

ANNEX 2

*[Insert name and address of relevant licensing authority and its reference number (optional)]*

Application to vary a premises licence 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~~ John Baker being the premises licence holder, apply to vary a  
*(insert name(s) of applicant)*  
premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number

TVBC/PREM/042

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference, or description	
THE BROUGH ARMS ADELAIDE ROAD	
Post town	Post code
ANDOVER	SP10 1HF

Telephone number at premises (if any)

01264 350 102

Non-domestic rateable value of premises

£ 13 000

Part 2 – Applicant details

Daytime contact telephone number

01264 350 102

E-mail address (optional)

Current postal address if different from premises address

71A

Post Town

Postcode

Part 3 - Variation

Do you want the proposed variation to have effect as soon as possible?

Please tick Yyes

If not do you want the variation to take effect from

Day	Month	Year

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

THE PROPOSED VARIATION, IF GRANTED, WOULD SEE THE PREMISES OPEN FROM 10.00 - 00.00 WEDS SUNDAY TO THURSDAY AND FROM 10.00 - 02.30 FRIDAY AND SATURDAY. ALCOHOL WOULD BE SERVED FROM 10.00 - 23.30 W SUNDAY TO THURSDAY AND FROM 10.00 - 02.00 FRIDAY AND SATURDAY.

THE TIMES FOR THE PLAYING OF RECORDED MUSIC WOULD BE ADJUSTED IN LINE WITH THE ABOVE.

**Part 4 Operating Schedule**

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

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 for:

- 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)

Sale by retail of alcohol (if ticking yes, fill in box M)

In all cases complete boxes N, O and P

Sun			
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**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 [Y] (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue					
Wed				State any seasonal variations for the performance of live music (please read guidance note 4)	
Thur					
Fri				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					
Sun					

**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 [Y] (please read guidance note 2)	Indoors	✓
Day	Start	Finish		Outdoors	
Mon	10.00	23.30	Please give further details here (please read guidance note 3) AMPLIFIED MUSIC PLAYED VIA A JUKE BOX.	Both	
Tue	10.00	23.30			
Wed	10.00	23.30	State any seasonal variations for playing recorded music (please read guidance note 4)		
Thur	10.00	23.30			

Fri	10.00	02.00	Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)
Sat	10.00	02.00	
Sun	10.00	23.30	

**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 [Y] (please read guidance note 2)	Indoors	
				Outdoors	
Day	Start	Finish	Both		
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for the performance of dance (please read guidance note 4)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat					
Sun					

**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 [Y] (please read guidance note 2)	Indoor	
				Outdoor	
Mon			Both		

**M**

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption (Please tick box Y) (please read guidance note 7)	On the premises	
Day	Start	Finish		Off the premises	
Mon	10.00	23.30	State any seasonal variations for the supply of alcohol (please read guidance note 4)	Both	<input checked="" type="checkbox"/>
Tue	10.00	23.30			
Wed	10.00	23.30			
Thur	10.00	23.30		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)	
Fri	10.00	02.00			
Sat	10.00	02.00			
Sun	10.00	23.30			

**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)

N/A

**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	
Mon	10.00	00.00	
Tue	10.00	00.00	

Wed	10.00	00.00	<p>Non standard timings. Where you intend to use 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)</p>
Thur	10.00	00.00	
Fri	10.00	02.30	
Sat	10.00	02.30	
Sun	10.00	00.00	

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

N/A

I have enclosed the premises licence

Please tick  yes

I have enclosed the relevant part of the premises licence

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

Reasons why I have failed to enclose the premises licence or relevant part of premises licence

**P**

Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)

SUCH STEPS AS ARE INHERENT IN THE LICENSING ACT 2003 PLUS THE FOLLOWING

b) The prevention of crime and disorder

NO ENTRY TO THE PREMISES WILL BE PERMITTED AFTER 22.30.

c) Public safety

NO ENTRY TO THE PREMISES WILL BE PERMITTED AFTER 22.30

d) The prevention of public nuisance

THE JUKE BOX AND ANY OTHER FORM OF ENTERTAINMENT WILL BE TURNED DOWN OR TERMINATED AT 22.30. THE DOORS TO THE PUB WILL REMAIN CLOSED AT ALL TIMES AND THE HEAVY CURTAINS OVER ALL WINDOWS WILL REMAIN. SIGNS WILL BE POSTED REMINDING GUESTS TO USE THE TOILETS PRIOR TO LEAVING AND TO LEAVE QUIETLY

e) The protection of children from harm

WE EMPLOY A CHALLENGE 21 POLICY.



Please tick ✓ yes

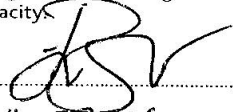
- I have made or enclosed payment of the fee
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I understand that I must now advertise my application
- I have enclosed the premises licence or relevant part of it or explanation
- I understand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

IT IS AN OFFENCE, LIABLE ON 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 5 – Signatures** (please read guidance note 10)

Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (please read guidance note 11). If signing on behalf of the applicant please state in what capacity.

Signature



Date

11 03 06

Capacity

LICENSEE

Where the premises licence is jointly held signature of 2<sup>nd</sup> applicant (the current premises licence holder) 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

Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 13)	
TALBOT WALKER LLP 16 BRIDGE STREET	
Post town	Post code
ANDOVER	SP10 1BT
Telephone number (if any)	
01264721700	
If you would prefer us to correspond with you by e-mail your e-mail address (optional)	