

**Application to vary a club premises certificate to be granted  
under the Licensing Act 2003**

**PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING APPLICATION**

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.

..... SALISBURY LAWN TENNIS CLUB .....

*(Insert name of club)*  
club applies for a club premises certificate under section 84 of the Licensing Act 2003 for the premises named in Part 1 below

Club premises certificate number	LN/000041826 .
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**Part 1 – Club premises details**

Name of club			
SALISBURY LAWN TENNIS CLUB			
Postal address of premises, if any, or if none Ordnance Survey map reference or description			
OLD BLANDFORD ROAD HARHAM			
Post town	SALISBURY	Postcode	SP2 8DG
Telephone number (if any)	01722 327059		
E-mail address (optional)	salisbury-tennisclub@gmail.com		

Name of person performing duties of a secretary to the club			
KATRINA JADE SMITH			
Address of person performing duties of a secretary to the club			
6 BISHOPS DRIVE HARHAM			
Post town	SALISBURY	Postcode	SP2 8WZ
Daytime contact telephone number (if any)	[REDACTED]		
E-mail address (optional)	[REDACTED]		

**Part 2 - Applicant details**

Daytime contact telephone number (if any)	01722 324 089		
E-mail address (optional)	SalisburyLennischbb@gmail.com		
Current postal address if different from premises address			
Post town		Postcode	

**Part 3 - Variation**

Please tick

Do you want the proposed variation to have effect as soon as possible?  Yes  No

If not when do you want the variation to take effect from?

DD	MM	YYYY

Please describe briefly the nature of the proposed variation (Please see guidance note 1)

Change to the licensed area internally and externally.

If the club's proposed variation would mean that 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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**Part 4 – Club Operating Schedule**

Please complete those parts of the Club Operating Schedule which would be subject to change if this application to vary is successful.

What qualifying club activities do you intend to conduct on the club premises which will be affected by your application?

Provision of regulated entertainment:

**Please tick as appropriate**

- 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 entertainments (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)

**The supply of alcohol by or on behalf of a club to, or to the order of, a member of the club (if ticking yes, fill in box I)**

**The sale by retail of alcohol by or on behalf of a club to a guest of a member of the club for consumption on the premises where the sale takes place (if ticking yes, fill in box J)**

**In all cases complete boxes K, L and M**

1

2

A

Plays 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 type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Thur					
Fri			<b>Non standard timings. Where the club intends to use the premises for the performance of a play at different times from those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

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**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue			<b>State any seasonal variations for the exhibition of film</b> (please read guidance note 4)		
Wed					
Thur			<b>Non standard timings. Where the club intends to use the premises for the exhibition of film at different times from those listed in the column on the left, please list</b> (please read guidance note 5)		
Fri					
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details here</u> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Wed			
Thur			<u>Non-standard timings. Where the club intends to use the premises for indoor sporting events at different times from those listed in the column on the left, please list</u> (please read guidance note 5)
Fri			
Sat			
Sun			

**D**

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 4)		
Thur					
Fri			<b>Non-standard timings. Where the club intends to use the premises for the boxing or wrestling entertainment at different times from those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					



**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</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue			<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)		
Wed					
Thur			<b>Non-standard timings. Where the club intends to use the premises for the performance of live music at different times from those listed in the column on the left, please list</b> (please read guidance note 5)		
Fri					
Sat					
Sun					



**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</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>			
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 4)		
Thur					
Fri			<b>Non-standard timings. Where the club intends to use the premises for the playing of recorded music at different times from those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of dance take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
Both	<input type="checkbox"/>							
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)					
Mon								
Tue								
Wed						<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 4)		
Thur								
Fri						<b><u>Non-standard timings. Where the club intends to use the premises for the performance of dance at different times from those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sat								
Sun								

1

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**H**

<b>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)</b>			Please give a description of the type of entertainment that the club will be providing		
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed					
Thur					
Fri			<b><u>State any seasonal variations for this entertainment</u></b> (please read guidance note 4)		
Sat					
Sun					
			<b><u>Non-standard timings. Where the club intends to use the premises for this entertainment at different times from those listed in the column on the left, please list</u></b> (please read guidance note 5)		

5

2

**I**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>State any seasonal variations</b> (please read guidance note 4)		
Mon					
Tue					
Wed					
Thur					
Fri					
Sat					
Sun			<b>Non-standard timings. Where the club intends to use the premises for the supply of alcohol at different times from those listed in the column on the left, please list</b> (please read guidance note 5)		

**J**

<b>Hours club premises are open to the members and guests</b> <b>Standard days and timings</b> (please read guidance note 6)			<u>State any seasonal variations</u> (please read guidance note 4)
Day	Start	Finish	
Mon			<u>Non standard timings. Where you intend the premises to be open to the members and guests at different times from those listed in the column on the left, please list</u> (please read guidance note 5)
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

**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).

L

Please identify those conditions currently imposed on the certificate which you believe could be removed as a consequence of the proposed variation you are seeking.

