



London Borough of Enfield

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 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 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 FANCY FAIR MARKETS LIMITED
(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	
BRANLEY ROAD SPORTS GROUNDS 315 CHASE SIDE N14 4 HN LAND SHOWN ON ATTACHED PLAN AREAS DEFINED INSIDE RED LINE	
Post town	LONDON
Postcode	N14 4 HN

Telephone number at premises (if any)	NONE
Email address	ADMIN@FANCY-FAIR.CO.UK
Non-domestic rateable value of premises	£ NO RATEABLE VALUE TO 4,300

Part 2 - Applicant details

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

- | | |
|--|---|
| a) an individual or individuals * | <input type="checkbox"/> please complete section (A) |
| b) a person other than an individual * | |
| i as a limited company/limited liability partnership | <input checked="" type="checkbox"/> please complete section (B) |
| ii as a partnership (other than limited liability) | <input type="checkbox"/> please complete section (B) |
| iii as an unincorporated association or | <input type="checkbox"/> please complete section (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)	
Surname			First names		
Date of birth		I am 18 years old or over <input type="checkbox"/>		Please tick yes	
Nationality					
Current postal address if different from premises address		N/A			
Post town				Postcode	
Daytime contact telephone number					
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	FANCY FAIR MARKETS LIMITED
Address	2ND FLOOR UNICORN HOUSE STATION CLOSE POTTERS BAR EN6 1TL
Registered number (where applicable)	11083782
Description of applicant (for example, partnership, company, unincorporated association etc.)	LIMITED COMPANY
Telephone number (if any)	07825 959507
E-mail address	ADMIN@FANCY-FAIR.CO.UK

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
01	05	2019

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

DD	MM	YYYY

ANNUAL LICENCE

Please give a general description of the premises (please read guidance note 1)

OPEN SPACE GRASSED SPORTS GROUNDS

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 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all that apply

- | | |
|---|-------------------------------------|
| a) plays (if ticking yes, fill in box A) | <input checked="" type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input checked="" type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input checked="" 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) | <input checked="" type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input checked="" type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input checked="" type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input checked="" type="checkbox"/> |

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

☐

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

☒

In all cases complete boxes K, L and M

A

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 <input type="checkbox"/>
					Outdoors <input type="checkbox"/>
Day	Start	Finish			Both <input checked="" type="checkbox"/>
Mon	1000	2200	Please give further details here (please read guidance note 4) WILL VARY PERFORMANCES EACH EVENT AMPLIFIED P.A EXPECTED		
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 5) NO		
Thur					
Fri	1000	2200	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 6) NO		
Sat	1000	2200			
Sun	1000	2200			

B

Films Standard days and timings (please read guidance note 7)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish			
Mon	1000	2200	Please give further details here (please read guidance note 4) WILL VARY ANNUALLY FOR EACH EVENT		
Tue					
Wed			State any seasonal variations for the exhibition of films (please read guidance note 5) NO		
Thur					
Fri	1000	2200	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 6) NO		
Sat	1000	2200			
Sun	1000	2200			

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4) WILL VARY ANNUALLY FOR EACH EVENT
Day	Start	Finish	
Mon	1000	2200	
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5) NO
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 6) NO
Fri	1000	2200	
Sat	1000	2200	
Sun	1000	2200	

E

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 <input type="checkbox"/>
					Outdoors <input type="checkbox"/>
					Both <input checked="" type="checkbox"/>
Day	Start	Finish			
Mon	1000	22.00	Please give further details here (please read guidance note 4) MUSIC WILL BE AMPLIFIED FROM STAGE - SHOWS PLANNED DURING THE EVENT AS PART OF THE FESTIVAL ATTRACTIONS NOT SEEN AS THE MAJOR ATTRACTION		
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 5) NO		
Thur					
Fri	1000	22.00	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 6)		
Sat	1000	22.00			
Sun	1000	22.00	NO		

F

Recorded music Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)		Indoors <input type="checkbox"/>
					Outdoors <input type="checkbox"/>
Day	Start	Finish			Both <input checked="" type="checkbox"/>
Mon	10.00	22.00	<u>Please give further details here</u> (please read guidance note 4) INTERVAL MUSIC ON STAGE. ATTRACTIONS CARRY SUPPORT MUSIC. AMPLIFIED		
Tue					
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5) No		
Thur					
Fri	10.00	22.00	<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> (please read guidance note 6) No		
Sat	10.00	22.00			
Sun	10.00	22.00 ⁶			

G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place <u>indoors or outdoors or both</u> – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	1000	2200	Please give further details here (please read guidance note 4) WILL VARY ANNUALLY FOR EACH EVENT MUSIC WILL BE AMPLIFIED	Both	<input checked="" type="checkbox"/>
Tue					
Wed			State any seasonal variations for the performance of dance (please read guidance note 5) NO		
Thur					
Fri	1000	2200	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 6) NO		
Sat	1000	2200			
Sun	10.00	22.00			

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing FUNFAIR AND AMUSEMENTS - CIRCUS		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
Mon	1000	2200		Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Tue			Please give further details here (please read guidance note 4) AMPLIFIED MUSIC SUPPLIED IN SUPPORT		
Wed					
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5) NO		
Fri	1000	2200			
Sat	1000	2200	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 6) NO		
Sun	1000	2200			

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish			
Mon	1000	2130	State any seasonal variations for the supply of alcohol (please read guidance note 5) NO		
Tue					
Wed					
Thur			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 6) NO		
Fri	1000	2130			
Sat	1000	2130			
Sun	1000	2130			

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	ADRIAN WEBB
Date of birth	[REDACTED]
Address	[REDACTED]
Postcode	[REDACTED]
Personal licence number (if known)	[REDACTED]
Issuing licensing authority (if known)	EPANG B.C

□□□□

K

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).

