

London Borough of Enfield

Application for a premises licence to be granted under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

Before completing this form please read the Notes for Guidance at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all You may wish to keep a copy of the completed form for your records. I/We A Man About A Dog Ltd (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 Trent Park, Cockfosters Road, BARNET As shown on the deposited plan edged red Postcode Post town Enfield EN4 OPS LONDON BOROUGH OF ENFIELD Telephone number at premises (if RECEIVED any) - 1 MAR 2019 Email address Non-domestic rateable value of **ENVIRONMENT &** £ 0 premises STREET SCHALE Part 2 - Applicant details Please tick as Please state whether you are applying for a premises licence as appropriate an individual or individuals * please complete section (A) a) a person other than an individual * b) \bowtie as a limited company/limited liability please complete section (B) partnership as a partnership (other than limited please complete section (B) ίi liability) as an unincorporated association or please complete section (B) iii other (for example a statutory please complete section (B) corporation)

| | recognised clul | | | | | please con | • |
|--|---|---|---------------|-------------|-------------|----------------------------|--------------------|
| d) a | charity | | | | | please con | nplete section (B) |
| | ne proprietor of stablishment | an educa | tional | | | please con | nplete section (B) |
| | health service | body | | | | please con | nplete section (B) |
| th | ne Care Standar | tho is registered under Part 2 of tandards Act 2000 (c14) in an independent hospital in Wales | | | | please con | nplete section (B) |
| 01 | f Part 1 of the ⊢ 008 (within the | s registered under Chapter 2 Health and Social Care Act e meaning of that Part) in an ospital in England | | | | please cor | nplete section (B) |
| | ne chief officer o | | of a police f | orce in | | please cor | nplete section (B) |
| l am ca | or applying as box below): rrying on or pro mises for licens aking the applic | posing to able activ | carry on a | | | | n (by ticking yes |
| | function discharged | CANTS (| | | | ner Title | |
| Mr | Mrs | Miss | | Ms 🗌 | (for | example, | |
| Mr [| Mrs | Miss | | | (for Re | example, v) | |
| Surnar | me | Miss | | Ms First r | (for Re | example, v) | |
| Surnar | ne MCPARATT | Miss | am 18 y | First r | (for Rev | example, v) s | ase tick yes |
| Surnar Date of | ne f birth | Miss | I am 18 y | First r | (for Rev | example, v) s | ase tick yes |
| Date of over Nation Current address | f birth ality t residential s if different remises | Miss | I am 18 y | First r | (for Rev | example, v) s | ase tick yes |
| Date of over Nation Current address from pr | f birth ality t residential s if different remises s | Miss | I am 18 y | First r | (for Rev | example, v) s | ase tick yes |
| Date of over Nation Current address from pr address | f birth ality t residential s if different remises s | | I am 18 y | First r | (for Rev | rexample, v) s | ase tick yes |
| Date of over Nation Current address from praddress Post to Daytim number | f birth ality t residential s if different remises s | | I am 18 y | First r | (for Rev | rexample, v) s | ase tick yes |

SECOND INDIVIDUAL APPLICANT (if applicable)

| Mr Mrs | Miss | | ∕ls □ | Other Title (for examp Rev) | | |
|--|------|------|----------|-----------------------------------|---------------|-------|
| Surname | | | First na | ames | | |
| Date of birth or over | | l am | 18 years | old | Please tick y | es/es |
| Nationality | | | | | 16. | |
| Current postal address if different from premises address | | | | | я. | * |
| Post town | | | | Postce | ode | |
| Daytime contact telep number | hone | | | | | |
| E-mail address | | | | | | |

(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 A Man About A Dog Ltd. | |
|--|---------------------------------|
| Address 24 - 30 Assembley Passage | |
| Registered number (where applicable) 0881 7956 | |
| Description of applicant (for example, partn association etc.) Company | ership, company, unincorporated |
| Telephone number (if any) | . 8 |
| E-mail address alice.botham@amaad.co.uk | • |

