

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 The National Association for Bikers with a Disability (NABD) Registered Charity No. 1040907

(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 Calne Recreation Ground, off Anchor Road, Calne SN11 8xx. Grid Ref SU002709 X 51.437484, Y -1.9982430						
Lat/long 51°26′15″N , 001°59′54″W						
What3Words icons.brain.objective						
Post town Calne	Post town Calne Postcode SN11 8xx					
Telephone number at premises (if any)						
Non-domestic rateable value of						

Part 2 - Applicant details

premises

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

£0

a)	an	individual or individuals *		please complete section (A)		
b)	ар	erson 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 exacorporation)	ample a statuto	ry		please complete section		
c)	a recognised club					please com	nplete section (B)	
d)	a charity				Х	please com	nplete section (B)	
e)	the proprietor of an educational establishment					please com	plete section (B)	
f)		ealth service b	oody			please com	plete section (B)	
g)	a person who is registered under Par the Care Standards Act 2000 (c14) ir respect of an independent hospital in					please com	nplete 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						nplete section (B)	
h)		chief officer o	f police of a pol es	ice force in		please com	nplete section (B)	
(A) In	 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		er Title (for mple, Rev)		
Suri	name	•		First	names			
Date	e of k	oirth	I am 18 y	ears old or o	ver	Please tick	yes	
Nati	ional	ity						
addı	-	esidential if different						
addı	n prer	mises						
addı	n prer					Postcode		
Post	n prer ress t tow		phone			Postcode		

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	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First	names	
Date of bir or over	th		I am 18 years	s old Ple	ease tick yes
Nationality	7				
Current res address if of from premis address	different				
Post town				Postcode	
Daytime co	ontact t	elephone			
E-mail add (optional)	lress				
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 The National Association for Bikers with a Disability (NABD)
Address
Unit 20
The Bridgewater Centre
Robson Avenue
Urmston
Manchester M41 7TE
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.) 1040907
Telephone number (if any) 0870 759 0603
E-mail address (optional) chairman@thenabd.org.uk

Part 3 Operating Schedule

When do you want the premises licence to start?

DD MM YYYY

2 8 0 7 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

DD MM YYYY

1 0 2 8 0 7 2 0 2 3

Please give a general description of the premises (please read guidance note 1) "The premises" Recreation Ground, off Anchor Road. The field is fenced for the majority of the area and other exposed areas will be fenced. One marquee would be erected for the use of entertainment (live and recorded music) and the sale and consumption of alcohol.

The customers would arrive on the Friday and camp for two nights using tents. Sanitary arrangements will be provided by a professional company specialising mobile sanitation. Rubbish removal will be carried out by a professional company contracted for this purpose.

at any one time, please state the number expected to attend.	
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)

Pro 2)	vision of regulated entertainment (please read guidance note	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)	Х
f)	recorded music (if ticking yes, fill in box F)	Х
g)	performances of dance (if ticking yes, fill in box G)	Х
h)	anything of a similar description to that falling within (e), (f) or (g)(if ticking yes, fill in box H)	

Provision of late night refreshment (if ticking yes, fill in box I)	Х
Supply of alcohol (if ticking yes, fill in box J)	Х

In all cases complete boxes K, L and M

Α

Plays Standard days and timings (please read			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
	nce note		,	Outdoors	
Day	Start	Finis h		Both	
Mon			Please give further details here (please read)	ad guidance n	ote
Tue					
Wed			State any seasonal variations for perform (please read guidance note 5)	ing plays	
Thur					
Fri			Non standard timings. Where you intend to those listed in the column on the left. p	<u>different time</u>	<u>es</u>
Sat			(please read guidance note 6)		
Sun					

В

Films Standard days and timings (please read			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
guidai	nce note	7)	,	Outdoors	
Day	Start	Finis h		Both	
Mon			Please give further details here (please read)	ad guidance no	ote
Tue					
Wed			State any seasonal variations for the exhi (please read guidance note 5)	bition of films	<u> </u>
Thur					
Fri			Non standard timings. Where you intend to premises for the exhibition of films at different those listed in the column on the left. please	erent times to	
Sat			read guidance note 6)		
Sun					

