

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.

| apply describ | Insert for a p bed in nt lice | TOCK LTD name(s) of applicant) premises licence under section Part 1 below (the premises) a nsing authority in accordance mises details | and I/we are m | akin | g this applicati | ion to you as the |
|---------------|--|--|-----------------|-------------|------------------|-------------------|
| | den P | ess of premises or, if none, ordi addock | nance survey m | ap re | ference or desc | ription |
| Post | town | Bromyard | | | Postcode | HR7 4LS |
| m 1 | 1 | . (5 | 01005 40221 | | | |
| - | | number at premises (if any) | 01885 48321 | 14 | | |
| Non- | dome | stic rateable value of premises | £0 | | | |
| Part 2 | - App | olicant details | | | | |
| Please | state | whether you are applying for a | premises licenc | e as | Please tick | as appropriate |
| a) | an ir | ndividual or individuals * | | | please comple | ete section (A) |
| b) | a per | rson other than an individual * | | | | |
| | i | as a limited company/limited li | iability | \boxtimes | please comple | ete section (B) |
| | ii | partnership as a partnership (other than lim liability) | nited | | please comple | ete section (B) |
| | iii | as an unincorporated association | on or | | please comple | ete section (B) |
| | iv | other (for example a statutory | corporation) | | please comple | ete section (B) |

| c) | a recogni | ised clu | ıb | | | | | | please comp | ete section (B) | |
|--------------|--|--|-----------------------------|--------------------------------------|-------------------------|----------|--------------|------|-----------------------------|------------------|--|
| d) | a charity | | | | | | | | please comp | ete section (B) | |
| e) | the propr | ietor o | f an e | ducation | nal esta | ablishn | nent | | please comp | lete section (B) | |
| f) | a health | service | body | t | | | | | please comp | lete section (B) | |
| g) | a person Care Sta independ | ndards | Act 2 | 2000 (c1 | 4) in r | | | | please comp | lete section (B) | |
| ga) | a person Part 1 of (within t independ | the He | ealth a | and Soci of that F | al Car Part) in | e Act 2 | 2 of 2008 | | please comp | lete section (B) | |
| h) | the chief England | | | olice of | a poli | ce forc | e in | | please comp | lete section (B) | |
| | ou are appoelow): | plying | as a p | erson de | escribe | ed in (a |) or (b) pl | ease | confirm (by ti | cking yes to one | |
| prem I am | ises for lic making th statutor | censable application application application application application disconnected application applicat | le actication of the charge | ivities; on pursua r ed by vii | r int to a tue of | Her M | lajesty's p | | olves the use | of the | |
| Mr | | Mrs [| | Miss | | 1 | Ms 🗌 | | er Title (for mple, Rev) | | |
| Suri | name | | | | | | First na | imes | | | |
| Date | e of birth | | | I am 18 | years | s old or | over | | ☐ Plea | se tick yes | |
| Nati | onality B | ritish | | | | | | | | | |
| addı | ent reside ess if diffe nises addre | erent fr | rom | | | | | | | | |
| | | | | | | | | | | | |
| Post | town | | | | | | | | Postcode | | |
| - | town | act tel | epho | ne num | oer | | | | Postcode | | |

SECOND INDIVIDUAL APPLICANT (if applicable)

| Mr Mrs Miss | Ms Other Title (for example, Rev) |
|---|--------------------------------------|
| Surname | First names |
| Date of birth over | I am 18 years old or Please tick yes |
| Nationality | |
| Current postal address if different from premises address | |
| Post town | Postcode |
| Daytime contact telephone number | er |
| E-mail address (optional) | |

(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 Nozstock Ltd | |
|--|------------------------------|
| Address Rowden Paddocks Winslow Bromyard Herefordshire HR7 4LS | |
| Registered number (where applicable) 6535237 | |
| Description of applicant (for example, partnership, company, uninc | corporated association etc.) |
| Telephone number (if any) 01885 483214 or 07527 367537 | |
| E-mail address (optional) julie@nozstock.com | |

Part 3 Operating Schedule

When do you want the premises licence to start?

