Manager and endorsed accordingly. This register must be made available for inspection upon request by a Responsible Authority. Records must be retained for a minimum of 12 months. This register can be written or electronic.

6. The Designated Premises Supervisor must ensure that a written notice of authority is kept at the premises for all staff who sell alcohol. The notice must be made available for inspection upon request by a Responsible Authority and all staff selling alcohol must be in possession of formal identification to enable to verify their identity against the notice.

	<p>the UK (please read guidance note 15).</p> <ul style="list-style-type: none"> The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)
Signature	
Date	19-02-24
Capacity	Chairman

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 13). 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 14)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

Notes for Guidance

