

Temporary Event Notice

Important new legislation on COVID-19 available [here](#).




Information on the Licensing Act 2003 is available [here](#).

Before completing this form [please read the guidance notes](#).

You may wish to keep a copy of the completed form for your records.

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.

Personal Details <i>(Please read note 1)</i>				
Your name				
Title	Forenames	Surname		
Miss	Jey Chloe	Gregory		
Previous names <i>(if relevant)</i>				
Have you used any previous names?		Yes	<input checked="" type="checkbox"/>	No <input type="checkbox"/>
Miss	Joanna Chloe	Wootton		
Have you used any other previous names?		Yes	<input type="checkbox"/>	No <input checked="" type="checkbox"/>
Have you used any other previous names?		Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Your date of birth	[REDACTED]			
Your place of birth	[REDACTED]			
National Insurance No.	[REDACTED]			

Your current address (We will use this address to correspond with you unless you complete the separate correspondence box on the next page)	
X	
	
Other contact details	
Telephone numbers	
Daytime telephone	
Evening telephone (optional)	
Mobile telephone (optional)	
Fax number (optional)	
Email address	

Alternative address for correspondence (<i>Address for correspondence associated with this application, if different to the previous address</i>)	
X	
Bees Knees 89-97 Blackburn Road Accrington BB5 1JJ	
Alternative contact details (<i>if applicable</i>)	
Telephone numbers	
Daytime (optional)	
Evening (optional)	
Mobile (optional)	
Fax number (optional)	
Email address (optional)	

The Premises	
Please select the address of the premises where you intend to carry out the licensable activities. If there is no address, please select the street record in the address lookup and supply further details of the location (including ordnance Survey references) (Please read note 2)	
<p>Bees Knees 89-97 Blackburn Road Accrington BB5 1JJ</p>	
Trading name	Bees Knees
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	PL0058
Additional address information	

Do you intend to use the whole of the premises at this address (Please read note 3) Yes No

Please give a description and details below
Please describe the nature of the premises below (Please read note 4).
Public House
Please describe the nature of the event below (Please read note 5).
Late supply of alcohol and extended opening hours for Bank holiday weekend

The Licensable Activities		
Please state the licensable activities that you intend to carry on at the premises (Please mark an "X" next to the licensable activities you intend to carry on - either double click with the mouse, or press the space bar in the relevant field) (Please read note 6)		
The sale by retail of alcohol		X
The supply of alcohol by or on behalf of a club to, or to the order of, a member of the club		
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 read note 12)	On the premises	X
	Off the premises	
	Both	
The provision of regulated entertainment (Please read note 7)		
The provision of late night refreshment		X
Are you giving a late temporary event notice? (Please read note 8)		

Please state the date and times on which you intend to use these premises for licensable activities (please read note 9).							
Please give times in 24-hour clock. e.g. 19:00.							
Start Date	31/03/2024	Time	12:00	End Date	01/04/2024	Time	03:00
Please state the times during the event period that you propose to carry on licensable activities. Please give times in 24-hour clock. e.g. 19:00 (please read note 10).				12:00 until 03:00			
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 11)						350	

State if the licensable activities will include the provision of relevant entertainment. Note: **Relevant Entertainment** is defined as any live performance or any live display of nudity etc.

If you are applying for the relevant entertainment activity, please state the times during the event period that you propose to provide the relevant entertainment. (Please read note 13)

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Personal Licence Holders <i>(Please read note 14)</i>	
Do you currently hold a valid personal licence?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Please provide the details of your personal licence below.	
Issuing licencing authority	Hyndburn Borough Council
Licence number	HYP A1172
Date of issue	20/04/2022
Date of expiry	
Any further relevant details	

Previous Temporary Event Notices you have given <i>(Please read note 15)</i>		
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 checked="" type="checkbox"/>	No <input type="checkbox"/>
Please state the number of temporary event notices you have given for events in the same calendar year	1	
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 <input checked="" type="checkbox"/>

Associates and business colleagues		
Has any associate of yours given a temporary event notice in the same calendar year as the event for which you are now giving a temporary event notice?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Please state the total number of temporary event notices your associate(s) have given for events in the same calendar year		
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 4 hours or less after the event period proposed in this notice?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/>
Please state the total number of temporary event notices 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 <input checked="" type="checkbox"/>

Condition (Please read note 18)
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.

Custom Process Configuration

XML Specific

Application type	<input type="text"/>
Licence Case Type	<input type="text"/>
Licence Status	<input type="text"/>
XML Template	TEN
CAPS Reference	ZZLO00000716

Payments request

CallingAppID	<input type="text"/>
CallingAppRef	<input type="text"/>
PaymentSourceCode	<input type="text"/>

Response response

PaymentAuthorisationCode	<input type="text"/>
IncomeManagementReceiptNumber	<input type="text"/>
Originators Reference	<input type="text"/>
CardScheme	<input type="text"/>
CardType	<input type="text"/>
PaymentAmount	<input type="text"/>
ResponseCode	<input type="text"/>
ResponseDescription	<input type="text"/>
Number of payment lines	<input type="text"/>
Process ID From External	<input type="text"/>

Payment 1

Receipt Number	<input type="text"/>
DueDate	<input type="text"/>
PaymentType	<input type="text"/>
Pay Description	Temporary Event Notice
XML Description	Temporary Event Notice
PaymentDue	<input type="text"/>
Paid	<input type="text"/>
Payment Date	<input type="text"/>
Fund	Z1
Reference	YF2NDB10N98

Form Calculations

Title Casing	<input type="text"/>
Sentence Casing	<input type="text"/>
UPRN for address lookup	<input type="text"/>
Boolean to "hide" page	<input type="checkbox"/>
Form Reference	<input type="text"/>
User Classification	<input type="text"/>
Bank holiday array population	<input type="text"/>
Boolean to activate page numbers	<input type="checkbox"/>

Field for fee array

Licence Lookup

Licence Lookup

Other Custom Calculations

Calculation for late ten	<input type="text"/>	App Day Tel:	<input type="text"/>
Calculation for licensable activities	<input type="text"/>	App Eve Tel:	<input type="text"/>
Number of Days TEN Covers	1	App Mobile:	<input type="text"/>
Subject Line for Email Out	<input type="text"/>	App Fax:	<input type="text"/>
Body for Internal Email	<input type="text"/>	App Email:	<input type="text"/>
Body for External Email	<input type="text"/>	Agnt Day Tel:	<input type="text"/>
Start Date in XML format	<input type="text"/>	Agnt Eve Tel:	<input type="text"/>
End Date in XML Format	<input type="text"/>	Agnt Mobile:	<input type="text"/>
Hours the TEN covers	<input type="text"/>	Agnt Fax:	<input type="text"/>
DOB	<input type="text"/>	Agnt Email:	<input type="text"/>
Customer Email Acknowledgment	<input type="text"/>	TEN Notice:	<input type="text"/>

Declarations <i>(Please read note 19)</i>	
The information contained in this form is correct to the best of my knowledge and belief.	
I understand that it is offence:	
To knowingly or recklessly make a false statement in connection with this temporary event notice and that a person is liable on summary conviction for such an offence to a fine of any amount; and	
To permit an unauthorised licensable activity to be carried on at any place an that a person is liable on conviction for any such offence to a fine of any amount, or to imprisonment for a term not exceeding six (6) months, or to both.	
Please tick the box if you agree with the declarations above	<input checked="" type="checkbox"/>
Date	07/02/2024
Name of person signing	Miss Jey Chloe Gregory

