

**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 CHRISTOPHER DOMINEY & WILLIAM MOORE

(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

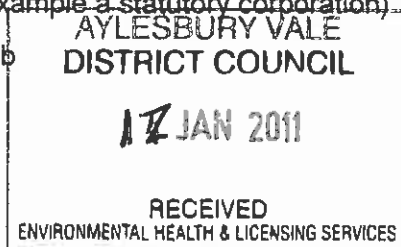
Postal address of premises or, if none, ordnance survey map reference or description BURCOTT LODGE FARM BURCOTT NR. WING			
Post town	LEIGHTON BUZZARD	Post code	LU7 0JW

Telephone number at premises (if any)	07973 873245
Non-domestic rateable value of premises	NIL

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as
Please mark X yes

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
 - i. as a limited company please complete section (B)
 - ii. as a partnership 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)



A4

- 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 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:

Please mark X yes

- 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 <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname DOMINEY			First names CHRISTOPHER JAMES ORLANDO		
I am 18 years old or over			<input checked="" type="checkbox"/> Please mark X yes		
Current postal address if different from premises address		123 AYLESBURY ROAD WENDOVER BUCKS			
Post Town	AYLESBURY			Postcode	HP22 6JN
Daytime contact telephone number			07887 772241		
E-mail address (optional)		<u>CDOMINEY@HOTMAIL.CO.UK</u>			

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname MOORE			WILLIAM JAMES REDMOND MCCUSKER		
I am 18 years old or over			X Please mark X yes		
Current postal address if different from premises address		WHITETHORN FARM OLD RISBOROUGH ROAD STOKE MANDEVILLE BUCKS			
Post Town	AYLESBURY		Postcode	HP22 5XJ	
Daytime contact telephone number			07746 221621		
E-mail address (optional)					

(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?

Day		Month		Year			
1	5	0	7	2	0	1	1

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

Day		Month		Year			
1	8	0	7	2	0	1	1

Please give a general description of the premises (please read guidance note1)

LICENCE REQUIRED FOR A SUMMER MUSIC FESTIVAL COMPRISING TWO MAIN STAGES (ONE OUTDOOR AND ONE TENTED) PLUS A SMALLER TENT FOR ACOUSTIC/SPOKEN WORD PERFORMANCES. MAXIMUM CAPACITY OF 2000 PEOPLE ON SITE IN TOTAL – ANTICIPATING UPTO 1500 AT ANY ONE TIME.

TAKING PLACE ON A GREEN FIELD FARM SITE ACROSS TWO ADJACENT FIELDS, SITUATED AT THE END OF LONG DRIVE (0.7) OFF THE MAIN ROAD.

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

A7

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

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

Provision of regulated entertainment

Please mark X yes

- | | |
|--|--------------------------|
| a) plays (if ticking yes, fill in box A) | X |
| b) films (if ticking yes, fill in box B) | X |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| 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) | X |
| h) anything of a similar description to that falling within (e), (f) or (g)
(if ticking yes, fill in box H) | X |

Provision of entertainment facilities:

- | | |
|--|--------------------------|
| i) making music (if ticking yes, fill in box I) | X |
| j) dancing (if ticking yes, fill in box J) | X |
| k) entertainment of a similar description to that falling within (i) or (j)
(if ticking yes, fill in box K) | <input type="checkbox"/> |

Provision of late night refreshment (if ticking yes, fill in box L)

X

Supply of alcohol (if ticking yes, fill in box M)

X

In all cases complete boxes N, O and P

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"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3) PERFORMANCE ART/STAND UP COMEDY/STREET THEATRE		
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur					
Fri	1700	2359	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 5)		
Sat	1100	2359			
Sun	1100	2359			

B

Films Standard days and timings (please read guidance note 6)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3) POSSIBLY SHOW FILMS IN CAMPSITE AREA		
Tue					
Wed			State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur					
Fri	1700	2359	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 5)		
Sat	1100	2359			
Sun	1100	2359			

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Tue			
Wed			
Thur			<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 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			Both	<input type="checkbox"/>	<u>Please give further details here</u> (please read guidance note 3)
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Thur			<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> (please read guidance note 5)		
Fri					
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3) MUSIC INTENDED: SATURDAY MAIN STAGE AND ACOUSTIC TENT 12:00 – 00:00 ALTERNATIVE TENT 12:00 – 02:00 SUNDAY MAIN STAGE AND ACOUSTIC TENT 12:00 – 22:00 ALTERNATIVE TENT 12:00 – 23:00		
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur					
Fri	1700	0000	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 5)		
Sat	0900	0200			
Sun	0900	2300			

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3) MUSIC INTENDED: SATURDAY MAIN STAGE AND ACOUSTIC TENT 12:00 – 00:00 ALTERNATIVE TENT 12:00 – 02:00 SUNDAY MAIN STAGE AND ACOUSTIC TENT 12:00 – 22:00 ALTERNATIVE TENT 12:00 – 23:00		
Tue					
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur					

Fri	1700	0000	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 5)
Sat	0900	0200	
Sun	0900	2300	

G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)			
Mon						
Tue						
Wed			State any seasonal variations for the performance of dance (please read guidance note 4)			
Thur						
Fri	1700	0000				
Sat	0900	0200	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 5)			
Sun	0900	2300				

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing			
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)		Indoors	<input type="checkbox"/>
Mon					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Tue			Please give further details here (please read guidance note 3)			
Wed						
Thur						
			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance			

Fri			note 4)
Sat			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 (please read guidance note 5)
Sun			