MM 1 0 0 8

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

| DI | D | M | M | | Y | YY | Y |
|----|---|---|---|---|---|----|---|
| 1 | 3 | 0 | 8 | 2 | 0 | 2 | 4 |

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

The premises is general farm land, situated approx. two miles outside of Bromyard on the B2414 (Bromyard to Tenbury Road) with two entrances off the road. One for general public and one for emergency vehicles only. There is more than adequate parking

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

1,000

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)

Please tick all that Provision of regulated entertainment (please read guidance note 2) apply plays (if ticking yes, fill in box A) a) X films (if ticking yes, fill in box B) indoor sporting events (if ticking yes, fill in box C) c) boxing or wrestling entertainment (if ticking yes, fill in box D) d) live music (if ticking yes, fill in box E) e) X recorded music (if ticking yes, fill in box F) f) performances of dance (if ticking yes, fill in box G) g) anything of a similar description to that falling within (e), (f) or (g) X h) (if ticking yes, fill in box H)

| Provision of late night refreshment (if ticking yes, fill in box I) | X |
|---|---|
| Supply of alcohol (if ticking yes, fill in box J) | X |
| in all cases complete boxes K, L and M | |

| Plays Standard days and timings (please read guidance note 7) | | d | Will the performance of a play take place indoors or outdoors or both – please tick | Indoors | |
|--|-----------------|---|---|-----------------|------------------|
| | | ead | (please read guidance note 3) Performance of Plays and comedy sketches at various times during the event | Outdoors | |
| Desi | Start | Finish | | Both | |
| Day Mon | Start | | Please give further details here (please read gr | uidance note 4 |) |
| Tue | *************** | and the same of the same of the same of | | | |
| | | | | | |
| Wed | | | State any seasonal variations for performing guidance note 5) | g plays (please | read |
| Wed | | | State any seasonal variations for performing guidance note 5) | g plays (please | read |
| | | | State any seasonal variations for performing guidance note 5) Non standard timings. Where you intend to for the performance of plays at different tim the column on the left, please list (please real | o use the prem | nises sted in |
| Thur | | | Non standard timings. Where you intend to | o use the prem | nises sted in |

| Films Standard days and timings (please read guidance note 7) | | nd | Will the exhibition of films take place indoors or outdoors or both – please tick | Indoors | X |
|---|-------|--------|--|------------------|----------------|
| | | ead | (please read guidance note 3) | Outdoors | |
| Day | Start | Finish | | Both | |
| Mon | 13.00 | 03.00 | Please give further details here (please read g The showing of Certified Films | uidance note 4) | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the exhibitive read guidance note 5) | on of films (ple | ease |
| Thur | | | | | |
| Fri | | | Non standard timings. Where you intend to for the exhibition of films at different times column on the left, please list (please read gu | to those usten | ises in the |
| Sat | | | | | |
| | | 03.00 | | | |

| Indoor sporting events Standard days and timings (please read guidance note 7) | | nd read | Please give further details (please read guidance note 4) |
|--|-------------------------------------|------------|--|
| Day | Start | Finish | |
| Mon | | | |
| Tue | | | State any seasonal variations for indoor sporting events (please read guidance note 5) |
| Wed | | | |
| Thur | | | Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in th column on the left, please list (please read guidance note 6) |
| Fri | | | |
| Sat | Company or All has de the series of | | |
| Sun | | | |

| Boxing or wrestling entertainments Standard days and timings (please read guidance note 7) | | tling | Will the boxing or wrestling entertainment take place indoors or outdoors or both — | Indoors | |
|--|-------|--------|--|-----------------|--------|
| | | read | please tick (please read guidance note 3) | Outdoors | |
| Day | Start | Finish | | Both | |
| Mon | | | Please give further details here (please read gr | uidance note 4) | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for boxing or we entertainment (please read guidance note 5) | vrestling | |
| Thur | | | | | |
| Fri | | | Non standard timings. Where you intend to for boxing or wrestling entertainment at diffisted in the column on the left, please list (p | lerent times to | JULIOS |
| Sat | | | note 6) | | |
| Sun | | | | | |

| Live music Standard days and timings (please read guidance note 7) | | d | Will the performance of live music take place indoors or outdoors or both – please tick | Indoors | |
|--|-------|--------|---|----------------|-------|
| | | ead | (please read guidance note 3) | Outdoors | |
| Day | Start | Finish | | Both | X |
| Mon | 13.00 | 23.00 | Please give further details here (please read gu Indoors/Outdoors and both amplified and una | | 1 |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the perform (please read guidance note 5) | ance of live n | nusic |
| Thur | | | | | |
| Fri | | | Non standard timings. Where you intend to for the performance of live music at differen listed in the column on the left, please list (pl | t times to the | 30 |
| Sat | 14.00 | 22.00 | note 6) | | |
| | | | | | |

