

Application for a Premises Licence under the Licensing Act 2003

Please read the following instructions first –

- Use the extra page at the end of the form to provide further details if necessary
- When it is complete you can submit the form directly to us – use the submit button. You may wish to print and keep a copy of the completed form for your records. For information about filling in this type of electronic form, use the help button
- For any applications which include the sale of alcohol, you will need to ensure the Designated Premises Supervisor has completed the consent form and upload it to validate your application
- Before you complete this form -
 - [Please read the available information on the Licensing Act 2003 \(opens in a new tab\)](#)
 - [Please read the application specific guidance notes \(opens in a new tab\)](#)
 - [Please read the Home Office guidance and refer to it while completing your application \(opens in a new tab\)](#)

What district/local area are you applying to?

I / We (premises licence holder name)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described 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.

Premises Details

Postal address of premises or, if none, ordinance survey map reference or description

The Vip Lounge
Klyne Business Aviation Centre
Buck Courtney Crescent
Norwich

Postcode

NR6 6JT

Telephone number of premises

What is the non-domestic rateable value of the premises?

Trading name of the business

Klyne Aviation Limited

Applicant Details

Please state whether you are applying for a premises licence as

Please confirm:

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities or

I am making the application pursuant to a:

Statutory function or

A function discharged by virtue of His Majesty's prerogative

INDIVIDUAL APPLICANTS (fill in as applicable)

Note, names provided in this section must match the premises licence holder names given earlier.

Title

Forename(s)

Surname

Are you 18 years or older? Yes No

Date of birth

Current postal address if different from premises address

Postcode

Telephone number

Email address

Confirm email address

Right to Work - where applicable (if demonstrating a right to work via the [Home Office online right to work checking service \(opens in a new tab\)](#)), the 'share code' provided to the applicant by that service.

Input share code if applicable

SECOND INDIVIDUAL APPLICANT (IF APPLICABLE)

Title

Forename(s)

Surname

Date of birth (you must be 18 years old or over)

Current postal address if different from premises address

Postcode

Telephone number

Email address

Confirm email address

Right to Work - where applicable (if demonstrating a right to work via the [Home Office online right to work checking service \(opens in a new tab\)](#)), the 'share code' provided to the applicant by that service.

Input share code if applicable

OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint nature (other than a body corporate), please give the name and address of each party concerned.

Name

Klyne Aviation Limited

Address

Klyne Business Aviation Centre
Buck Courtney Crescent
Norwich
Norfolk
NR6 6JT

Registered number (where applicable)

06765562

Description of applicant (for example, partnership, company, unincorporated association etc.)

Company

Telephone number (if any)

[REDACTED]

Email address (optional)

[REDACTED]

Confirm email address (optional)

[REDACTED]

Agent details

Title

Ms

Forename(s)

Karen

Surname

Lolotte

Address

Birketts Llp
Providence House
141-145 Princes Street
Ipswich
Suffolk

Postcode

IP1 1QJ

Telephone number

[REDACTED]

Email address

[REDACTED]

Confirm email address

[REDACTED]

Operating Schedule

When do you want the premises licence to start?

01/05/2026

Please note, your application for a premises licence may take up to two months to determine.

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

Are more than 5,000 people to attend the premises at any one time?

Yes

No

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

General description of premises [\(please read guidance note 1 \(opens in a new tab\)\)](#)

The Premises Comprises A Self-Contained Vip Lounge Facility On The Second Floor Within The Klyne Aviation Building. The Lounge Provides A Private Secure And Comfortable Environment For Business Aviation Passengers Crew Members And Invited Guests. Access Is Controlled And Limited To Individuals Associated With Scheduled Or Chartered Flights Or Those Authorised By Klyne Aviation Management.

The Applicant Is Seeking To Offer The Supply Of Complimentary Champagne And Their Own Brand Alcohol For Consumption On The Premises As Part Of The Package.

Operating Schedule Continued

What licensable activities do you intend to carry on from the premises?