C

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

D

Boxing or wrestling entertainments Standard days and		ts	Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please	Indoors	
timing	s (please	e read	read guidance note 3)	Outdoors	
Day	Start	Finis h		Both	
Mon			Please give further details here (please read)	ad guidance r	ote
Tue					
Wed			State any seasonal variations for boxing of entertainment (please read guidance note 5		
Thur					
Fri			Non standard timings. Where you intend to premises for boxing or wrestling entertain different times to those listed in the column	nment at	<u>.</u>
Sat			please list (please read guidance note 6)		
Sun					

Ε

days	music S and timi se read	standard ngs	Will the performance of live music take place indoors or outdoors or both – please tick (please read	Indoors	
	nce note	e 7)	guidance note 3)	Outdoors	
Day	Start	Finish		Both	X
Mon			Please give further details here (please roote 4)	ead guidanc	е
Tue			-		
Wed			State anv seasonal variations for the pe live music (please read guidance note 5)	rformance o	o <u>f</u>
Thur			- -		
Fri			Non standard timings. Where you intend		1
	19:00	23:30	premises for the performance of live mu times to those listed in the column on the		
Sat			list (please read guidance note 6)		
	19:00	23:30			
Sun]		

F

Stand	rded mu lard days as (pleas	s and	Will the playing of recorded music take place indoors or outdoors or both – please tick (please read	Indoors	
	nce note		guidance note 3)	Outdoors	
Day	Start	Finish		Both	X
Mon		-	Please give further details here (please rote 4)	ead guidanc	е
Tue					
Wed			State any seasonal variations for the plate recorded music (please read guidance no		
Thur					
Fri			Non standard timings. Where you intend		
	18:00	00:00	premises for the playing of recorded mu times to those listed in the column on the		
Sat			list (please read guidance note 6)		
	18:00	00:00			
Sun					

G

dance	Performances of dance Standard days and		Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	Х
timing	s (pleas	e read	(prodoc roda gardanes note e)	Outdoors	
Day	Start	Finis h		Both	
Mon			Please give further details here (please read)	ad guidance r	note
Tue					
Wed			State any seasonal variations for the performance (please read guidance note 5)	ormance of	
Thur					
Fri			Non standard timings. Where you intend to those listed in the column on the left, p	different tim	ies
Sat			(please read guidance note 6)		
	23:30	00:00			
Sun					

Н

simila to tha (e), (f) Stand timing	ning of a r descri t falling or (g) ard days s (please nce note	ption within and e read	Please give a description of the type of enter be providing	tainment you wil	ill
Day	Start	Finis h	Will this entertainment take place indoors or outdoors or both – please	Indoors	
Mon			tick (please read guidance note 3)	Outdoors	
				Both	
Tue			Please give further details here (please read)	ad guidance note	te
Wed					
Thur			State any seasonal variations for entertain similar description to that falling within (e) (please read guidance note 5)		
Fri					
Sat			Non standard timings. Where you intend to premises for the entertainment of a similar that falling within (e). (f) or (g) at different listed in the column on the left, please list guidance note 6)	r description to times to those	_
Sun					

I

Late night refreshment Standard days and		s and	Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please	Indoors	
timing	gs (pleas nce note	e read	read guidance note 3)	Outdoors	
Day	Start	Finis h		Both	Х
Mon			Please give further details here (please read)	ad guidance	note
Tue					
Wed			State any seasonal variations for the prov	rision of late	<u> </u>
			night refreshment (please read guidance no		
Thur		-			
Fri	10:00	00:00	Non standard timings. Where you intend to premises for the provision of late night redifferent times, to those listed in the column	freshment a	
Sat	00:01	00:00	please list (please read guidance note 6)		
Sun	00:01	12:00			

