

# Wiltshire Council

## 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** ALKA HUGHES-HALLETT AND JAMES HUGHES- HALLETT .....  
*(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			
THOULSTONE PARK LIMITED, THOULSTONE WILTSHIRE			
<b>Post town</b>	NR. WESTBURY	<b>Postcode</b>	BA13 4AQ

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£ NIL

### Part 2 - Applicant details

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

a)	an individual or individuals *	<input checked="" type="checkbox"/>	please complete section (A)
b)	a person other than an individual *	<input type="checkbox"/>	
	i as a limited company/limited liability partnership	<input type="checkbox"/>	please complete section (B)
	ii as a partnership (other than limited liability)	<input type="checkbox"/>	please complete section (B)
	iii as an unincorporated association or	<input type="checkbox"/>	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	<b>Mrs</b> ✓	Miss	Ms	Other Title (for example, Rev)	
<b>Surname</b> HUGHES-HALLETT			<b>First names</b> ALKA		
<b>Date of birth</b>		I am 18 years old or over ✓ Please tick yes			
Nationality [REDACTED]					
Current residential address if different from premises address		[REDACTED]			
Post town	[REDACTED]	Postcode	[REDACTED]		
<b>Daytime contact telephone number</b>		[REDACTED]			
<b>E-mail address (optional)</b>		[REDACTED]			

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)

**Second individual applicant** (if applicable)

Mr <input checked="" type="checkbox"/>	Mrs	Miss	Ms	Other Title (for example, Rev)	
<b>Surname</b> HUGHES-HALLETT			<b>First names</b> JAMES EDWARD		
<b>Date of birth</b> [REDACTED]		I am 18 years old or over <input checked="" type="checkbox"/>		Please tick yes	
<b>Nationality</b> [REDACTED]					
Current residential address if different from premises address		[REDACTED]			
Post town [REDACTED]			Postcode [REDACTED]		
<b>Daytime contact telephone number</b>		[REDACTED]			
<b>E-mail address (optional)</b>		[REDACTED]			
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
Address
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	1	1 0 2 0 2 3

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

DD	MM	YYYY

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

A MARQUEE AND ADJACENT OUTDOOR AREAS  
LOCATED WELL AWAY FROM THE NEIGHBOURING HOUSES.  
THE MARQUEE CAN COMFORTABLY SIT 150 GUESTS AT TABLES, AND 3-400  
STANDING.  
PLEASE SEE ATTACHED PLANS.

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
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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)	
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)	

<b><u>Provision of late night refreshment</u></b> (if ticking yes, fill in box I)	
<b><u>Supply of alcohol</u></b> (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)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
				Both	√
Mon	12:00	23:00	<b><u>Please give further details here</u></b> (please read guidance note 4) AMPLIFIED MUSIC IN MARQUEE		
Tue	12:00	23:00	<b><u>State any seasonal variations for performing plays</u></b> (please read guidance note 5)  MORE PERFORMANCES MAY BE OFFERED FROM MAY - OCTOBER		
Wed	12:00	23:00			
Thur	12:00	23:00			
Fri	12:00	23:00	<b><u>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</u></b> (please read guidance note 6)		
Sat	12:00	23:00			
Sun	12:00	23:00			

**B**

Films Standard days and timings (please read guidance note 7)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
				Both	
Mon	12:00	23:00	<b>Please give further details here</b> (please read guidance note 4)		
Tue	12:00	23:00	<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 5) MORE LIKELY TO BE OFFERED FROM MAY - OCTOBER		
Wed	12:00	23:00	<b>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</b> (please read guidance note 6)		
Thur	12:00	23:00			
Fri	12:00	23:00			
Sat	12:00	23:00			
Sun	12:00	23:00			

**C**

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



**D**

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

**E**

<b>Live music</b> Standard days and timings (please read guidance note 7)			<b><u>Will the performance of live music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	√
Day	Start	Finish			
Mon	13:00	23:00	<b><u>Please give further details here</u></b> (please read guidance note 4)		
Tue	13:00	23:00	AMPLIFIED LIVE PERFORMANCES, SINGING AND INSTRUMENTS		
Wed	13:00	23:00	<b><u>State any seasonal variations for the performance of live music</u></b> (please read guidance note 5)		
Thur	13:00	23:00			
Fri	13:00	24:00	<b><u>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</u></b> (please read guidance note 6)		
Sat	13:00	24:00			
Sun	13:00	23:00			

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 7)			<b><u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
				Both	√
Mon	13:00	23:00	<b><u>Please give further details here</u></b> (please read guidance note 4)		
Tue	13:00	23:00	AMPLIFIED RECORDED MUSIC FOR WEDDINGS AND PARTIES		
Wed	13:00	23:00	<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 5)		
Thur	13:00	23:00			
Fri	13:00	24:00	<b><u>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</u></b> (please read guidance note 6)		
Sat	13:00	24:00			
Sun	13:00	23:00			