(Please see [section 1 of the Licensing Act 2003 \(opens in a new tab\)](#) and [Schedule 1 and 2 to the Licensing Act \(opens in a new tab\)](#)).

Provision of regulated entertainment

- a) plays
- b) films
- c) indoor sporting events
- d) boxing or wrestling entertainment
- e) live music
- f) recorded music
- g) performance of dance
- h) anything of a similar description to that falling within e, f or g

i) Provision of late night refreshment (hot food and, or drink 11pm-5am)

j) Supply of alcohol

Is the premises exclusively or primarily selling alcohol for consumption on the premises?

Do you want to remove the requirement to name a Designated Premises Supervisor (DPS)? Yes No

A

Plays Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the performance of a play take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>			
				No	<input type="checkbox"/>			
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))					
Mon	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Tues	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Wed	<input type="text"/>	<input type="text"/>				State any seasonal variations for performing plays (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>						
Thur	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Fri	<input type="text"/>	<input type="text"/>	Non standard timings. Where you intend to use the premises for the performance of a play at different times than those listed, please list (please read guidance note 5 (opens in a new tab))					
	<input type="text"/>	<input type="text"/>						
Sat	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Sun	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						

B

Films Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the exhibition of films take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>
				No	<input type="checkbox"/>
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))		
Mon	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Tues	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text"/>	<input type="text"/>	State any seasonal variations for the exhibition of films (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>			
Thur	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Fri	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			

C

Indoor Sporting Events Standard days and timings (please read guidance note 6 (opens in a new tab))				
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))	
Mon	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>		
Tues	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>		
Wed	<input type="text"/>	<input type="text"/>		State any seasonal variations for indoor sporting events (please read guidance note 4 (opens in a new tab))
	<input type="text"/>	<input type="text"/>		
Thur	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>		
Fri	<input type="text"/>	<input type="text"/>	Non standard timings. Where you intend to use the premises for indoor sporting events at different times than those listed, please list (please read guidance note 5 (opens in a new tab))	
	<input type="text"/>	<input type="text"/>		
Sat	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>		
Sun	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>		

D

Boxing or wrestling entertainment Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the boxing or wrestling entertainment take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>			
				No	<input type="checkbox"/>			
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))					
Mon	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Tues	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Wed	<input type="text"/>	<input type="text"/>				State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>						
Thur	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Fri	<input type="text"/>	<input type="text"/>	Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times than those listed, please list (please read guidance note 5 (opens in a new tab))					
	<input type="text"/>	<input type="text"/>						
Sat	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Sun	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						

E

Live music Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the performance of live music take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>			
				No	<input type="checkbox"/>			
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))					
Mon	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Tues	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Wed	<input type="text"/>	<input type="text"/>				State any seasonal variations for performance of live music (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>						
Thur	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Fri	<input type="text"/>	<input type="text"/>	Non standard timings. Where you intend to use the premises for the performance of live music at different times than those listed, please list (please read guidance note 5 (opens in a new tab))					
	<input type="text"/>	<input type="text"/>						
Sat	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Sun	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						

F

Recorded music Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the playing of recorded music take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>
				No	<input type="checkbox"/>
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))		
Mon	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Tues	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text"/>	<input type="text"/>	State any seasonal variations for playing recorded music (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>			
Thur	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Fri	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			

