



**Monmouthshire Licensing Section, Abergavenny Community Education
Centre, Old Hereford Road, Abergavenny, NP7 0EL**

Application to vary a premises licence 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.

Name:

(In full name, or, if applicable,
being the premises licence holder, apply to vary a premises licence under section
34 of the Licensing Act 2003 for the premises described in Part 1 below)

Premises licence number

PRM 124

Part 1 - Premises Details

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

THE LION INN
CHURCH STREET
TRUSSICK
NR MONMOUTH

Post town: MONMOUTHSHIRE

Postcode: NP25 4AA

Telephone number at premises (if any):

01600 866322

Non-domestic rateable value of
premises

£ 12750.00

Part 2 - Applicant details

Daytime contact telephone number		
E-mail address (optional)		
Current postal address if different from premises address		
Post town	Postcode	

Part 3 - Variation

Please tick as appropriate

Do you want the proposed variation to have effect as soon as possible?

Yes

No

If not, from what date do you want the variation to take effect?

DD MM YYYY

Do you want the proposed variation to have effect in relation to the introduction of the late night levy? (Please see guidance note 1) Yes No

Please describe briefly the nature of the proposed variation (Please see guidance note)

2) I am increasing the size of the Inn & wish to use the new extension as an overflow for my restaurant & a purpose built area with its own bar for private events such as small weddings.

If your proposed variation would mean that 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend:

Part 4 Operating Schedule

Please complete those parts of the Operating Schedule below which would be subject to change if this application to vary is successful.

Provision of regulated entertainment (Please see guidance note 3)

- a) plays (If ticking yes, fill in box A)
- b) films (If ticking yes, fill in box B)
- c) indoor sporting events (If ticking yes, fill in box C)
- d) boxing or wrestling entertainment (If ticking yes, fill in box D)
- e) live music (If ticking yes, fill in box E)
- f) recorded music (If ticking yes, fill in box F)
- g) performances of dance (If ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (If ticking yes, fill in box H)

Please tick all that apply

Provision of late night refreshment (If ticking yes, fill in box I)

Supply of alcohol (If ticking yes, fill in box J)

In all cases complete boxes K, L and M

Please tick as appropriate

- I have enclosed the premises licence
- I have enclosed the relevant part of the premises licence



If you have not ticked one of these boxes, please fill in reasons for not including the licence or part of it below

Reasons why I have not enclosed the premises licence or relevant part of premises licence.

E

Live music Standard days and timings (please read guidance note 8)			Will the performance of live music take place indoors or outdoors or both – please list (please read guidance note 4)	Indoors <input checked="" type="checkbox"/>
Day	Start	End		Outdoors <input type="checkbox"/>
Mon	10:00	00:30	Please give further details here (please read guidance note 5)	
Tue	10:00	00:30		
Wed	10:00	00:30	State any seasonal variations for the performance of live music (please read guidance note 6)	
Thur	10:00	00:30		
Fri	0:00	00:30	Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list (please read guidance note 7)	
Sat	10:00	00:30		
Sun	10:00	00:30		

F

Recorded music Standard days and timings (please read guidance note 3)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 4)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	10:00	00:30		Both	<input type="checkbox"/>
Tue	10:00	00:30	Please give further details here (please read guidance note 5)		
Wed	(9:00)	00:30	State any seasonal variations for the playing of recorded music (please read guidance note 6)		
Thur	10:00	00:30			
Fri	10:00	00:30	Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list (please read guidance note 7)		
Sat	10:00	00:30			
Sun	0:00	00:30			

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 4)		
Day	Start	Finish	Indoors	<input checked="" type="checkbox"/>	
Mon	23:00	00:30	Outdoors	<input type="checkbox"/>	
Tue	23:00	00:30	Both	<input type="checkbox"/>	
Wed	23:00	00:30	Please give further details here (please read guidance note 5)		
Thur	23:00	00:30			
Fri	23:00	00:30	Please state any seasonal variations for the provision of late night refreshment (please read guidance note 6)		
Sat	23:00	00:30	Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times to those listed in the column on the left, please list (please read guidance note 7)		
Sun	23:00	00:30			

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 9)	On the premises <input checked="" type="checkbox"/>
Day	Start	Finish	Off the premises <input checked="" type="checkbox"/>	
Mon	10:00	00:30	Both <input checked="" type="checkbox"/>	
Tue	10:00	00:30		
Wed	10:00	00:30		
Thur	10:00	00:30	Non-standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 7)	
Fri	10:00	00:30		
Sat	10:00	00:30		
Sun	10:00	00:30		

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 10).

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 6)
Day	Start	Finish	
Mon	10:00	1:00	
Tue	10:00	1:00	
Wed	10:00	1:00	
Thur	10:00	1:00	Non standard timetables. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 7)
Fri	10:00	1:00	
Sat	10:00	1:00	
Sun	10:00	1:00	

Please identify those conditions currently imposed on the licence which you believe could be removed as a consequence of the proposed variation you are making

② - General Conditions - i) Personel
Licence holder will be on Premises at all times when open to the public

Please tick to indicate agreement

- I have made or enclosed payment of the fee; or
- I have not made or enclosed payment of the fee because this application has been made in relation to the introduction of the late night levy.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I understand that I must now advertise my application.
- I have enclosed the premises licence or relevant part of it or explanation.
- I understand that if I do not comply with the above requirements my application will be rejected.

IT IS AN OFFENCE, UNDER SECTION 163 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.

Part 5 – Signatures (please read guidance note 12)

Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (please read guidance note 13). If signing on behalf of the applicant, please state in what capacity.

Signature	[REDACTED]
Date	[REDACTED]
Capacity	D.P.S & OUDER THE LION INN

Where the premises licence is jointly held, signature of 2nd applicant (the current premises licence holder) or 2nd applicant's solicitor or other authorised agent (please read guidance note 14). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	
Capacity	

Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 15)

Post town	Post code
Telephone number (if any)	
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)	