Part 3 Operating Schedule

When do you want the premises licence to start?

| С | D | | MM | Y | YYY | - |
|---|---|---|----|----|-----|---|
| | 1 | 7 | 08 | 20 | 1 | 9 |

| lf w | yo he | n do you want it to end? | Y |
|--------------------|---------------------------|--|------------------|
| F | Plea | ase give a general description of the premises (please read guidance note 1) | |
| | Tr | ent Country Park | |
| d fo a fi | ays or s and Ims | event is a ticketed music festival only open to those over 18 years of age, with an andance of 24,999 people. This event is intended to take place annually with two events taking place over one weekend. It will have multiple stages, a food village, and be taken of alcohol on site. The entertainment provided will predominantly consist of live recorded music performed from a stage, but there will also be performance of dans, MC, compere and the like, spoken word, and entertainment in other relevant events, as more particularly shown on the plan deposited with the licensing authority. | ars e ice, |
| ∟ If | 5,0 | 000 or more people are expected to attend the premises 24,999 | |
| a | t ar | ny one time, please state the number expected to attend. | |
| W | hat | licensable activities do you intend to carry on from the premises? | |
| | | se see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003) | |
| | Prov | vision of regulated entertainment (please read guidance note | |
| а | 1) | plays (if ticking yes, fill in box A) | \boxtimes |
| b |) | films (if ticking yes, fill in box B) | \boxtimes |
| С | ;) | indoor sporting events (if ticking yes, fill in box C) | |
| d | 1) | 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) | \boxtimes |
| g |) | performances of dance (if ticking yes, fill in box G) | \boxtimes |
| | 1) | anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | \boxtimes |

 \boxtimes

In all cases complete boxes K, L and M

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

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

| Plays Standard days and timings (please read guidance note 7) | | | Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|---|-------------|-----------------|---|---------------|----|
| | | | tion (please read guidance note o) | Outdoors | |
| Day | Start | Finis h | | Both | |
| Mon | *********** | | Please give further details here (please read) As part of the entertainment relating to the multiperformances for the event. See detailed operations | sical | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for perform (please read guidance note 5) This event is intended to take place annually days taking place over one weekend in the summonths. | with two even | t |
| Thur | | 2-1-2HH-4H-5H-5 | monuis. | | 6 |
| Fri | | | Non standard timings. Where you intend premises for the performance of plays at to those listed in the column on the left, p (please read guidance note 6) | different tim | es |
| Sat | 1200 | 2230 | | | |
| Sun | 1200 | 2200 | | | |

| Films Standard days and timings (please read guidance note 7) | | e read | Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors Outdoors | | | | |
|---|-------|------------|--|------------------|--|--|--|--|
| Day | Start | Finis h | | Both | | | | |
| Mon | | | Please give further details here (please red) As part of the entertainment relating to the performances for the event. See detailed open | musical | | | | |
| Tue | | | | | | | | |
| Wed | - | | State any seasonal variations for the exhibition of films (please read guidance note 5) This event is intended to take place annually with two event days taking place over one weekend in the summer | | | | | |
| Thur | | | months. | | | | | |
| Fri | | | Non standard timings. Where you intenpremises for the exhibition of films at dithose listed in the column on the left, plaread guidance note 6) | fferent times | | | | |
| Sat | 1200 | 2230 | * | W | | | | |
| Sun | 1200 | 2200 | | | | | | |
| | | | | | | | | |

| event Stand timing | Indoor sporting events Standard days and timings (please read guidance note 7) | | Please give further details (please read guidance note 4) |
|--------------------------|--|--------------|---|
| Day | Start | Finis h | |
| Mon | | 3 | |
| Tue | | | State any seasonal variations for indoor sporting events (please read guidance note 5) |
| Wed | | * 10 | |
| 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 read guidance note 6) |
| Fri | 2 | - | |
| Sat | ***** | ************ | |
| Sun | | | |