G

Performance of dance Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the performance of dance take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>
				No	<input type="checkbox"/>
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))		
Mon	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Tues	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text"/>	<input type="text"/>	State any seasonal variations for the performance of dance (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>			
Thur	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Fri	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6 (opens in a new tab))</p>			<p>Please give a description of the type of entertainment you will be providing</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div>									
			<p>Will the entertainment take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))</p>		Indoors	<input type="checkbox"/>	Outdoors	<input type="checkbox"/>				
			Both	<input type="checkbox"/>								
<p>Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?</p>					Yes	<input type="checkbox"/>	No	<input type="checkbox"/>				
Day	Start time	Finish time	<p>Please give further details here (please read guidance note 3 (opens in a new tab))</p>									
Mon	<input type="text"/>	<input type="text"/>	<div style="border: 1px solid black; height: 150px; width: 100%;"></div>									
	<input type="text"/>	<input type="text"/>										
Tues	<input type="text"/>	<input type="text"/>										
	<input type="text"/>	<input type="text"/>										
Wed	<input type="text"/>	<input type="text"/>						<p>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) and (g) (please read guidance note 4 (opens in a new tab))</p>				
	<input type="text"/>	<input type="text"/>										
Thur	<input type="text"/>	<input type="text"/>										
	<input type="text"/>	<input type="text"/>										
Fri	<input type="text"/>	<input type="text"/>	<p>Non standard timings. Where you intend to use the premises for entertainment of a similar description to that falling within (e), (f) or (g) at different times than those listed, please list (please read guidance note 5 (opens in a new tab))</p>									
	<input type="text"/>	<input type="text"/>										
Sat	<input type="text"/>	<input type="text"/>										
	<input type="text"/>	<input type="text"/>										
Sun	<input type="text"/>	<input type="text"/>										
	<input type="text"/>	<input type="text"/>										

I

Late night refreshment Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the provision of late night refreshment take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>
				No	<input type="checkbox"/>
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))		
Mon	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Tues	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text"/>	<input type="text"/>	State any seasonal variations for the provision of late night refreshment (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>			
Thur	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Fri	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			

J

Supply of alcohol Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the supply of alcohol be for consumption: (please read guidance note 2 (opens in a new tab))		On the premises <input checked="" type="checkbox"/>	<input type="checkbox"/>
				Off the premises <input type="checkbox"/>	<input type="checkbox"/>
				Both <input type="checkbox"/>	<input type="checkbox"/>
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Day	Start time	Finish time	State any seasonal variations for the supply of alcohol (please read guidance note 4 (opens in a new tab))		
Mon	<input type="text" value="07:00"/>	<input type="text" value="21:00"/>	<div style="border: 1px solid black; height: 150px;"></div>		
	<input type="text"/>	<input type="text"/>			
Tues	<input type="text" value="07:00"/>	<input type="text" value="21:00"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text" value="07:00"/>	<input type="text" value="21:00"/>			
	<input type="text"/>	<input type="text"/>			
Thur	<input type="text" value="07:00"/>	<input type="text" value="21:00"/>			
	<input type="text"/>	<input type="text"/>	<div style="border: 1px solid black; height: 150px;"></div>		
Fri	<input type="text" value="07:00"/>	<input type="text" value="21:00"/>			
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text" value="07:00"/>	<input type="text" value="21:00"/>			
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text" value="07:00"/>	<input type="text" value="21:00"/>			
	<input type="text"/>	<input type="text"/>			

State the name and details of the individual whom you wish to specify on the licence as Designated Premises Supervisor (DPS).

Title

Mr

Forename(s)

Jonathan Bernard

Surname

Freeman

Date of birth

[REDACTED]

Home address

[REDACTED]

Postcode

[REDACTED]

Personal licence number

[REDACTED]

Issuing licensing authority

[REDACTED]

Please complete the 'Consent of individual to being specified as designated premises supervisor' form and have the person specified above confirm the details given.

Consent to being specified as Designated Premises Supervisor

I,

[Full name of designated premises supervisor]

of

[Home address of designated premises supervisor]

Hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for:

Type of application

by

[Name of premises licence holder/s]

Relating to a premises licence

[Number of existing licence, if any]

For Name of premises

Address of premises

Postcode

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

Name of premises licence holder/s

Concerning the supply of alcohol at Name of premises

Address of the premises

Postcode

Consent of individual to being specified as premises supervisor (cont.)

I 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 have set out on this form.

