

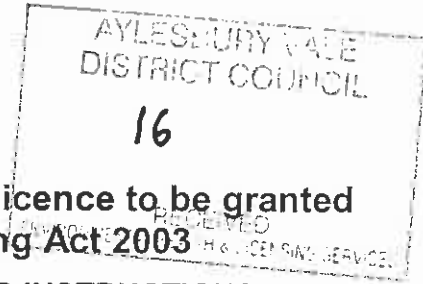
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APPENDIX 1

Rec'd

16/3/11

Aylesbury Vale District Council  
Form LA04 (01/11)



**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 Buckinghamshire County Council

*(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**

<b>Postal address of premises or, if none, ordnance survey map reference or description</b>			
Aylesbury Rugby Football Club Ostlers Field Brook End Weston Turville			
<b>Post town</b>	Aylesbury	<b>Post code</b>	HP22 5RN

Telephone number at premises (if any)	01296 612556
Non-domestic rateable value of premises	£N/A

**Part 2 - Applicant Details**

Please state whether you are applying for a premises licence as  
Please tick 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)
- 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:

Please tick 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 type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
<b>Current postal address if different from premises address</b>					
<b>Post Town</b>				<b>Postcode</b>	

<b>Daytime contact telephone number</b>	
<b>E-mail address (optional)</b>	

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
<b>Current postal address if different from premises address</b>					
<b>Post Town</b>		<b>Postcode</b>			
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**(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
28	06	2011
25		

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

Day	Month	Year
26	06	2011
25		

Please give a general description of the premises (please read guidance note1)  
 A one off event for National Armed Forces Day. The event will run from 11am – 11.45pm with live music, dance, an air display, exhibitions. The sale of alcohol via Aylesbury Rugby Football Club will be from 11am – 22.30.

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

9,999

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 tick yes**

- 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)

**Provision of entertainment facilities:**

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j)  
(if ticking yes, fill in box K)

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

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

**In all cases complete boxes N, O and P**

**A**

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of a play take place indoors or outdoors or both – please tick</b> (please read guidance note 2) N/A	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3) N/A  <b>State any seasonal variations for performing plays</b> (please read guidance note 4) N/A  <b>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</b> (please read guidance note 5) N/A		
Mon					
Tue					
Wed					
Thur					
Fri					
Sat					
Sun					

**B**

Films 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"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 3)  Individual exhibitors may have films playing to portray their work – further information will be included in individual risk assessment within the Event Management Plan  <b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4) None  <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 5) None	Both	<input checked="" type="checkbox"/>
Tue					
Wed					
Thur					
Fri					
Sat	11.00	23.00			
Sun					

**C**

Indoor sporting events Standard days and timings (please read guidance note 6)			<b><u>Please give further details</u></b> (please read guidance note 3)
Day	Start	Finish	Activities such as interactive video games will be on offer. The games will involve controllers and large screens and will be supervised.  Further information will appear in exhibitors risk assessments within the Event Management plan.
Mon			
Tue			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 4)
Wed			None
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 5)
Fri			None
Sat	11.00	23.00	
Sun			



**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b>Will the boxing or wrestling entertainment 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"/>			
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3) N/A					
Mon								
Tue								
Wed						<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 4) N/A		
Thur								
Fri								
Sat						<b>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</b> (please read guidance note 5) N/A		
Sun								

E

Live music Standard days and timings (please read guidance note 6)			<u>Will the performance of live music 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			<b><u>Please give further details here</u></b> (please read guidance note 3) A full programme of live music and performance from 11am – 23.00 with a variety of music. Music will be performed in an arena (non-amplified) and one two stages (amplified)	Both	<input checked="" type="checkbox"/>
Tue					
Wed			<b><u>State any seasonal variations for the performance of live music</u></b> (please read guidance note 4) None		
Thur					
Fri			<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 5) None		
Sat	11.00	23.00			
Sun					

F

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b><u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3) Alongside the live music, recorded music will be played during the event as backing tracks to some of the performers.	Both	<input checked="" type="checkbox"/>
Tue					
Wed			<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 4) None		
Thur					
Fri			<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 5) None		
Sat	11.00	23.00			
Sun					

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of dance 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 checked="" type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3) As part of the live music performances some of the acts may dance as part of their performance		
Mon					
Tue			<b>State any seasonal variations for the performance of dance</b> (please read guidance note 4) None		
Wed					
Thur			<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 5) None		
Fri					
Sat	11.00	23.00			
Sun					

H

<p><b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)</p>			<p><b><u>Please give a description of the type of entertainment you will be providing</u></b> Cookery demonstrations, magician acts, live questions &amp; answer sessions.</p>		
Day	Start	Finish	<p><b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)</p>	Indoors	<input checked="" type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><b><u>Please give further details here</u></b> (please read guidance note 3) As part of a 'live demonstration' tent there will be cookery demonstrations, magician acts and a live question and answer questions.</p>		
Wed			<p>Further details will be included in later versions of the Event Management plan within individual risk assessment.</p>		
Thur			<p><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 4) none</p>		
Fri					
Sat	11.00	23.00	<p><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 5)</p>		
Sun			<p>none</p>		