| Recorded music Standard days and timings (please read guidance note 7) | | d | Will the playing of recorded music take place indoors or outdoors or both – please tick | Indoors | |
|---|-------|--------|---|----------------|-------|
| | | ead | (please read guidance note 3) | Outdoors | |
| Day | Start | Finish | | Both | X |
| Mon | 13.00 | 04.00 | Please give further details here (please read gu | idance note 4) |) |
| | | | Indoors/Outdoors Amplified | | |
| Tue | | | | | |
| | | | | C and ad m | usio |
| Wed | | | State any seasonal variations for the playing (please read guidance note 5) | of recorded n | iusic |
| | | | | | |
| Thur | | | | | |
| | | | Non standard timings. Where you intend to | use the prem | ises |
| Fri | | | g the playing of recorded music at different | times to tho | se |
| | | | listed in the column on the left, please list (please list) | ease read guid | ance |
| Sat | 22.00 | 03.00 | | | |
| | | | - | | |
| Sun | 13.00 | 04.00 | I I | | |

| Performances of dance | | | Will the performance of dance take place indoors or outdoors or both – please tick | Indoors | |
|---|-------|--------|--|-------------------|-----------|
| Standard days and timings (please read guidance note 7) | | read | (please read guidance note 3) | Outdoors | |
| Day | Start | Finish | | Both | |
| Mon | | | Please give further details here (please read g | guidance note 4) | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the performance (please read guidance note 5) | mance of dance | <u>e</u> |
| Thur | | | | | |
| Fri | | | Non standard timings. Where you intend to for the performance of dance at different to the column on the left, please list (please real to the column on the left, please list). | lines to those in | JEE CO EA |
| Sat | | | | | |
| | | | | | |

| Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7) | | at , (f) or d | Please give a description of the type of entertainment providing Comedy performances Computer Gaming and Games activities | | |
|--|-------|---------------------|--|--------------------------------|----------|
| Day | Start | Finish | Will this entertainment take place indoors or outdoors or both – please tick (please read | Indoors Outdoors | |
| Mon | 13.00 | 03.00 | guidance note 3) | Both | |
| Tue | | | Please give further details here (please read guidance note 4) There will be computer gaming and also games such as egg as spoon, sack races etc | | and |
| Wed | | | | | |
| Thur | | | State any seasonal variations for entertainmed description to that falling within (e), (f) or (g) guidance note 5) | nt of a simila (please read | <u>r</u> |
| Fri | | | | | ions |
| Sat | | | Non standard timings. Where you intend to for the entertainment of a similar description within (e), (f) or (g) at different times to those column on the left, please list (please read guidest). | e listed in the | 2 |
| Sun | 13.00 | 03.00 | | | |

| Late night refreshment | | | Will the provision of late night refreshment take place indoors or outdoors or both – | Indoors | |
|---|-------|----------|--|-------------------|----------|
| Standard days and timings (please read guidance note 7) | | d ead | please tick (please read guidance note 3) | Outdoors | |
| Day | Start | Finish | | Both | X |
| Mon | | | Please give further details here (please read gr | iidance note 4) | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the provision refreshment (please read guidance note 5) | on of late nigh | <u>t</u> |
| Thur | | | | | |
| Fri | 23.00 | 05.00 | Non standard timings. Where you intend to for the provision of late night refreshment a those listed in the column on the left, please | t united the time | 1604 40 |
| Sat | 23.00 | 05.00 | guidance note 6) | | |
| | | | _ | | |

| Supply | pply of alcohol undard days and | | Will the supply of alcohol be for consumption – please tick (please read | On the premises | X |
|--|------------------------------------|--------|---|------------------|---------------|
| timings (please read guidance note 7) | | ead | guidance note 8) | Off the premises | |
| Day | Start | Finish | | Both | |
| Mon | 10.00 | 0.300 | State any seasonal variations for the supply read guidance note 5) | of alcohol (plea | se |
| | | | | | |
| Tue | | | | | |
| Tue | | | | | |
| | | | Non standard timings. Where you intend to for the supply of alcohol at different times column on the left, please list (please read g | U most mstear | ises n the |
| Wed | | | - f alaskal at different lilles | U most mstear | ises n the |
| Wed | 14.00 | 03.00 | - f alaskal at different lilles | U most mstear | ises n the |