Personal licence number

[insert personal licence number, if any]

Personal licence issuing authority (if any)

Name of authority

Address of authority

Postcode

Telephone number of authority

Confirmation

Name

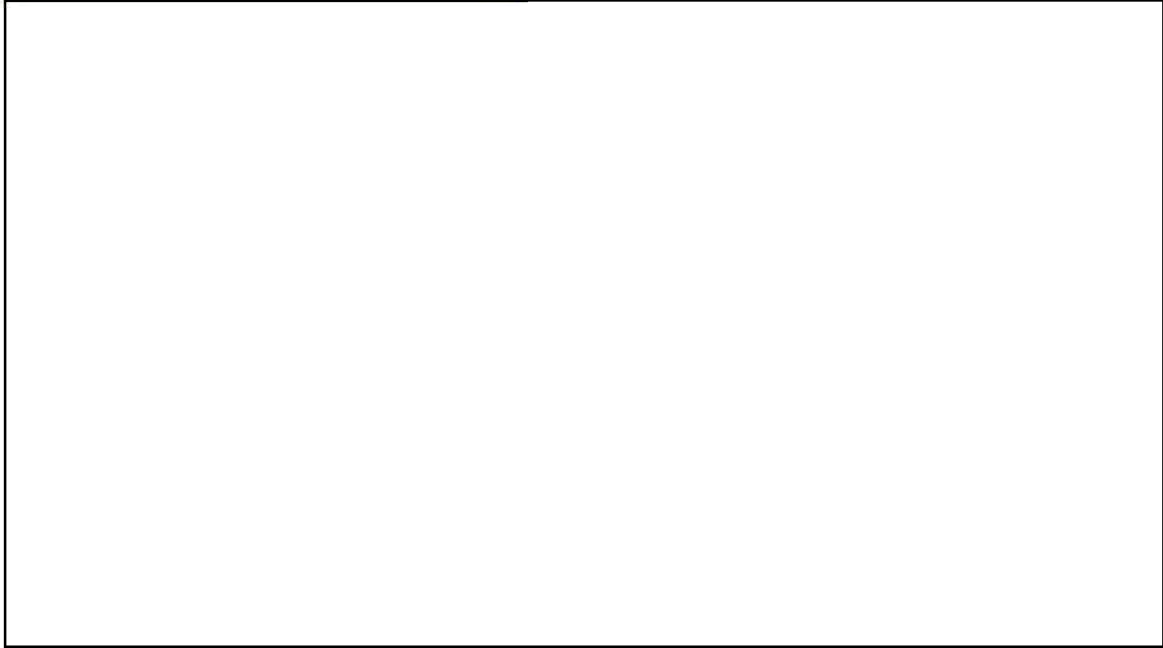
Jonathan Bernard Freeman

Date

30/03/2026

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 8 \(opens in a new tab\)](#))

A large, empty rectangular box with a thin black border, intended for the user to provide details about adult entertainment or services on the premises.

L

Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?			Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Hours premises are open to the public Standard days and timings (please read guidance note 6 (opens in a new tab))			State any seasonal variations (please read guidance note 4 (opens in a new tab))			
Day	Start time	Finish time				
Mon	07:00	21:00				
Tues	07:00	21:00				
Wed	07:00	21:00				
Thur	07:00	21:00				
Fri	07:00	21:00				
Sat	07:00	21:00				
Sun	07:00	21:00				
			Non standard timings. Where you intend to use the premises to be open to the public at different times than those listed, please list (please read guidance note 5 (opens in a new tab))			

M – Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b,c,d,e) ([please read guidance note 9 \(opens in a new tab\)](#))

Alcohol shall only be supplied by authorised and trained staff working within the lounge

b) The prevention of crime and disorder

The licence holder shall ensure that alcohol is supplied only to authorised passengers, crew, or guests within the VIP lounge and that access to the premises is strictly controlled.

Sufficient trained staff must be on duty to monitor behaviour, prevent disorder, and refuse service to anyone appearing intoxicated or acting in a manner that could compromise safety or security.

Any incidents of crime or disorder must be recorded and reported to the appropriate authorities in accordance with Norwich City Council's licensing expectations.

c) Public safety

Alcohol shall only be supplied on a complimentary basis to authorised passengers, crew, or guests within the VIP lounge.