I

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			<u>Please give a description of the facilities for making music you will be providing</u> N/A					
			<b>Will the facilities for making music be 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"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)					
Mon								
Tue								
Wed						<u>State any seasonal variations for the provision of facilities for making music</u> (please read guidance note 4)		
Thur								
Fri						<u>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</u> (please read guidance note 5)		
Sat								
Sun								

J

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			<b><u>Will the facilities for dancing be indoors or outdoors or both – please tick (see guidance note 2)</u></b>		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input checked="" type="checkbox"/>
			<b><u>Please give a description of the facilities for dancing you will be providing</u></b>  Performance area(s) will be suitable for dance routines as specified by performers. Full details will be in final versions of the Event Management Plan			
Day	Start	Finish				
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3) As above			
Tue						
Wed			<b><u>State any seasonal variations for providing dancing facilities</u></b> (please read guidance note 4)			
Thur			None			
Fri			<b><u>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</u></b> (please read guidance note 5)			
Sat	11.00	23.00	None			
Sun						

**K**

<b>Provision of facilities for entertainment of a similar description to that falling within i or j</b> Standard days and timings (please read guidance note 6)			<u><b>Please give a description of the type of entertainment facility you will be providing</b></u> None		
Day	Start	Finish	<u><b>Will the entertainment facility be indoors or outdoors or both – please tick</b></u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u><b>Please give further details here</b></u> (please read guidance note 3)		
Wed					
Thur			<u><b>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</b></u> (please read guidance note 4)		
Fri					
Sat			<u><b>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 the left, please list</b></u> (please read guidance note 5)		
Sun					



L

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)</b>	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 3) Refreshments will be served in two locations from 11am – 18.00. From 18.00 – 22.30 refreshments will be served in one location.		
Tue					
Wed			<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 4) None		
Thur					
Fri			<b>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</b> (please read guidance note 5) None		
Sat	11.00	23.00			
Sun					

**M**

<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 box)</b> (please read guidance note 7)	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 4) None		
Mon			<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 5) None  <i>Discussed with Howard.</i>		
Tue					
Wed					
Thur					
Fri					
Sat	11.00	<del>23.00</del> 22.30			
Sun					

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

<b>Name</b> Chris Newman <del>and Gerald Evans and Blair MacGillivray</del>	
<b>Address</b> Aylesbury Rugby Football Club Ostlers Field Brook End Weston Turville Aylesbury	
<b>Postcode</b>	HP22 5RN
<b>Personal Licence number (if known)</b> Information on Event Plan to follow. Version 2 onwards.	

**Issuing licensing authority (if known)**  
Aylesbury Vale District Council

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)**

None

O

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variations</b> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			

**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)

Sun			
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**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)

Please see Event Management Plan.V1

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

Please see Event Management Plan.V1

**c) Public safety**

Please see Event Management Plan.V1

**d) The prevention of public nuisance**

Please see Event Management Plan.V1

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

Please see Event Management Plan.V1

Please tick yes

- 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 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

**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	Chris M Williams
Date	16/3/11
Capacity	Chief Executive Bucks County Council

**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 12). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	
Capacity	

<b>Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)</b> Hannah Ladlow, Room26, Old County Offices, Walton Street			
<b>Post town</b>	Aylesbury	<b>Post code</b>	HP20 1UA
<b>Telephone number (if any)</b>			
<b>If you would prefer us to correspond with you by e-mail your e-mail address (optional)</b> hladlow@buckscc.gov.uk			

**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.

Appendix 2

Armed forces Day 25<sup>th</sup> June at Aylesbury Rugby Football Club  
Licensable activities applied for

Sale by Retail of Alcohol	Saturday	11:00 - 22:30
Performance of Dance	Saturday	11:00 - 23:00
Exhibition of a Film	Saturday	11:00 - 23:00
Indoor Sporting Event	Saturday	11:00 - 23:00
Performance of Live Music	Saturday	11:00 - 23:00
Playing of Recorded Music	Saturday	11:00 - 23:00
Provision of Facilities for Dancing	Saturday	11:00 - 23:00
Other Entertainment of a Similar Description to Music / Dancing	Saturday	11:00 - 23:00





**Trevor Hooper**  
Licensing Officer  
Buckinghamshire

Aylesbury Police Station  
Wendover Road  
Aylesbury  
HP21 7LA

Tel: 01296 396034  
Fax: 01296 396079  
trevor.hooper@thamesvalley.pnn.police.uk  
[www.thamesvalley.police.uk](http://www.thamesvalley.police.uk)

13 April 2011

Dear Mr Seal,

**Application for a premises licence for Armed Forces Day, 25<sup>th</sup> June 2011 at Aylesbury United Rugby Club, Weston Turville.**

The police at this time wish to make a formal objection to this application. After receiving a draft document of the Event Management Plan we feel it does not give sufficient information to allow the grant of the licence to go ahead.