I

Provision of facilities for making music Standard days and timings (please read guidance note 6)			Please give a description of the facilities for making music you will be providing	
			Will the facilities for making music be indoors or outdoors or both – please tick (please read guidance note 2)	Indoors <input type="checkbox"/>
				Outdoors <input type="checkbox"/>
			Both <input checked="" type="checkbox"/>	
Day	Start	Finish	Please give further details here (please read guidance note 3)	
Mon				
Tue				
Wed			State any seasonal variations for the provision of facilities for making music (please read guidance note 4)	
Thur				
Fri	1700	0000		
Sat	0900	0200	Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list (please read guidance note 5)	
Sun	0900	2300		

J

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick (see guidance note 2)	
			Indoors <input type="checkbox"/>	
			Outdoors <input type="checkbox"/>	
			Both <input checked="" type="checkbox"/>	
Day	Start	Finish	Please give a description of the facilities for dancing you will be providing	
Mon			OPEN FIELDS	
Tue				
			Please give further details here (please read guidance note 3)	

Wed			State any seasonal variations for providing dancing facilities (please read guidance note 4)
Thur			
Fri	1700	0000	Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)
Sat	0900	0200	
Sun	0900	2300	

K

Provision of facilities for entertainment of a similar description to that falling within i or j Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment facility you will be providing		
Day	Start	Finish	Will the entertainment facility be indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			Please give further details here (please read guidance note 3)		
Wed					
Thur			State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j (please read guidance note 4)		
Fri					
Sat			Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within i or j at different times to those listed in the column on		
Sun					

			the left, please list (please read guidance note 5)
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L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish		Both	<input checked="" type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Thur					
Fri	2300	0500	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 (please read guidance note 5)		
Sat	2300	0500			
Sun	2300	0500			

AIS

M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon					
Tue					
Wed					
Thur					
Fri	1700	0000			
Sat	1100	0000			
			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 5)		
			FRIDAY: CANNED ALCOHOLIC BEVERAGES ONLY, ON SALE IN CAMPSITE CATERING OUTLET ONLY		
			SUNDAY: EVENT BARS CEASE SERVING ALCOHOLIC BEVERAGES AT 22:00.		
Sun	1100	0000			

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name WILLIAM MOORE	
Address WHITETHORN FARM OLD RISBOROUGH ROAD STOKE MANDEVILLE AYLESBURY BUCKS	
Postcode	HP22 5XJ
Personal Licence number (if known) PE0957	
Issuing licensing authority (if known) AVDC	

A16

N

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)

NOT APPLICABLE

O

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	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 (please read guidance note 5)
Mon	0000	1100	
Tue			
Wed			
Thur			
Fri	1700	2359	
Sat	0000	2359 02.50	
Sun	0000	2359	

P Describe the steps you intend to take to promote the four licensing objectives:**a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)**

The licensing objectives are the basis on which the Licensing Act 2003 is built. They are:

- the prevention of crime and disorder
- public safety
- the prevention of public nuisance
- the protection of children from harm

The Event Safety Management Plan will show how the managers of the Dominey & Moore Festival plan to meet these objectives. Looking at each of the four objectives in turn, this document will indicate where within the ESMP the details can be found to meet these objectives. ~~We refer to Version 2 of the ESMP~~

b) The prevention of crime and disorder**1. The prevention of crime and disorder**

Section 10: Crowd Management, Security & Stewarding – this section indicates that a professional, experienced and qualified security firm shall be hired to prevent unauthorised access to the event, stop any behaviours that threaten the safety of others, etc. This section also states that the public will be made aware of what is or is not allowed on site via websites and ROAR printed on the tickets

Section 6.4: Food & Drink – this section explains that the sale of alcohol at the bar will be overseen by a qualified DPS and minded by an SIA badged security person.

Section 13.1 Barriers and Structures – This section described how the festival will be enclosed to prevent unauthorized access

c) Public safety**2. Public safety**

In many ways, all of the Event Safety Management Plan shows how the public will be kept safe while attending the festival. A full risk assessment and fire risk assessment shall be carried out to foresee any hazards and minimize or eliminate them. Some sections specifically dealing with safety:

Section 5.3: Planning and Management – this shows the type of documentation and safe standards required from contractors and how this safety information will be kept in a "Safety File". This is in part to ensure the event is structurally safe for the public

Section 11: Toilets, Showers, Refuse and Waste Management – this section shows how the public will be provided with clean, safe toilets and how waste will be removed from site

Section 14: Water Supply and Waste Water – as above, this shows that the public will be provided with safe, clean drinking water

Section 19: Incident Reporting and Emergency Planning – this section shows that plans are in place to move the public to a place of safety in an emergency

d) The prevention of public nuisance**3. The prevention of public nuisance**

Section 7: Noise Management – this shows how the festival managers will communicate with residents adjacent to the site in order to allay any qualms about noise or other disturbances from the festival. It also shows how music levels will be monitored.

Section 9: Transport Management and Parking – this section shows how the festival will attempt to cause as little disruption as possible to regular traffic along the Soulbury Road

e) The protection of children from harm


4. The protection of children
Section 16: Child & Youth Safety – This entire section outlines how the festival will deal with found or missing children on site and how a “Challenge 21” scheme will be in place at the bar to prevent underaged drinking.

- | | Please tick yes |
|--|-----------------|
| • I have made or enclosed payment of the fee | X |
| • 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 premises supervisor, if applicable | X |
| • 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 |

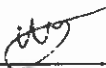
IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant’s solicitor or other duly authorised agent (See guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	14/01/2011
Capacity	EVENT ORGANISER

For joint applications signature of 2nd applicant or 2nd applicant’s solicitor or other authorised agent. (please read guidance note 12). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	14/01/2011
Capacity	EVENT ORGANISER

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)			
Post town		Post code	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail your e-mail address (optional)			

Notes for Guidance

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place 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. For example the 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.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.