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):

| matters a | ghlight any adult enter ancillary to the use of the (please read guidance no | tainment or services, activities, other entertainment the premises that may give rise to concern in respect tote 9). |
|-----------|--|--|
| None | (hisans issue D | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| pen to Standar imings | premises the puble of days and (please rece note 7) | d ead | State any seasonal variations (please read guidance note 5) |
|-----------------------------|--|----------|--|
| Day | Start | Finish | |
| Mon | 10.00 | 04.00 | |
| Tue | | | |
| Wed | | | Non standard timings. Where you intend the premises to open to the public at different times from those listed in the open to the public at different times from those listed in the open to the public at different times from those listed in the open to the public at different times from those listed in the open to the public at different times from those listed in the open to the public at different times from those listed in the open to the public at different times from those listed in the open to the public at different times from those listed in the open to the public at different times from those listed in the open to the public at different times from those listed in the open to the public at different times from those listed in the open to the public at different times from those listed in the open to the |
| Thur | | | column on the left, please list (please read guidance note 6) |
| Fri | | | |
| Sat | 14.00 | 03.00 | |
| Sun | 10.30 | 04.00 | |

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 Premises Licence Holder or a nominated deputy (in writing) must be on this licensed premises and available to the Responsible Authorities and the Licensing Authority at all times when Licensable activities are taking place.

Details of the Premises Licence Holder or his deputy who is on duty when licensable activities are undertaken shall be recorded, on this premises, at the time. These records shall be made available to the Licensing Authority or a Responsible Authority on demand. Such record shall be kept for a period of 12 months after the end of licensable activities. This information post event must be provided to the Licensing Authority or a Responsible Authority within 24 hours of the request.

The name and contact details of the Premises Licence Holder's deputy(s) will be provided to the Safety Advisory Group (SAG) in writing no later than 7 days prior to the event each year.

At all times there shall be one personal licence holder on this premises for each 2 bars which are open for the sale and supply of alcohol.

Written information provided of details of the personal licence holder who is on duty and their areas of responsibilities when licensable activities are undertaken on this premises. This will be made available to the Licensing Authority and or other responsible authority during the period of the event on demand. Such record shall be kept for a period of 12 months after the end of licensable activities. This information must be provided to the Licensing Authority or a Responsible Authority within 24 hours of the request.

The names and contact details of the personal licence holders will be provided to the SAG no later than 7 days prior to the event each year.

b) The prevention of crime and disorder

West Mercia Police and the Premises Licence Holder will agree 21 days prior to the first day of the event all issues they required to be reported immediately to them during the duration of the event. This agreement will be provided to the Licensing Authority at least 14 days prior to the first day of the event.

A special policing services request will be made by the Premises Licence Holder to West Mercia Police, this will be submitted at least 1 month prior to the first day of the event.

Security and Stewards

A Site Security and Communications Control room will be provided on site. Access will be made available to the Licensing Authority and the Police.

Written information shall be provided, 1 month prior to the start of the event, of the number Numbers of Personnel of SIA Security personnel to be employed on site, during the period the premises is licensed for licensable activities.

Written information shall be provided, 1 month prior to the start of the event of the number of personnel to be employed as Stewards during the period the premises is licensed for licensable activities.

The Premises Licence Holder or DPS or a person nominated by them in writing for the purpose, shall maintain a register of door supervisors which shall be kept on the premises showing the names and addresses of the door supervisors, their badge numbers. The register shall be made available on demand for inspection by Police, Licensing Authority or an authorised officer of the Security Industries Authority.

No person under the age of 18 years will be employed as stewarding personnel.

No person under the age of 21 years will be employed as SIA badged staff.

No security staff or stewards are to consume or be under the influence of alcohol or drugs whilst working. They shall be fit to carry out the duties required of them.

Security Uniforms and Security Logs

All security and stewarding personnel will be readily identifiable by means of a tabard bearing a job title and a conspicuous unique personal identification number. This identification number will be displayed prominently on the front and rear and will be at least 30mm high and the width of the written number shall be at least 10 mm.

No person shall perform the role of stewarding personnel without wearing a tabard.

No person shall perform the role of security personnel without wearing a tabard.