NONE

L

Hours premises are open to the public
Standard days and timings (please read guidance note 7)

Day	Start	Finish
Mon	1000	2200
Tue		
Wed		
Thur		
Fri	1000	2200
Sat	1000	2200
Sun	1000	2200

State any seasonal variations (please read guidance note 5)

NONE

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 6)

NONE

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)

STRONG MANAGEMENT CONTROLS IN PLACE
NO SELLING ALCOHOL TO UNDERAGE PERSONS
NO DRUNK DISORDERLY BEHAVIOUR
NO ILLEGAL DRUG SALES VIGILANCE IN PLACE
NO VIOLENT ANTI-SOCIAL BEHAVIOUR
NO HARM TO ANY CHILDREN
CHALLENGE 25 INFORMATION ON VIEW AND IN PLACE

b) The prevention of crime and disorder

CLEAR NOTICES ON ARRIVAL AND ON SITE SHOWING LICENSE DEFINED HOURS AND
WARNINGS OF POSSIBLE CRIMINAL ACTIVITY ESPECIALLY THEFT
NOT SELLING ALCOHOL TO DRUNK INTOXICATED CUSTOMERS
PREVENTION AND VIGILANCE IN ILLEGAL DRUG USE
STAFF WELL TRAINED IN DEALING WITH CUSTOMERS TO USE AREAS IN AN
ORDERLY AND RESPECTFUL MANNER
BAG CHECKS IN PLACE ON ARRIVAL, WHERE THOUGHT NECESSARY ELECTRONIC
WAND CHECKS USED TO CHECK ILLEGAL WEAPONS BEING BROUGHT ON SITE

c) Public safety

TRAINING & IMPLEMENTATION OF UNDERAGE I.D. CHECKS
STAFF ADHERANCE TO ENVIRONMENTAL HEALTH REQUIREMENTS
PROFESSIONAL CATERERS TO HAVE NO LESS THAN 3 STAR KITCHEN RATING LOCAL
AUTHORITY 'SCORES ON THE DOORS' SCHEME
COMPREHENSIVE APPLICATION FORM T/NC'S ATTACHED TO ALL EVENT CATERERS DETAILS
ON BOOKING CONCERNING UNDERSTANDING & COVALENCES.
ALL ATTRACTIONS TO HAVE SUPPLIED CURRENT DOCUMENTS CONCERNING CORRECT
MAINTENANCE SCHEDULES ARE IN PLACE & SUITABLE INSURANCES ARE IN PLACE.

d) The prevention of public nuisance

CUSTOMERS DENIED ADMISSIONS OUTSIDE OF PERMITTED HOURS.
EVENT HEALTH & SAFETY ADVISOR TO MONITOR ALL NOISE ACTIVITIES TO ENSURE
RESIDENTS PUBLIC NUISANCE OBJECTIVES ARE ACHIEVED DURING OPENING HOURS
AND RESPECT LOCAL RESIDENTS BY LEAVING THE AREA QUIETLY WITH SIGNS DISPLAYED
MOVEMENT OF ALL TRAFFIC - DELIVERIES - DEPARTURES TO BE KEPT TO A MINIMUM
TO AVOID DISTURBANCES ESPECIALLY BEFORE AND AFTER PERMITTED HOURS
WASTE BINS TO BE PROVIDED IN THE LOCAL VICINITY
PARKING TO BE STRICTLY CONTROLLED AND ROAD CLOSURES WILL BE IN PLACE
WITH PASSWORDS TO ALLOW RESIDENTS ACCESS DURING THE EVENTS

e) The protection of children from harm

CHALLENGE 25 SIGNS IN PLACE AND OPERATES TO CHECK ANYONE OVER 18 BUT
LOOKS UNDER 25 TO CARRY AN I.D. CARD TO BUY ALCOHOL.
ALL BAR STAFF TO BE TRAINED IN CHALLENGE 25 STRIUS
LOST CHILDREN PROCEDURES IN PLACE TO MONITOR AND IF NECESSARY TO BE
ABLE TO SHUT DOWN EXITS TO CHECK AND REPORT MISSING CHILDREN

Checklist:

Please tick to indicate agreement

- 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. ☒ N/A
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable. ☒
- I understand that ^{COUNCIL} I must now advertise my application. ☒
- I understand that if I do not comply with the above requirements my application will be rejected. ☒
- 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 ☒ N/A
(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	<ul style="list-style-type: none">• [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
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	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)
Signature	
Date	
Capacity	

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	21 January 2019
Capacity	Director Fancy Fair Markets Limited

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)

ADRIAN WEBB 			
Post town		Postcode	
Telephone number (if any)			
E-mail address (optional)	ADHIN@FANCY-FAIR.CO.UK		