| Boxing or wrestling entertainments Standard days and timings (please read | | t s and | Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|---|----------|-------------------|---|--------------------|------------|
| guidar | nce note | 7) Finis | | | |
| Day | Start | h | | Both | |
| Mon | | | Please give further details here (please re 4) | ad guidance | note |
| Tue | | | | | |
| Wed | | | State any seasonal variations for boxing entertainment (please read guidance note | or wrestling 5) | |
| | A | | ** | | |
| Thur | | | | - | |
| Thur | - | | Non standard timings. Where you intend premises for boxing or wrestling entertain different times to those listed in the columbiance list (please read guidance note 6) | nment at | <u>ft.</u> |
| | | | premises for boxing or wrestling entertain different times to those listed in the colu | nment at | <u>ft,</u> |
| Fri | | | premises for boxing or wrestling entertain different times to those listed in the colu | nment at | ft, |

| Live music Standard days and timings (please read guidance note 7) | | | Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|--|--------------|------------|--|----------------|-------------|
| | | 7) | | Outdoors | |
| Day | Start | Finis h | | Both | \boxtimes |
| Mon | | | Please give further details here (please read) | ad guidance r | note |
| | | | As part of the entertainment relating to the m performances for the event. See detailed operations | | |
| Tue | | | | | |
| | | | av | | |
| Wed | | | State any seasonal variations for the performusic (please read guidance note 5) This event is intended to take place annually days taking place over one weekend in the sun months. | with two even | |
| Thur | ************ | | monuis. | | |
| Fri | 9 | | Non standard timings. Where you intend premises for the performance of live mus times to those listed in the column on the (please read guidance note 6) | ic at differen | |
| Sat | 1200 | 2230 | | | |
| Sun | 1200 | 2200 | | | |
| | 181 | _1 | | | |

| Recorded music Standard days and timings (please read guidance note 7) | | and e read | Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|--|-------|---------------|---|-----------------|--|
| | | ., | | Odduoors | |
| Day | Start | Finis h | | Both | |
| Mon | | (1) | Please give further details here (please red4) As part of the entertainment relating to the reperformances for the event. See detailed operations. | nusical | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the play music (please read guidance note 5) This event is intended to take place annually days taking place over one weekend in the sur | with two ever | |
| Thur | | | months. | | |
| Fri | | | Non standard timings. Where you intend premises for the playing of recorded must times to those listed in the column on the (please read guidance note 6) | sic at differer | |
| Sat | 1200 | 2230 | | 1.11 | |
| | | | | | |
| Sun | 1200 | 2200 | | | |
| | | | | | |

| Performances of dance Standard days and timings (please read | | | Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|--|---|------------|---|---------------|-------------|
| | s (please nce note | | | Outdoors | |
| Day | Start | Finis h | | Both | \boxtimes |
| Mon | | | Please give further details here (please read) As part of the entertainment relating to the performances for the event. See detailed operations | musical | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the perfidence (please read guidance note 5) This event is intended to take place annually days taking place over one weekend in the sur | with two ever | nt |
| Thur | | | months. | | |
| Fri | | | Non standard timings. Where you intend premises for the performance of dance at to those listed in the column on the left, p (please read guidance note 6) | different tin | nes |
| Sat | 1200 | 2230 | | | |
| Sun | 1200 | 2200 | | | |

| Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7) | | within and read | Please give a description of the type of ente be providing Entertainment relating to the musical perf event. | | |
|--|-------|----------------------------|--|----------------------------------|-------------|
| 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 | \boxtimes |
| Tue | | - | Please give further details here (please red4) MC, compere and the like, spoken word. E stages and other relevant areas. As part of the | ntertainment o e entertainmen | n t |
| Wed | | | relating to the musical performances for the evolution operating schedule | vent. See deta | illed |
| Thur | | a pada o e e e pada ber di | State any seasonal variations for enterta similar description to that falling within (please read guidance note 5) This event is intended to take place annually | e), (f) or (g) with two ever | nt |
| Fri | | | days taking place over one weekend in the su months. | mmer | 30 |
| | | | | * Ty | |
| Sat | 1200 | 2230 | Non standard timings. Where you intend premises for the entertainment of a simil that falling within (e), (f) or (g) at different listed in the column on the left, please list guidance note 6) | ar descriptio t times to the | se |
| Sun | 1200 | 2200 | 16. | | |