All staff engaged in the sale of alcohol to be trained in responsible alcohol retailing to the minimum standard of BIIAB Level 1 or any equivalent training course within 1 month of commencing employment at the premises. Where there are existing staff this training shall be completed within 3 months of the date that this condition first appears on the licence. No person shall be authorised to sell or supply alcohol until this training is completed. Refresher training will be conducted at 12 monthly intervals. Training records shall be kept on the premises and produced to the police or an 'authorised person' (as defined by Section 13 of the Licensing Act 2003) or an authorised Trading Standards Officer of Herefordshire Council on demand.

An incident log must be kept at the premises, and made immediately available on request to an authorised officer of the Council or the Police, which must record the following:

- (a) all crimes reported to the venue
- (b) all ejections of patrons
- (c) any complaints received
- (d) any incidents of disorder
- (e) seizures of drugs or offensive weapons
- (g) any visit by a relevant authority or emergency service

Secure and safe systems are to be in place for the storage of items seized. These systems are to included secure methods of storing any drugs or weapons seized or found and procedures for handling the items over to the responsible authority where required. In addition records of seizure are to be kept in the incident book and made available to the Licensing Authority on demand or to the police on authority of the operational commander during the duration of the event or to any authorised person of West Mercia Police post event.

This is a private party with only 1,000 people who will arrive at different times so traffic lights etc will not be needed. Our stewards will organise the safe ingress of traffic onto our holding areas with sufficient queuing capacity.

c) Public safety

An EMP must be provided to the satisfaction of the Safety Advisory Group. The EMP will be a working document providing details of how the Festival is to be conducted and how safety issues, identified in the event risk assessment, are to be addressed. The EMP will include an event risk assessment and provide specific details on the following areas:

- Health and Safety Responsibilities
- Venue and Site Design
- Fire Safety
- Major Incident Planning (Emergency planning)
- Crowd Management (including steward and security numbers and their roles)
- Transport
- Noise at work
- Management Structures
- Barriers
- Electrical Installations and Lighting
- Food and Alcohol
- Water
- Amusements.
- Attractions and Promotional displays
- Sanitary Facilities
- Waste Management
- Sound: Noise and Vibration
- Special Effects, Fireworks and Pyrotechnics
- Camping
- Facilities for People with disabilities
- Medical, Ambulance and First Aid Management
- Information and Welfare

The first draft of the Event Management Plan (EMP) will be produced 1 month (or such lesser period as agreed with the Safety Advisory Group) prior to the first day of the event and will be submitted to the Licensing Authority and all the Responsible Authorities.

The final EMP will be submitted to the Licensing Authority and all the Responsible Authorities 14 days prior to the start of the event. This must meet with the agreement of all the responsible authorities. No change shall take place to this document without the consent of the Licensing Authority.

The event must take place in accordance with the Final EMP produced for the event following approval by the Licensing Authority.

Event Safety Coordinator

The Premises Licence Holder will appoint an Event Safety Co-ordinator who will be able to authorise and supervise safety measures.

The Event Safety Co-ordinator will be responsible for:

- Monitoring of contractors
- Liaison with contractors
- Checking of method statements and risk assessments
- Preparation and monitoring of site rules
- Safety inspections and audits
- Collection and checking of completion certificates
- Communication of safety information to contractors
- Communication of safety information to employees
- Monitoring and coordinating safety performance
- Coordinating safety in response to a Major Incident
- Liaison with nominated officers from Herefordshire Council.

There shall be in place a COVID risk assessments which meets with the requirements of a legislation in place at the time of the event. Such risk assessment will be shared with the Licensing Authority, the Police, Environmental Health and the Director of Public Health.

Electrical wiring and distribution systems

Temporary electrical wiring and distribution systems shall be signed off by a competent person prior to any licensable activity taking place at the premises. The competent person must be a member of a recognised electrical association such as NICEIC, NAPIT, ECA or other association as agreed by the licensing authority. The sign off certificates must be available for inspection.

Any additional electrical work required after the event has commenced shall be signed off by a competent person. The competent person must be a member of a recognised electrical association such as NICEIC, NAPIT, ECA or other association as agreed by the licensing authority. The sign off certificates must be available for inspection.

The Premises Licence Holder will ensure that all temporary structures and any other elements of infrastructure or artistic installation have been inspected and signed off as being safe prior to the commencement of its use.