The licence holder must ensure adequate staff supervision to prevent any person who appears unfit through alcohol from accessing airside areas.

All emergency exits and escape routes shall be kept clear at all times, and appropriate safety equipment and trained staff shall be in place to manage any incident.

d) The prevention of public nuisance

The licence holder shall ensure that the operation of the VIP lounge does not cause public nuisance.

All alcohol consumption shall be contained within the lounge.

e) The protection of children from harm

Children under 18 years old shall only be permitted in the VIP lounge when accompanied by an adult who remains responsible for them at all times.

Custom Process Configuration

XML Specific

Application type	<input type="text"/>
Licence Case Type	<input type="text"/>
Licence Status	<input type="text"/>
XML Template	<input type="text"/>
CAPS Reference	<input type="text" value="26/00443/PREM"/>

Payments request

CallingAppID	<input type="text"/>
CallingAppRef	<input type="text"/>
PaymentSourceCode	<input type="text"/>

Response response

PaymentAuthorisationCode	<input type="text"/>
IncomeManagementReceiptNumber	<input type="text"/>
Originators Reference	<input type="text"/>
CardScheme	<input type="text"/>
CardType	<input type="text"/>
PaymentAmount	<input type="text"/>
ResponseCode	<input type="text"/>
ResponseDescription	<input type="text"/>
Number of payment lines	<input type="text"/>

Payment 1

Receipt Number	<input type="text"/>
DueDate	<input type="text"/>
PaymentType	<input type="text"/>
Pay Description	<input type="text"/>
XML Description	<input type="text" value="Premises Licence"/>
PaymentDue	<input type="text"/>
Paid	<input type="text"/>
Payment Date	<input type="text" value="02/04/2026"/>
Fund	<input type="text"/>
Reference	<input type="text" value="YF2NDB10N98"/>

Form Calculations

Title Casing	<input type="text"/>	Enable Priv Pol	<input type="checkbox"/>	Section M Mand	<input type="checkbox"/>
Sentence Casing	<input type="text"/>	DPSCon Form	<input type="checkbox"/>		
UPRN for address lookup	<input type="text"/>	DPS PLN	<input type="text"/>		
Boolean to hide this page	<input type="checkbox"/>	DPS DOB	<input type="text"/>		
Field for email (Bath or Brom)	<input type="text"/>	Agent Email	<input type="text"/>		
Field for fee array	<input type="text"/>	Agent D Tel	<input type="text"/>		
WRS custodian initials	<input type="text"/>	Capacity	<input type="text"/>		
Enable Personal Licence La list	<input type="checkbox"/>	Personal Licence issuer code	<input type="text"/>		

Other Custom Calculations

Calculation for licensable activities	<input type="text"/>	App Day Tel	<input type="text"/>
Subject Line for Email Out	<input type="text"/>	App Email	<input type="text"/>
Body for Internal Email	<input type="text"/>	App Address	<input type="text"/>
Body for External Email	<input type="text"/>	App DOB	<input type="text"/>
Start Date in XML format	<input type="text"/>	App 2 D Tel	<input type="text"/>
End Date in XML Format	<input type="text"/>	App 2 Email	<input type="text"/>
Hours the TEN covers	<input type="text"/>	App 2 Add	<input type="text"/>
DOB	<input type="text"/>	App 2 DOB	<input type="text"/>
Customer Email Acknowledgment	<input type="text"/>	Corr D Tel	<input type="text"/>
Premise Activities Complete	<input type="text"/>	Corr Add	<input type="text"/>
Premise Activities Part 1	<input type="text"/>	Corr Email	<input type="text"/>
Premise Activities Part 2	<input type="text"/>	Open Hours	<input type="text"/>
Premise Address	<input type="text"/>	App 3 D Tel	<input type="text"/>
TP Address	<input type="text"/>	App 3 Email	<input type="text"/>
TP DOB	<input type="text"/>	Ext Pty Email	<input type="text"/>