Please tick as appropriate

- I have enclosed the club premises certificate
- I have enclosed the relevant part of the club premises certificate

If you have not ticked one of these boxes, please fill in reasons for not including the certificate or part of it below

Reasons why the club has not enclosed the club premises certificate or relevant part of it:

**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 9)**

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

**c) Public safety**

**d) The prevention of public nuisance**

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

**Checklist:**

Please tick to indicate agreement

- I have made or enclosed payment of the fee.
- I have sent copies of this application and the plan to responsible authorities.
- I understand that I must now advertise my application.
- I have enclosed the club premises certificate or relevant part of it or explanation.
- I understand that if I do not comply with the above requirements my application will be rejected.

**IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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 5 – Signatures (please read guidance note 10)

I KATRINA JANE SMITH  
(Insert full name)

make this application on behalf of the club and have authority to bind the club

Signature	[REDACTED]
Date	07/01/16
Capacity	CLUB SECRETARY

Address for correspondence associated with this application (please read guidance note 11)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			
[REDACTED]			

**Notes for Guidance**

1. Describe the premises, For example the type of premises it is, its general situation and layout and any other information which would be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for people to consume these off-supplies, please include a description of where this will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
3. Please state type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.

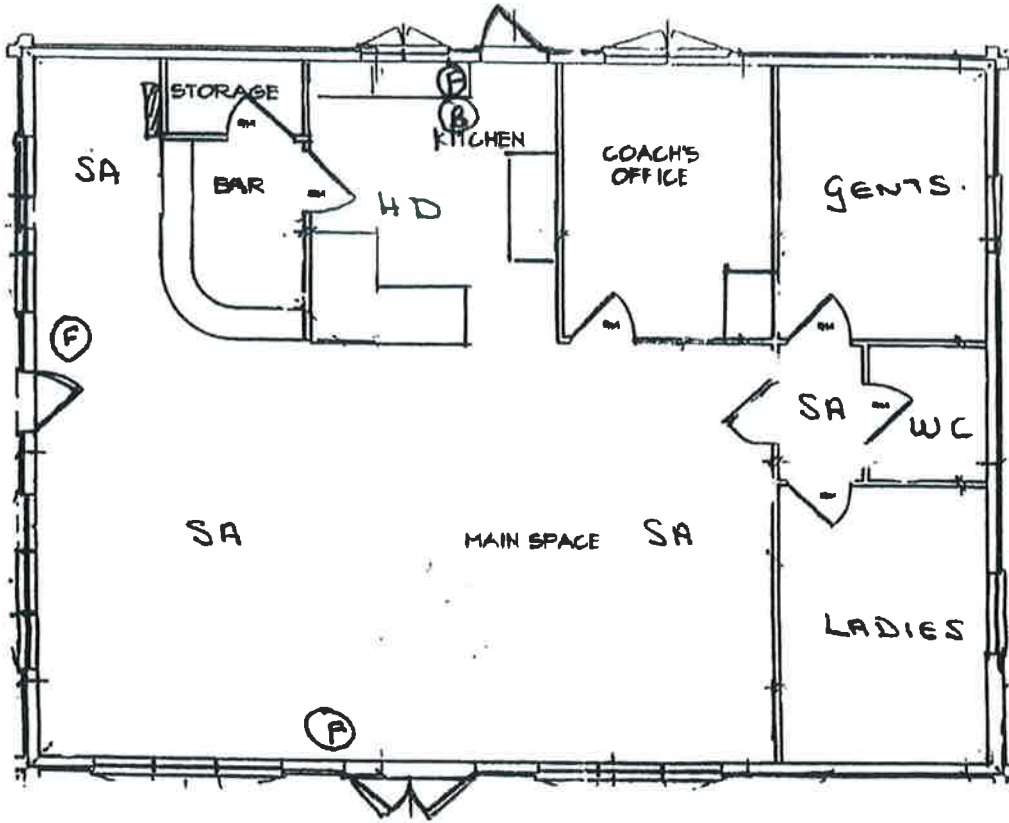
2

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SALISBURY LAWN TENNIS CLUB  
 OLD BLANDFORD ROAD  
 SALISBURY SP2 8DG

LN/000041826.