Our main concerns are around Security as the applicants have adopted alcohol/drugs/eviction and lost child policies.

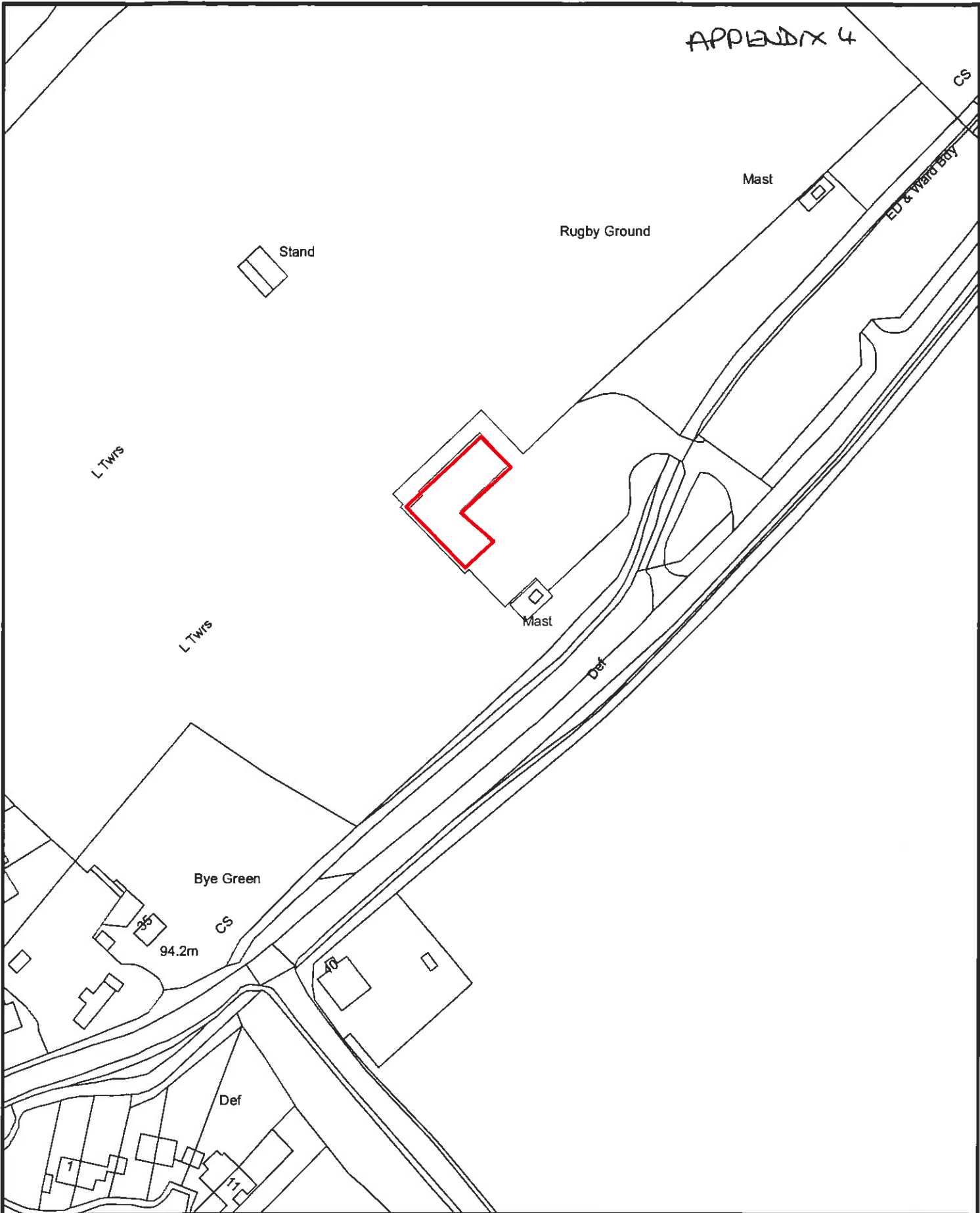
The security plan would need to detail such issues as entry, perimeter security, now that we have a headline group we would to consider stage security.

There is insufficient information on a Traffic management Plan.

I have been and am still willing to work with the organisers to ensure that the event and licence application are given the go ahead.

T I Hooper

C27



C 2 8

**Aylesbury Rugby Football Club, Ostlers Field,  
Brook End, Weston Turville HP22 5RN**



1:1,500



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