I am providing / attaching a the plan of the premises [\(See section 2.9 \(opens in a new tab\) of this guidance\)](#) **X**

Please upload your plan of the premises [20260330_162848.pdf](#)

The nominated Designated Premises Supervisor has completed the consent form contained within this application **X**

If suitable, you can upload the completed designated supervisor consent form

I am applying as an individual rather than a business / limited company and have provided proof of my entitlement to work in the UK (for information on what you can provide as evidence, [please reference our evidence guidance notes \(opens in a new tab\)](#))

Please upload proof of your entitlement to work in the UK (if you have not provided a share code)

I understand that if I do not comply with the above requirements my application will be rejected **X**

I understand that once my application has been formally accepted, I must advertise my application. Please note you should not arrange the advertising of your application until you have specifically received confirmation from the Licensing Authority that your application has been formally accepted and is being processed **X**

Use this page if there is any other information that you think we should know about.

A large, empty rectangular box with a thin black border, occupying most of the page below the instruction. It is intended for the user to provide any additional information they think is relevant.

Declaration ([please read guidance note 10 \(opens in a new tab\)](#))

[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.

The Designated Premises Supervisor named in this application form is entitled to work in the UK (and is not subject to conditions preventing them from doing work relating to a licensable activity) and I have seen a copy of their proof of entitlement to work, if appropriate.

A person commits an offence if they knowingly or recklessly makes a false statement in or in connection with an application for a premises licence.

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.

Confirmation of applicant or applicant's solicitor or other duly authorised agent ([please see guidance note 11 \(opens in a new tab\)](#)). If confirming on behalf of the applicant please state in what capacity.

Confirmation

Name

Date

Capacity (owner, director etc.)

For joint applications, confirmation of 2nd applicant or 2nd applicant's solicitor or other authorised agent ([please see guidance note 12 \(opens in a new tab\)](#)). If confirming on behalf of the applicant please state in what capacity.

Confirmation

Name

Date

Capacity (owner, director etc.)

Contact name (where not previously given) and postal address for correspondence associated with this application ([please see guidance note 11 \(opens in a new tab\)](#))

Name

Address

Postcode

Telephone number (if any)

Email address

Confirm email address

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DO NOT SCALE FROM THIS DRAWING USE ONLY DIMENSIONS ON GRID (DIMENSIONS)

NOTES:

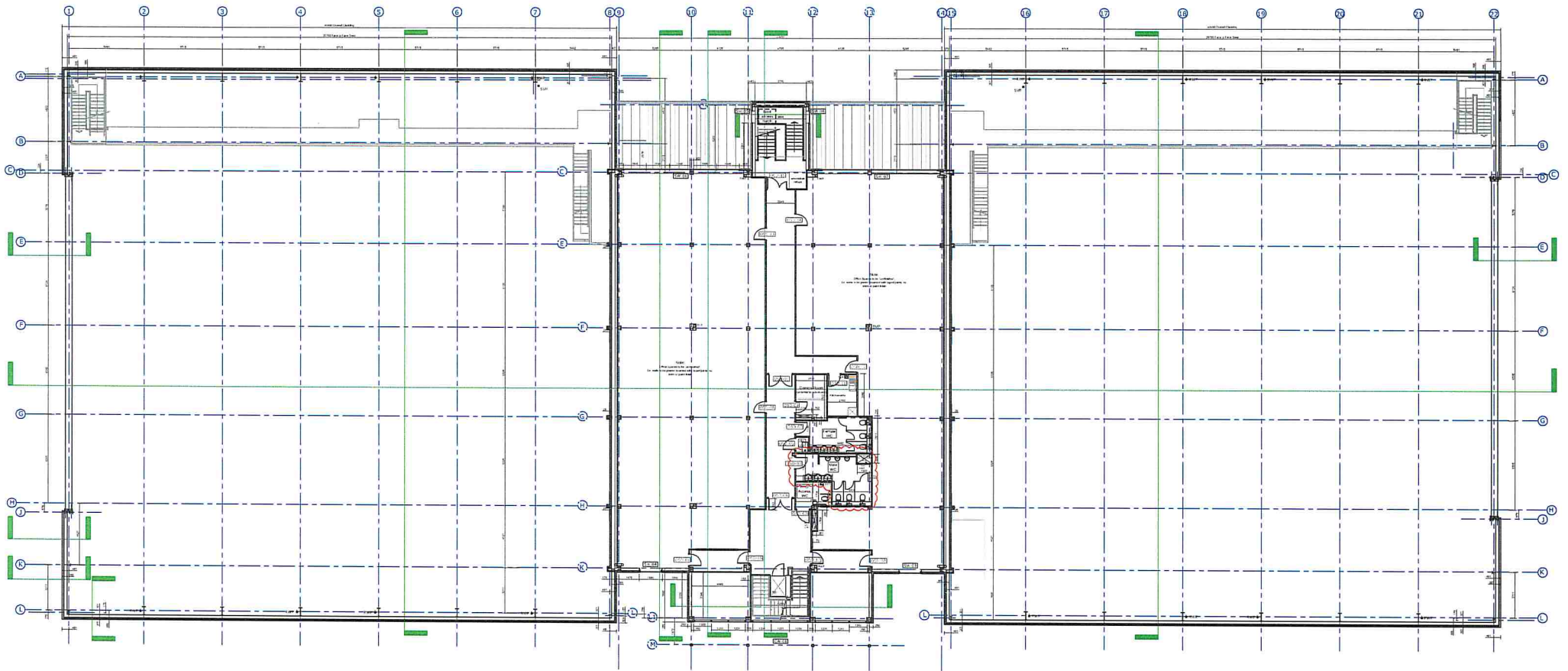
All workmanship to be in accordance with the latest editions of the relevant codes of practice to be used in the area of construction unless otherwise specified.

All dimensions are to be finished and fixed in steel construction with the construction materials shall be in accordance with the relevant British or European Standards. All materials shall be subject to the approval of the relevant authority in the relevant area of the project.

CONSTRUCTION (DESIGN AND MANAGEMENT) REGULATIONS 2017

Carter Design has prepared this drawing for the purpose of providing the Contractor with the design information necessary for the construction of the works shown on this drawing. It is the Contractor's responsibility to ensure that the design information is used in accordance with the relevant British or European Standards. For further information see Carter Design's Risk Assessment which shall be issued to the Contractor in accordance with the relevant British or European Standards.

Consent to the issue of this drawing is given on the understanding that the Contractor shall be bound by the terms and conditions of the contract.



1	Issue for construction	20/01/2024	1
2	Issue for construction	20/01/2024	1
3	Issue for construction	20/01/2024	1
4	Issue for construction	20/01/2024	1
5	Issue for construction	20/01/2024	1
6	Issue for construction	20/01/2024	1
7	Issue for construction	20/01/2024	1
8	Issue for construction	20/01/2024	1
9	Issue for construction	20/01/2024	1
10	Issue for construction	20/01/2024	1
11	Issue for construction	20/01/2024	1
12	Issue for construction	20/01/2024	1
13	Issue for construction	20/01/2024	1
14	Issue for construction	20/01/2024	1
15	Issue for construction	20/01/2024	1
16	Issue for construction	20/01/2024	1
17	Issue for construction	20/01/2024	1
18	Issue for construction	20/01/2024	1
19	Issue for construction	20/01/2024	1
20	Issue for construction	20/01/2024	1
21	Issue for construction	20/01/2024	1
22	Issue for construction	20/01/2024	1



Business Aviation Centre for Kenya Airways
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1	Issue for construction	20/01/2024	1
2	Issue for construction	20/01/2024	1
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16	Issue for construction	20/01/2024	1
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18	Issue for construction	20/01/2024	1
19	Issue for construction	20/01/2024	1
20	Issue for construction	20/01/2024	1
21	Issue for construction	20/01/2024	1
22	Issue for construction	20/01/2024	1