| Late night refreshment Standard days and timings (please read | | | Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|---|-------|---|---|---------------|------|
| guidance note 7) | | | , | Odidoors | |
| Day | Start | Finis h | | Both | |
| Mon | 1 | | Please give further details here (please read) | ad guidance r | note |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the provinght refreshment (please read guidance no | | |
| Thur | | <u> 1101 - 110 - 22 - 22 - 22 - 22 - 22 - 2</u> | | | |
| Fri | (C | | Non standard timings. Where you intend premises for the provision of late night redifferent times, to those listed in the columbiase list (please read guidance note 6) | freshment a | |
| Sat | | | | | |
| Sun | | | | | |

| Supply of alcohol Standard days and timings (please read | | and | Will the supply of alcohol be for consumption – please tick (please read guidance note 8) | On the premises | \boxtimes |
|--|-------|------------|---|------------------|-------------|
| guidance note 7) | | | guidance note 8) | Off the premises | |
| Day | Start | Finis h | | Both | |
| Mon | | | State any seasonal variations for the sup (please read guidance note 5) This event is intended to take place annually days taking place over one weekend in the su | with two ever | |
| Tue | | | months. | | |
| Wed | | | | | |
| Thur | | | Non standard timings. Where you intend premises for the supply of alcohol at diff those listed in the column on the left, ple read guidance note 6) | erent times t | |
| Fri | | | | | |
| Sat | 1200 | 2215 | | | |
| Sun | 1200 | 2145 | | | |
| | | | | | |

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):

| Name Paul Sobierajski | |
|---|---|
| Date of birth | |
| Address | × |
| Personal licence number | er (if known) |
| Issuing licensing author | rity (if known) |
| □□□□ K | |
| | 4.4* |
| entertainment or matt | adult entertainment or services, activities, other ers ancillary to the use of the premises that may give rise of children (please read guidance note 9). |
| 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 | |
| Mon Start h | |

| | | 1 | 1 |
|------|------|---|--|
| | | | |
| Tue | 1.1 | | |
| | | | |
| | | | |
| Wed | | | |
| | | | Non standard timings. Where you intend the premises be open to the public at different times from those listed |
| Thur | | | in the column on the left, please list (please read guidant note 6) |
| | | 1 | |
| Fri | | | × × |
| | | | |
| Sat | 1200 | 2300 | . × |
| Sal | 1200 | 2300 | |
| | | | |
| Sun | 1200 | 2230 | |
| | | | |
| | | | |

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 10)

The application is for one event weekend per year at Trent Country Park.

Please see attached Operating Schedule and conditions below.

- 1. Having regard to the current edition of the Purple Guide, to Health, Safety and Welfare at Music and Other Events, the premises licence holder shall submit a completed Event Management Plan, bespoke to the event, to the Licensing Authority and the Enfield Safety Advisory Group for consultation purposes.
- 2. The Event Management plan must include but is not limited to the following;
- Risk Assessment(s);
- Traffic Management Plan;
- Security /Crowd Management Plan;
- Noise Management Plan;
- Medical Plan;
- Alcohol and Drugs Policy;

- Any other associated/relevant documentation.
- 3. Requirements within all the documentation set out in Condition 2 will form additional conditions on this premises licence which will be observed and complied with.

b) The prevention of crime and disorder

Please see attached Operating Schedule and conditions below.