**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	
Day	Start	Finish		Outdoors	
				Both	√
Mon	13:00	23:00	<b>Please give further details here</b> (please read guidance note 4)		
Tue	13:00	23:00	AMPLIFIED MUSIC WITH STAGED PERFORMANCE		
Wed	13:00	23:00	<b>State any seasonal variations for the performance of dance</b> (please read guidance note 5)		
Thur	13:00	23:00			
Fri	13:00	23:00	<b>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</b> (please read guidance note 6)		
Sat	13:00	23:00			
Sun	13:00	23:00			

# H

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

I

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

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 8)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)		
Mon	12:00	23:00			
Tue	12:00	23:00			
Wed	12:00	23:00			
Thur	12:00	23:00	<b>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</b> (please read guidance note 6)		
Fri	12:00	24:00			
Sat	12:00	24:00			
Sun	12:00	23:00			

**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):**

<b>Name</b> ALKA HUGHES-HALLETT
<b>Date of birth</b> [REDACTED]
<b>Address</b> [REDACTED]
<b>Postcode</b> [REDACTED]
<b>Personal licence number (if known)</b>
<b>Issuing licensing authority (if known)</b>





## 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)

WE WILL ENSURE THAT ;\_ THE PREMISES ARE ONLY USED FOR LICENCED ACTIVITIES. THERE ARE COMPETENT STAFF ON DUTY TO FUFILL THE TERMS & CONDITIONS, AND FOR PREVENTING CRIME & DISORDER. STAFF ARE TRAINED IN RELATION TO SALE OF ALCOHOL AND AGE OF ATTENDEES.

NOISE MITIGATION - WE WILL CONSULT WITH A SPECIALIST SOUND ENGINEER TO SET SOUND LEVELS TO BE WELL WITHIN PERMITTED BY REGULATIONS

WE WILL ENSURE THAT:-  
MUSIC IS TURNED OFF AT THE APPROVED TIMES  
SOUND (SPEAKERS) IS DIRECTED AWAY FROM AREAS OF HOUSING  
SET NOISE LEVELS ON SITE SO AS TO SIGNIFICANTLY REDUCE RISK OF DISTURBANCE  
ENCOURAGE USE OF SILENT DISCOS,  
SOUND BUFFERING (E.G. BALES) WILL BE DEPLOYED WHERE OTHER NOISE MITIGATION MAY BE INADEQUATE.  
ADDITIONAL HEDGING/TREE PLANTING WILL BE DEPLOYED TO ADD A NATURAL BUFFER  
THERE IS ON GOING MONITORING BY LICENSEES/ SITE MANAGER

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

WE WILL INSTALL CCTVs TO RECORD ANY DISTURBANCES AT EXITS AND SITE OF EVENT AND MAKE ANY RECORDING AVAILABLE TO POLICE IF REQUIRED.  
EVENTS WILL BE MONITORED BY LICENSEES OR THEIR REPRESENTATIVES

**c) Public safety**

WE WILL ENSURE ADEQUATE FIRE EXTINGUISHERS (FOAM, H2O AND BLANKET) ARE EASILY ACCESSABLE AND VISIBLY KEPT. EMERGENCY EXITS WILL BE KEPT FREE FROM OBSTRUCTION AT ALL TIMES.  
IN ADDITION TO SITE SECURITY, EVENT SPECIFIC SECURITY SERVICES WILL BE REQUIRED FOR LARGER EVENTS

**d) The prevention of public nuisance**

ALL CUSTOMERS WILL BE ASKED TO LEAVE QUIETLY BY EVENT ORGANISERS AND WITH SIGNAGE. THEY WILL BE REMINDED TO RESPECT THE NEIGHBOURS PRIVACY, PEACE & QUIET.

BOTTLE BANKS WILL NOT BE OPERATED AT ANTI-SOCIAL HOURS

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

ALL ATTENDEES WILL BE ASKED TO CARRY A PHOTOGRAPHIC ID.  
 ALL STAFF WILL BE TRAINED TO CHECK & BE VIGILANT OF UNDERAGE ATTENDEES.  
 A REGISTER WILL BE MAINTAINED FOR 'DENIED ENTRY'.  
 ENTRY WILL BE DENIED FOR ADULT CONTENT EVENTS

**Checklist:**

**Please tick to indicate agreement**

•	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 designated 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.	√
•	[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).	

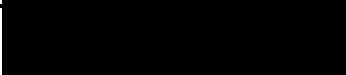
It is an offence, under Section 158 of the Licensing Act 2003, to make a false statement in or in connection with this application. Those who make a false statement may be liable on summary conviction to a fine of any amount.

