

# Apply for a temporary event notice

LIC716751727

## Privacy Notice

The personal information you supply to Blaby District Council in this form will be processed in accordance with the General Data Protection Regulation (GDPR) and the Data Protection Act 2018 (when in force). We may share this information with other council departments, local authorities, government departments or law enforcement organisations to improve service delivery or for the prevention or detection of crime and fraud where the law allows this. Further information on how we handle your personal information can be found on the [Data Protection Notice web page](#)

## Your details

The personal details of premises user:

Mrs. donna welford

Previous names (please enter details of any previous names or maiden names, if applicable):

Date of birth:

Your place of birth:

National Insurance number:

Your current address:

(We will use this address to correspond with you unless you provide us with an alternative address for correspondence below.)

Contact details:

We will send an email notification to the email address you provide below:

Email address:

thenagsheadenderby@gmail.com

**Phone number:**

**Alternative phone number:**

**[REDACTED]**

**Fax:**

**Would you like to provide an alternative correspondence address:**

**No**

**Alternative address, if applicable**

**Would you like to provide alternative contact details?**

**No**

**Alternative contact details, if applicable**

**Email address:**

**Phone number:**

**Alternative phone number:**

## **The premises**

**Name of premises:**

**the nags head enderby**

**Does the premises have a postal address:**

**Yes**

**Premises address, if applicable:**

**41 Cross Street, Enderby, LE19 4NJ**

**Site details, if applicable**

**Please give a detailed description of the location including the Ordnance Survey references:**

**Does a premises licence or club premises certificate have effect in relation to the premises?**

**Premises licence**

**Premises licence or club premises certificate number:**

**BLPR0121**

**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 below:**

**Please describe the nature of the premises:**

**PUBLIC HOUSE (PUB)**

**Please describe the nature of the event:**

tribute act (frankie valli) in the garden area,

### **Licensable activities**

**Please confirm the licensable activities that you intend to carry on at the premises:**

The sale by retail of alcohol, The provision of regulated entertainment

**Are you giving a late temporary event notice?**

**Please state the dates on which you intend to use these premises for licensable activities:**

**Event start date:**

**07/06/2025**

**Event finish date:**

**07/06/2025**

**Please state the times during the event period that you propose to carry on licensable activities.**

**Event starts at:**

**17:00**

**Event finishes at:**

**19:30**

**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:**

**200**

**Please state whether the supplies will be for consumption on or off the premises, or both:**

**On the premises only**

**Please state if the licensable activities will include the provision of relevant entertainment. If so, please state the times during the event period that you propose to provide relevant entertainment:**

live acoustic music

### **Personal licence holders**

**Do you currently hold a valid personal licence?**

**Yes**

**If applicable, please provide the details of your personal licence below**

**Issuing licensing authority:**

**blaby distric council**

**Licence number:**

**24/0134/LAPERS**

**Date of issue:**

**14/03/2024**

**Any further relevant details:**

**na**

### **Previous temporary event notices you have given**

**Have you previously given a temporary event notice in respect of any premises for events falling in the same calendar year as the event for which you are now giving this temporary event notice?**

**No**

**If applicable, please state the number of temporary event notices (including the number of late temporary events notices, if any) you have given for events in that same calendar year:**

**Have you 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?**

**No**

### **Associates and business colleagues**

**Has any associate of yours 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**

**If applicable, please state the total number of temporary event notices (including the number of late temporary event notices, if any) your associate(s) have given for events in the same calendar year:**

**Has any associate of yours 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?**

**No**

**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**

**If applicable, please state the total number of temporary event notices (including the number of late temporary events notices, if any) 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 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?**

**No**

## **Checklist**

**I will sign the declaration**

**I understand that on submission of this notice a copy will be sent to the licensing authority for Blaby District Council**

**I understand that on submission of this notice a copy will be sent to the Chief Officer of Police for Leicestershire**

**I understand that on submission of this notice a copy will be sent to the department exercising environmental health functions for Blaby District Council**

**If the premises are situated in one or more licensing authority areas, I will send two copies of this notice to each additional licensing authority**

**If the premises are situated in one or more police areas, I will send a copy of this notice to each additional chief officer of police**

**If the premises are situated in one or more local authority areas, I will send a copy of this notice to each additional local authority exercising environmental health functions**

**Please confirm: I have read and understood the checklist**

## **Condition**

**It is a condition of this temporary event notice that where the relevant licensable activities described in section 3 include the supply of alcohol that all such supplies are made by or under the authority of the premises user.**

## **Declaration**

**I understand that it is an offence:**

**(i) to knowingly or recklessly make a false statement in or in connection with this temporary event notice and that a person is liable on summary conviction for such an offence to a fine not exceeding level five on the standard scale; and**

**(ii) to permit an unauthorised licensable activity to be carried on at any place and that a person is liable on summary conviction for any such offence to a fine not exceeding Â£20,000, or to imprisonment for a term not exceeding six months, or to both.**

**I have read and understand the Data Protection Notice and give the council permission to share my data with organisations necessary to process my application: Yes**

**donna welford**

**22/05/2025**

### **Application fee**

**The fee is Â£21. Please note, this is not refundable if the application is withdrawn, is too late or is unsuccessful.**

**Payment authorisation code:**

**251-24295**

### **For completion by the licensing authority**

### **Acknowledgement**

**I acknowledge receipt of this temporary event notice.**

**Signature:**

**On behalf of the licensing authority:**

**Date:**

**Name of officer signing:**