- 1. Having regard to the current edition of the Purple Guide, to Health, Safety and Welfare at Music and Other Events, the premises licence holder shall submit a completed Event Management Plan, bespoke to the event, to the Licensing Authority and the Enfield Safety Advisory Group for consultation purposes.
- 2. The Event Management plan must include but is not limited to the following;
- Risk Assessment(s);
- Traffic Management Plan;
- Security /Crowd Management Plan;
- Noise Management Plan;
- Medical Plan;
- Alcohol and Drugs Policy;
- Any other associated/relevant documentation.
- 3. Requirements within all the documentation set out in Condition 2 will form additional conditions on this premises licence which will be observed and complied with.

c) Public safety

Please see attached Operating Schedule and conditions below.

- 1. Having regard to the current edition of the Purple Guide, to Health, Safety and Welfare at Music and Other Events, the premises licence holder shall submit a completed Event Management Plan, bespoke to the event, to the Licensing Authority and the Enfield Safety Advisory Group for consultation purposes.
- 2. The Event Management plan must include but is not limited to the following;
- Risk Assessment(s);
- Traffic Management Plan;
- Security /Crowd Management Plan;
- Noise Management Plan;

- Medical Plan:
- Alcohol and Drugs Policy;
- Any other associated/relevant documentation.
- 3. Requirements within all the documentation set out in Condition 2 will form additional conditions on this premises licence which will be observed and complied with.

d) The prevention of public nuisance

Please see attached Operating Schedule and conditions below.

- 1. Having regard to the current edition of the Purple Guide, to Health, Safety and Welfare at Music and Other Events, the premises licence holder shall submit a completed Event Management Plan, bespoke to the event, to the Licensing Authority and the Enfield Safety Advisory Group for consultation purposes.
- 2. The Event Management plan must include but is not limited to the following;
- Risk Assessment(s);
- Traffic Management Plan;
- Security /Crowd Management Plan;
- Noise Management Plan;
- Medical Plan;
- Alcohol and Drugs Policy;
- Any other associated/relevant documentation.
- 3. Requirements within all the documentation set out in Condition 2 will form additional conditions on this premises licence which will be observed and complied with.

e) The protection of children from harm

The event is strictly 18+

Please see attached Operating Schedule and conditions below.

- 1. Having regard to the current edition of the Purple Guide, to Health, Safety and Welfare at Music and Other Events, the premises licence holder shall submit a completed Event Management Plan, bespoke to the event, to the Licensing Authority and the Enfield Safety Advisory Group for consultation purposes.
- 2. The Event Management plan must include but is not limited to the following;
- Risk Assessment(s);
- Traffic Management Plan;
- Security /Crowd Management Plan;

| | | |
|---|------|--------|
| - Noise Management Plan; | | |
| - Medical Plan; | | |
| - Alcohol and Drugs Policy; | | |
| - Any other associated/relevant documentation. | | |
| 3. Requirements within all the documentation set out conditions on this premises licence which will be obse | | tional |
| | | |

Checklist:

Please tick to indicate agreement

| | I have made or enclosed payment of the fee. | ∇ |
|-----|--|-------------|
| • | Thave made of enclosed payment of the lee. | |
| 0 | I have enclosed the plan of the premises. | \boxtimes |
| 0 | I have sent copies of this application and the plan to responsible authorities and others where applicable. | \boxtimes |
| • | I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable. | \boxtimes |
| 0 | I understand that I must now advertise my application. | \boxtimes |
| • ' | I understand that if I do not comply with the above requirements my application will be rejected. | \boxtimes |
| • | 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 (please read note 15). | |

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.

| Declaration | [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 licesable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15) |
|-------------|---|
| Date | 18/02/2019 |
| Capacity | Licensing and External Manager |

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 | |

| | (where not previous th this application (pl | | ostal address for correspond ance note 14) | ence | |
|------------------------|--|---|---|------|--|
| | | | | | |
| | | | | | |
| | | | 140 | | |
| | | , | Postcode | | |
| Post town | | | | | |
| Post town Telephone nu | mber (if any) | | | | |