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

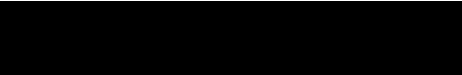
by reason of their immigration status. Those who employ an adult without leave or who is subject to conditions as to employment will be liable to a civil penalty under section 15 of the Immigration, Asylum and Nationality Act 2006 and pursuant to Section 21 of the same act, will be committing an offence 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.**

<b>Declaration</b>	<ul style="list-style-type: none"> <li>[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 the UK (please read guidance note 15).</li> <li>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)</li> </ul>
Signature	
Date	31/8/2023
Capacity	APPLICANT

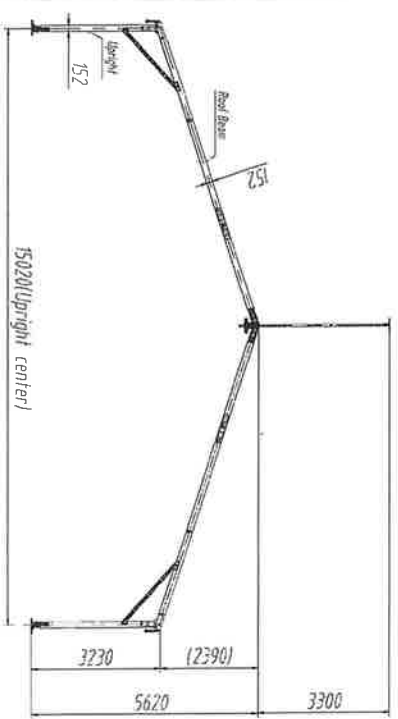
**For joint applications, signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant’s solicitor or other authorised agent** (please read guidance note 13). **If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	31/8/2023
Capacity	APPLICANT

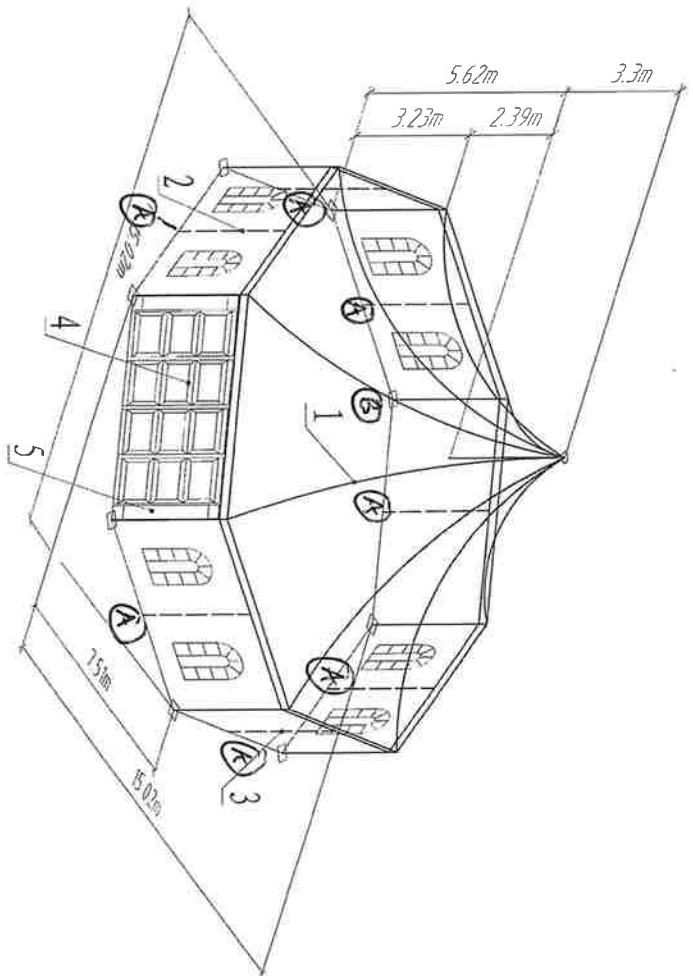
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			



# 15m Event Tent



Main Profile Size	3.5 
Purpose	Upright Roof Beam Gable Pole
Ridge Purlin Eave Purlin Gable Beam	
Eave Tension Roll	
Intermediate Purlin	
Cross Bar	
Roof cable	



## LEGEND

- A. Points of ACCESS/Access
- B. HAND-HELD FIRE EXTINGUISHER
- + SAND BAGS
- + FIRE BLANKET

5	ABS walling	ABS And ALU	2pcs
4	3x125M ABS solid walling	ABS	4pcs
3	50x3.3M Plain White PVC sidewalls	PVC Synthetic fibre	3pairs
2	50x3.3M White PVC Window sidewalls	PVC Synthetic fibre	4pairs
1	15x15M white PVC roof cover	PVC Synthetic Fibre	1pc
Item	Name of part	Material	Quantity

tag	item	change	paper	number	sign	date
design	drawing	wxx	approve			
auditing	technics		date	23.2.25		

type	ET/HP/OCT15/330	Part NO.	ET/HP/OCT15/330-001
title	Impression	drawing tag	weight
material	ALU 6061/T6	kg	scale
		total ( ) pages	page ( )