— Access/Egress points

(F) Fire Extinguisher


(B) Fire Blanket

▨ Fire Alarm Control Panel

SA Smoke Alarm + one in roof space

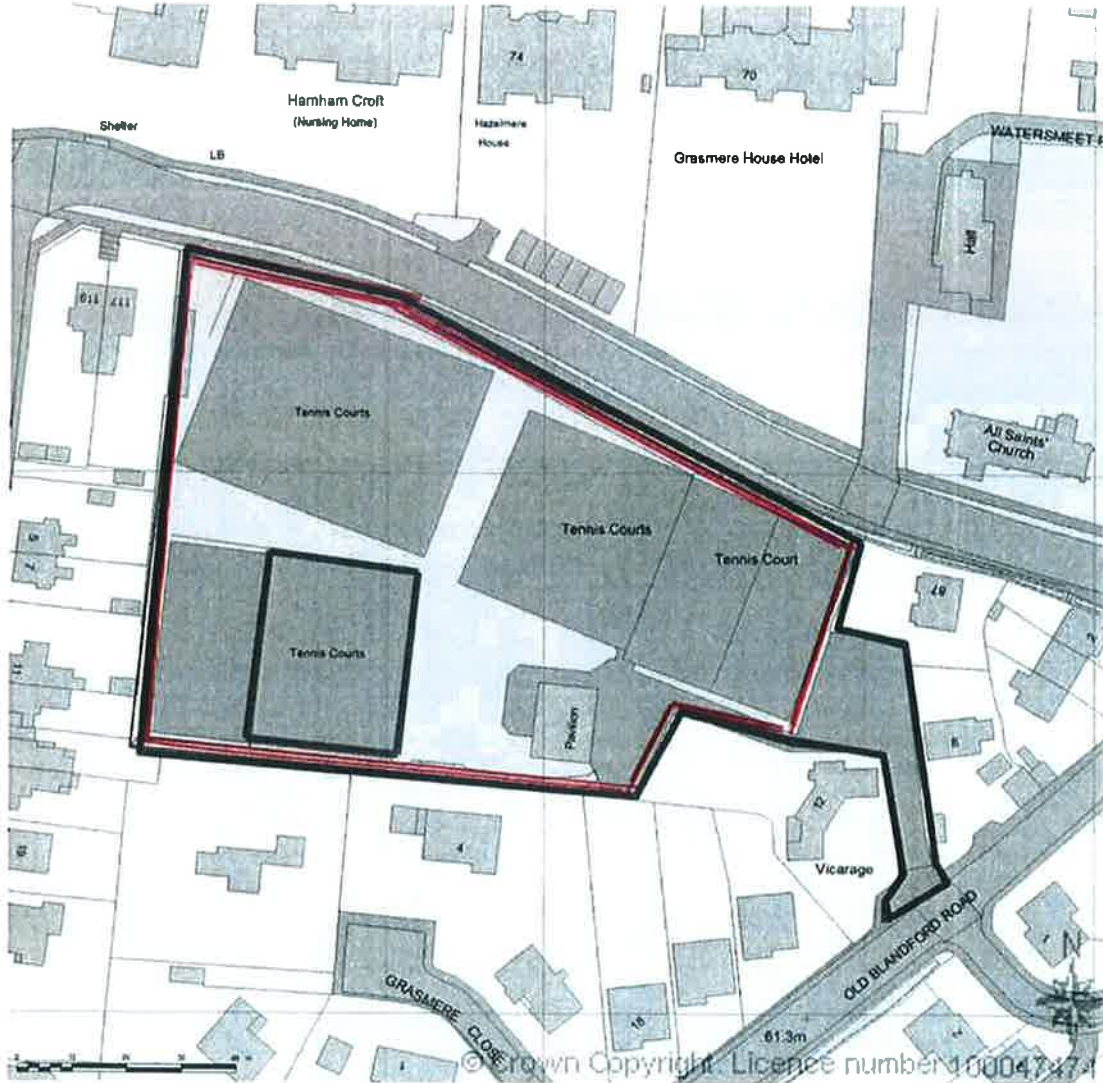
HD Heat Detector

PLAN 1:100

 <b>STRONGWOOD</b> LOG HOME SUPPLY	
PROJECT: ~SALISBURY TENNIS CLUB~	
LOCATION: SALISBURY, UK	
DRAWN BY: [ ] CHECKED BY: [ ] DATE: [ ]	SCALE: 1:50 SHEET NO.: 2 of 2
PLANS	



**SITE LOCATION PLAN  
AREA 4 HA  
SCALE 1:1250 on A4  
CENTRE COORDINATES: 414002, 128887**



**SALISBURY LTC  
SITE LOCATION PLAN**



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