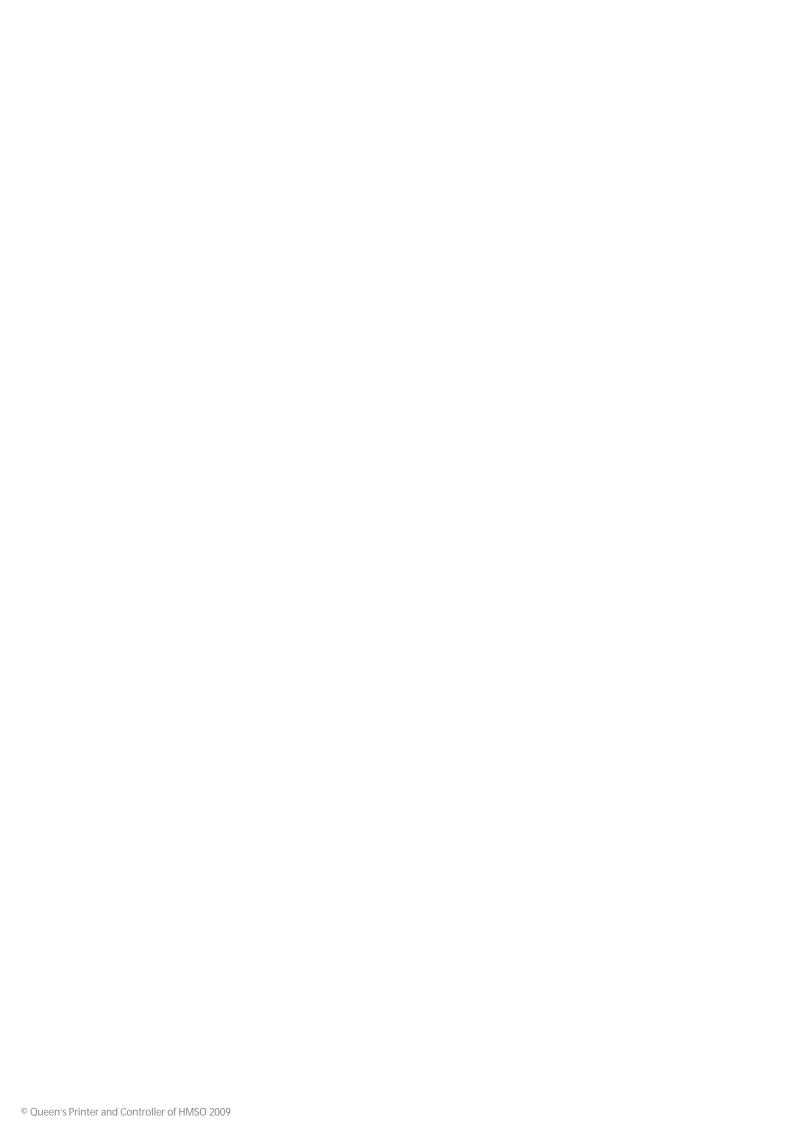


Are you an agent acting on behalf of the applicant?

Continued from previous page		
Your position in the business	Director	
Home country	United Kingdom	The country where the headquarters of your business is located.
Registered Address		Address registered with Companies House.
Building number or name		
Street		
District		
City or town		
County or administrative area		
Postcode		
Country		
Section 2 of 9		
APPLICATION DETAILS (See a	also guidance on completing the form, gener	ral notes and note 1)
Have you had any previous or	maiden names?	
Yes	○ No	
Enter details of any previous na	ames or maiden names	
First name		
Family name		
	Add another previous name	 1
***	The direction provides having	Applicant must be 18 years of age or older
* Your date of birth	dd mm yyyy	Applicant must be 10 years of age of older
National Insurance number		This box need not be completed if you are an
		individual not liable to pay UK national
		insurance.



Continued from previous page		
State the times during the event period that you propose to carry on licensable activities (give times in 24 hour clock) (see also guidance on completing the form, note 10)	10:00 - 19:00	
State the maximum number of people at any one time that you intend to allow to be present at the premises during the times when you intend to carry on licensable activities, including any staff, organisers or performers (see also guidance on completing the form, note 11)	15	Note that the maximum number of people cannot exceed 499.
supplies will be for consumption (see also guidance on completing)	nclude the supply of alcohol, state whether the on on or off the premises, or both ing the form, note 12):	
 On the premises only 		
Off the premises only		
○ Both		
Section 5 of 9		
RELEVANT ENTERTAINMENT	(See also guidance on completing the form	n, note 13)
State if the licensable activities period that you propose to pro	will include the provision of relevant entertains vide relevant entertainment	ment. If so, state the times during the event
N/A		
Section 6 of 9		
PERSONAL LICENCE HOLDERS	(See also guidance on completing the forn	n, note 14)
Do you currently hold a valid personal licence?	YesNo	
Provide the details of your pers	sonal licence below.	
Issuing licensing authority		
Licence number		
Date of issue	dd mm yyyy	
Any further relevant details		

Continued from previous page		
Section 7 of 9		
PREVIOUS TEMPORARY EVEN	T NOTICES (See also guidance on completing	ig the form, note 15)
Have you previously given a		
, , , , , ,		

Continued from previous page			
Has any person with whom you are in business carrying on licensable activities given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice?		•	No
Has any person with whom you are in business carrying on licensable activities already given a temporary event notice for the same premises in which the event period: a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice?	○ Yes	•	No
Section 9 of 9			
CONDITION (See also guida	nce on completing the f	orm	<u>, note 18)</u>
			ne relevant licensable activities described in Sections 4 and 5 re made by or under the authority of the premises user.
PAYMENT DETAILS			
This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.			application online, you must pay it by debit or credit card.
This formality requires a fixed	fee of £21		
DECLARATION (See also gui	dance on completing th	e fo	rm, note 19)
 (i) to knowingly or recklessly liable on summary conviction 			nnection with this temporary event notice and that a person is of any amount; and
			ied on at any place and that a person is liable on summary to imprisonment for a term not exceeding six (6) months, or to
☐ Ticking this box indicates you have read and understood the above declaration			
This section should be comple behalf of the applicant?"	eted by the applicant, unle	ess y	ou answered "Yes" to the question "Are you an agent acting on
* Full name			
* Capacity	Director		
* Date	04 / 10 / 202 dd mm yyyy		
	Add another	r sigr	natory

Continued from previous page... Once you're finished you need to do the following: 1. Save this form to your computer by clicking file/save as... 2. Go back to https://www.gov.uk/apply-for-a-licence/temporary-event-notice/crawley/apply-1 to upload this file and continue with your application. Don't forget to make sure you have all your supporting documentation to hand. **OFFICE USE ONLY** Applicant reference number Fee paid Payment provider reference **ELMS Payment Reference** Payment status Payment authorisation code Payment authorisation date Date and time submitted Approval deadline Error message

Next >

Is Digitally signed

1 <u>2</u> <u>3</u> <u>4</u> <u>5</u> <u>6</u> <u>7</u> <u>8</u> <u>9</u>