A copy of each safety sign off certificate shall be kept on site and shall be made immediately available to an authorised local authority officer.

The maximum permitted numbers in each enclosed structure where regulated entertainment activities are to be provided will be submitted and agreed by the Responsible Authorities prior to the commencement of the festival.

The premises licence holder must submit arrangements to the satisfaction of the Responsible Authorities on how such maximum occupancy capacities will be managed. In this licence "enclosed structures" are classed as a structure whether tented or not, which has less than 25% of its sides open to the atmosphere (excluding entrances and exits) and which are accessible to the public when regulated entertainment is provided.

The installation and use of laser beams, pyrotechnics or real flames, explosive or highly flammable or smoke/foam producing agent, for any purpose shall not be permitted without prior notification to the Licensing Authority. A detailed description of the method of use, shall be made to the Licensing Authority not less than 14 days prior to the day on which the above equipment is to be used.

A Water Management Strategy for the provision of drinking water will be provided to the satisfaction of Herefordshire Council's Environmental Health Service at least 28 days prior to commencement of the Festival. Once agreed, the strategy will be followed throughout the Festival. No significant changes will be made without consultation with Herefordshire Council.

Over Head Power Lines (OHPL)

A management plan for the OHPL will be provided to Herefordshire Council Environmental Health Service by Friday 24 June 2016. The plan must detail the control measures that have been identified to control the risk of the OHPL. Control measures must be implemented prior to the start of the site build and be in place throughout the festival and during the 'take down' of the site.

| Food Safety There is only one food company – inform Health | nation of this will be forwarded to Environmental |
|---|---|
| | |
| d) The prevention of public nuisance | to authority 28 days |
| A noise management plan will be agre prior to the proposed start of the even | ed in writing with the Licensing authority 28 days t. Such a management plan must include amongst used to measure and assess noise levels, identify ackground noise levels, maximum permitted noise |

monitoring points, provide details of background noise levels, maximum permitted noise levels, reporting and recording procedures, procedures to receive, investigate and respond to complaints about noise, actions to be taken should the permitted noise levels be exceeded.

| e) The protection of children from harm | |
|---|--|
| Protection of Children from Harm | |
| There will be no children at this event | |
| | |
| | |
| | |
| | |
| | |

Checklist:

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.

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) |
|-------------|---|
| Signature | |
| Date | 28.6.24 |
| Capacity | Company Secretary |

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 | |
| | |

| Contact nam with this app Julie Noswo | olication (please rea | ously given) and postal address ad guidance note 14) | ioi correspesso | |
|--|-----------------------|---|-----------------|--------------|
| | | | Postcode | HR7 4LS |
| - | Duamward | | | |
| Post town | Bromyard | 07527 367537 | | |
| T-1-shanas | number (if any) | 07527 367537 espond with you by e-mail, your | *1 11 | - (antional) |



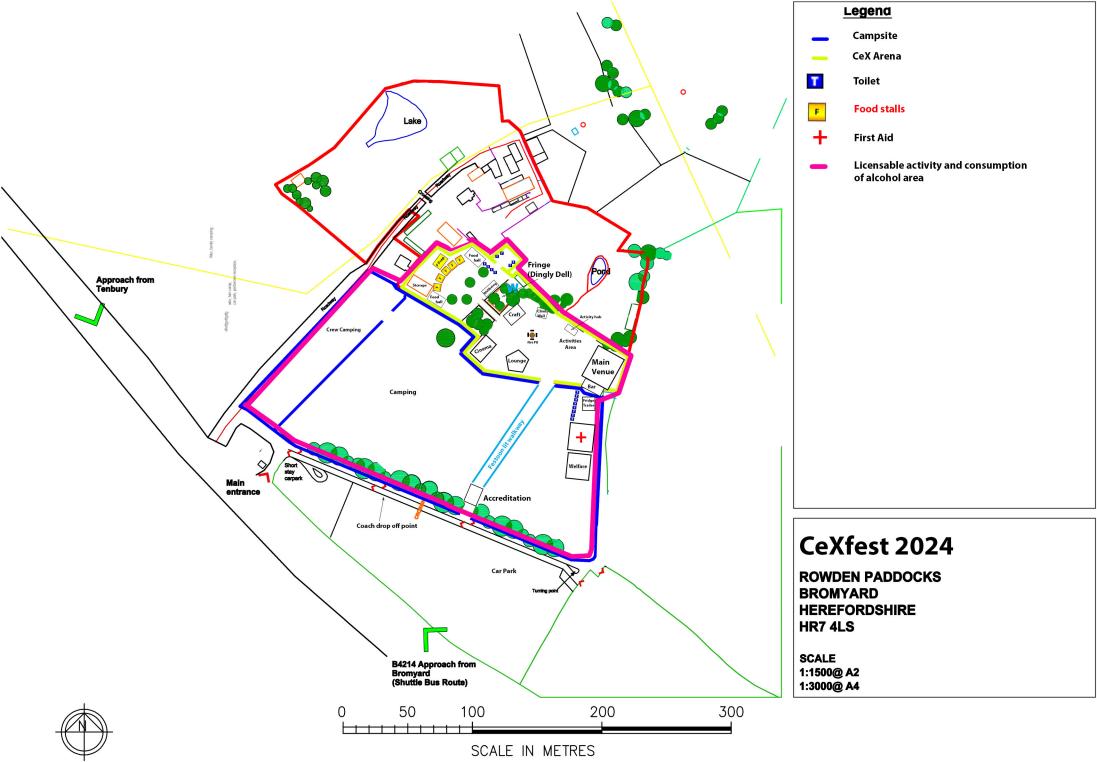
Consent of individual to being specified as premises supervisor