J

Supply of alcohol Standard days and timings (please read		s and	Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises	
	nce note		guidanes note e)	Off the premises	
Day	Start	Finis h		Both	Х
Mon		-	State any seasonal variations for the supplemental (please read guidance note 5)	oly of alcoho	1
Tue		_			
Wed					
Thur			Non standard timings. Where you intend to premises for the supply of alcohol at differ those listed in the column on the left. pleat	erent times to	
Fri			read guidance note 6)		
	16:00	00:00			
Sat	18:00	00:00			
Sun					

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):

ame Richard Hulse	
ate of birth	
ddress	
ostcode	
ersonal licence number (if known)	
suing licensing authority (if known) Manchester City Council	

Κ

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).

No persons under the age of 18 will be allowed on site for this event.

L

open Stand timing	Hours premises are open to the public Standard days and timings (please read guidance note 7)		State any seasonal variations (please read guidance note 5)
Day	Start	Finis h	
Mon			
Tue			
Wed			
			Non standard timings. Where you intend the premises to be open to the public at different times from those listed
Thur			in the column on the left, please list (please read guidance note 6) We would class this as a weekend event. Although our
Fri	10:00		alcohol sales and entertainment are for a limited period, the customers will arrive on Friday post 10:00 am and leave by Sunday midday.
Sat			Gunday midday.
Sun			
		12:00	

М

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)

Although the event is the first year, we are running it, we have ran over 30 events at Cheshire Showground, Astle Park, (previously at York Dragway and at Capesthorne Hall prior to that) and have always complied with all past licence agreements as laid out by Council Environmental Health Departments.

We will operate an effective and responsible management of the premises by the NABD Trustees and National Committee members. A committee and volunteer preevent briefing will take place on site before the event starts. An event risk assessment has been included with this application which will explain in more detail our dedication to the health safety and welfare of volunteers and customers at the event. Richard Hulse, a personal licence holder (number not known at this time) will be on site during all alcohol sales periods. We also have another licence holder, who will be on site at all times.

b) The prevention of crime and disorder

We will operate a effective and responsible management of the premises by the NABD Trustees and the National Committee members. A committee and volunteer pre-event briefing will take place on site before the event starts. Most of the customers are pre booked ticket holders and as such are full or affiliated members of the NABD through clubs or organisations and are generally known. The event has no history of trouble and is self policing by the clubs, groups and organisations attending. A professional security firm will be patrolling the event boundary at night. See also the event Emergency Plan and Risk Assessment.

c) Public safety

We will operate an effective and responsible management of the premises by the DPS and the NABD committee members. A committee and volunteer pre-event briefing will take place on site before the event starts. First aid and medical emergency cover will be provided by a company specialising in this field. In addition, many of the volunteer marshals are qualified in first aid. See also event emergency plan and risk assessment.

d) The prevention of public nuisance

We will operate a effective and responsible management of the premises by the DPS and the NABD committee members. A committee and volunteer pre-event briefing will take place on site before the event starts. All live music will cease at 23:30.00 and recorded music will be at a much-reduced volume until 00.00.

We generally have no customer late night departures due to this being a 2 day event, but anyone wishing to leave late will be asked by gate marshals to disperse quietly.

e) The protection of children from harm

As stated previously, this event will only be for attendees over 18 years of age.

Checklist:

Please tick to indicate agreement

		X
•	I have made or enclosed payment of the fee.	
•	I have enclosed the plan of the premises.	X
•	I have sent copies of this application and the plan to responsible authorities and others where applicable.	X
•	I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.	N/A
•	I understand that I must now advertise my application.	X
•	I understand that if I do not comply with the above requirements my application will be rejected.	X
•	[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).	N/A

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.

 [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).
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)
05/06/2023
NABD Committee

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) NABD Unit 20, The Bridgewater Centre Robson Avenue Urmston		
Post town Manchester		Postcode M41 7TE
Telephone number (if any)	0844 415 4849	
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)		