

From: [donotreply](mailto:donotreply@somerset.police.uk)
To: CHcase; BIS; SomersetEastLiquorLi@avonandsomerset.police.uk
Subject: Order placed for TENS
Date: 08 September 2023 16:46:34



Form Submission

Item Description: TENS
Item Reference: 6300-6539----FEECH0074
Amount Paid: £21.00
Capita Auth Code: 934292
Capita Transaction Code: 3d4913f8-f6cd-404f-99f0-ca58f95b58e7
GOSS Item reference: 2257-5233-1493-3545

Form Data

Title:	Miss
First Name:	KIMBERLY
Last Name:	JONES
Previous Name?:	No
Previous Title:	Please select
Previous First Name:	
Previous Last Name:	
Previous Names?:	
Previous Title:	Please select
Previous First Name:	
Previous Last Name:	
Date of Birth:	████████
Place of birth:	████████
NI Number:	████████
Current Address:	
Property Name and or Number:	████████████████████
Street or Road Name:	████████

Town:	████
County:	████
Postcode:	████
Contact details:	
Daytime telephone number:	████████
Evening telephone number:	
Mobile number:	
Fax Number:	
Email address:	██
Alternative Contact Information:	
Do you have alternative contact information?:	No
Alternative address:	
Property Name and or Number:	
Street or Road Name:	
Town:	
County:	
Postcode:	
Alternative Contact details:	
Daytime telephone number:	
Evening telephone number:	
Mobile number:	
Fax Number:	
Email address:	
Section 2 The Premises:	
Please give the address of the premises:	
House Name or Number:	Boyles Cross
Street or Road:	Market Place
Town:	Frome
Postcode:	BA11 1AJ

Ordnance Survey/market pitch:

Does a premises license or club premises certificate have effect in relation to the premises:	No
Premises licence number:	
Club premises certificate number:	
If you intend to use only part of the premises at this address or intend to restrict the area to which this notice applies, please give a description and details.:	Bar pitch as allocated by event organiser at Frome Carnival
Please describe the nature of the premises:	Open air pedestrian market area
Please describe the nature of the event:	Frome Carnival
Section 3 The Licensable Activities:	
Please state the licensable activities that you intend to carry on at the premises (please tick):	SaleAlcohol
The licensable activities includes the supply of alcohol, please state whether the supplies will be for the consumption:	Both
Are your giving a late temporary event notice?:	No
I confirm there are a minimum of 5 clear working days for a Late TEN and 10 clear working days for a Standard TEN between the date of submission and the start of the event:	Yes
Please state the dates and times on which you intend to use these premises for licensable activities:	
Day 1:	23/09/2023
Day 1 times:	15:00
Day 2:	23/09/2023
Day 2 times:	23:00
Day 3:	
Day 3 times:	
Day 4:	
Day 4 times:	
Day 5:	
Day 5 times:	
Day 6:	

Day 6 times:	
Day 7:	
Day 7 times:	
Day 8:	
Day 8 times:	
Please 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:	10
Please state if the licensable activities will include the provision of regulated entertainment :	No
If so, please state the times during the event period that you propose to provide regulated entertainment:	
Section 4 Personal licence holders:	
Do you currently hold a valid personal licence?:	Yes
Licence number:	LN/0018180
Issuing licensing authority:	WILTSHIRE COUNCIL
Date of issue:	20/09/2020
Further Information:	
Section 5 Previous temporary event notices you have given:	
Have you previously given a TENs in respect of any premises for events falling in the same calendar year as the event for which you are now giving this TENs?:	Yes
If Yes, please state the number of temporary event notices you have given for events in that same calendar year:	14
Have you already given a TEN for the same premises in which the event period ends 24 hours or less before the event period proposed in this notice and/or begins 24 hours or less after the event period proposed in this notice::	No
Section 6 Associates and business colleagues:	
Has any associate of yours given a TENs for an event in the same calendar year as the event for which you are now giving a TENs?:	No
Please state the total number of TENs your	

associate(s) have given for events in the same calendar year:

Has any associate of yours already given a TEN for the same premises in which the event period ends 24 hours or less before the event period in this notice and/or begins 24 hours or less after the event period proposed in this notice::	No
Has any person with whom you are in business carrying on licensable activities given a TENS for an event in the same calendar year as the event for which you are now giving a TENS:	No
Please state the total number of TENSs your business colleague(s) have given for events in the same calendar year:	
Has any person with whom you are in business carrying on licensable activities given a TENSs for an event in the same calendar year as the event for which you are now giving a TENSs?:	No
Declarations:	
I agree with the above statement:	Yes
Date Submitted:	08/09/2023
Name of Person completing online form::	KIMBERLY JONES
This form will be sent by the Licensing department to the Police and Environmental Health, on behalf of the applicant:	Yes
I confirm I have read the TEN guidance notes.:	Yes
Licence Value £21.00:	21.00

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