| [full name of prospective premises supervisor] |
|--|
| of |
| |
| [home address of prospective premises supervisor] |
| hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for |
| PREMISES MCENSE. [type of application] by N.O2STOCK LTD |
| |
| [name of applicant – premises licence holder] |
| relating to a premises licence [number of existing licence, if any] |
| for CEXFEST |
| ROWDEN PADDOCKS BROWYARD HR7 4LS |

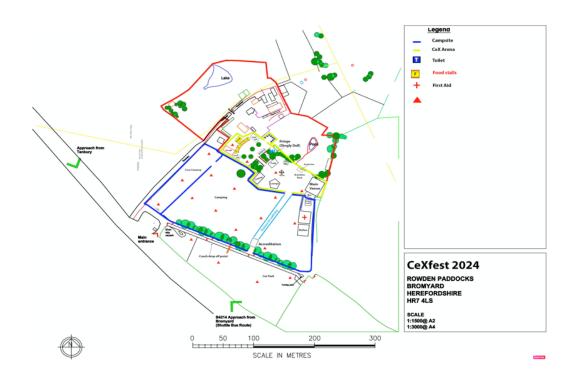
[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made

| by | |
|--|--|
| CETFEST | |
| [name of applicant – premises licence holder] | |
| concerning the supply of alcohol at | |
| ROWDEN PADDOCKS | |
| BROMYARD | |
| HEREFORDSHIRE | |
| HR7 HLS. | |
| [name and address of premises to which application relates] | |
| I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below. | |
| Personal licence number | |
| PL 1947 [insert personal licence number, if any] | |
| Personal licence issuing authority | |
| HEREFORDSHIZE COUNCIL. [insert name and address and telephone number of personal licence issuing authority, if any] | |
| | |
| | |
| | |
| Signed | |
| | |
| Name (please print) KELIN J BOLTON, | |
| Date 1/7/24 | |



CeX- Fest Fire Plan and Checks



| Area | Unit | Number | Daily Check |
|----------------------|-------------------|--------|-------------|
| Stage | Co2 Extinguisher | 1 | · |
| | Foam Extinguisher | 1 | |
| Sound Tower | Co2 Extinguisher | 1 | |
| Bar | Foam Extinguisher | 1 | |
| Fire Pit | Foam Extinguisher | 2 | |
| | Fire Blanket | 2 1 | |
| Dingly Dell - Fringe | Foam Extinguisher | 1 | |
| | Co2 Extinguisher | 1 | |
| Food Halls | Foam Extinguisher | 2 | |
| Food Prep | Co2 Extinguisher | 1 | |
| | Fire Blanket | 2 | |
| Cinema | Co2 Extinguisher | 1 | |
| Campsite | Foam Extinguisher | 8 | |
| Crew Camping | Foam Extinguisher | 3 | |
| Chill-out tent | Foam Extinguisher | 1 | |
| | Fire Blanket | 2 | |
| Car Park | Foam Extinguisher | 4 | |