

[insert name and address of relevant licensing authority and its reference number, optional]

**(Part A) Application for an existing licence to be converted to a premises licence under the Licensing Act 2003 and (Part B) application to vary the premises licence simultaneously**

**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.

**Jonathan Scott Burdge**

I/We [ ] apply to convert an existing licence to a premises licence under Schedule 8 to the Licensing Act 2003 for the premises described in Part A1 below

**Part A1 – Premises Details**

Postal address of premises or, if none, ordnance survey map reference or description	
THE THOMAS TRIP STANFORD LYMINGTON HAMPSHIRE	
Post town	Post code
LYMINGTON	SO41 9GF

Telephone number of premises (if any)

01590 689047

Non-domestic rateable value of premises

£ 21000

**Part A2 - Applicant Details**

Please state the capacity in which you are applying to convert your existing licence

Please tick ✓

- a) An individual or individuals  please complete section (A)
- b) a person other than an individual
  - i. as a limited company  please complete section (B)
  - ii. as a partnership  please complete section (B)
  - iii. as an unincorporated association or  please complete section (B)
  - iv. other (for example a statutory corporation)  please complete section (B)
- c) a recognised club  please complete section (B)
- d) a charity  please complete section (B)
- e) the proprietor of an educational establishment  please complete section (B)
- f) a health service body  please complete section (B)



g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital  please complete section (B)

h) the chief officer of police of a police force in England and Wales  please complete section (B)

**(A) INDIVIDUAL APPLICANTS (fill in as applicable)**

Mr  Mrs  Miss  Ms  Other title (for example, Rev)

Surname **MR LRD C.G** First names **SONATHAW SCOTT**

I am 18 years old or over

Please tick  Yes

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone number

**01590 689047**

E-mail address (optional)

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr  Mrs  Miss  Ms  Other title (for example, Rev)

Surname First names

I am 18 years old or over

Please tick  Yes

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone number

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 case of a partnership or other joint nature (other than a body corporate), please give the name and address of each party concerned.

Name
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

**Part A3 - Operating Schedule**

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

General description of premises (please read guidance note 1)

PUBLIC HOUSE COMPRISING OF TWO BARS AND GARDEN AT REAR OF PREMISES, SERVING FOOD AND ALCOHOL IN ALL AREAS TO BE CONSUMED.

Please tick Y Yes

What existing licensable activities are authorised by your existing licence(s)?

Provision of regulated entertainment

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

Provision of entertainment facilities for:

- i) making music
- j) dancing
- k) entertainment of a similar description to that falling within (i) or (j)

Provision of late night refreshment

Sale by retail of alcohol

- a) for consumption on the premises
- b) for consumption off the premises

Please state who you wish to be specified to be the premises supervisor under the new licence

Name JONATHAN SCOTT BURDGE

Address THE THOMAS TRIP, STANFORD RD, LYMINGTON, SO41 4GF

Personal Licence number, if known, .....

State any limitations on the hours during which you are permitted by your licence(s) or any additional authorities to conduct licensable activities, including the sale of alcohol.

ALCOHOL - STANDARD HOURS

MON - SAT 10.00 - 23.00 hrs

SUN 12.00 - 22.30 hrs

ENTERTAINMENT

<u>DAYS</u>	<u>From (Hrs)</u>	<u>To (Hrs)</u>
WEDNESDAY	2000	2300
FRIDAY	2000	2300
SATURDAY	2000	2300
SUNDAY	2000	2230

Describe the conditions subject to which your existing licence(s) has/have been granted (please read guidance note

a) General – all four licensing objectives (b,c,d,e)

STANDARD PEL CONDITIONS

b) The prevention of crime and disorder

NONE

c) Public safety

CAPACITY NOT TO EXCEED 50 PEOPLE.

d) The prevention of public nuisance

NONE

e) The protection of children from harm

NONE

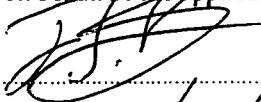
- I have made or enclosed payment of the fee
- I have enclosed my existing licence(s) or a certified copy of each licence
- I have enclosed a plan of the premises
- I have sent copies of this application to the chief officer of police (please read guidance note 3)
- I have enclosed the consent form completed by the proposed premises supervisor, if relevant
- I have enclosed the consent of the justices' licence holder to my application, if relevant
- I understand that if I do not comply with the above requirements my application will be rejected

YES  
 NO

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

**Part A4 – Signatures** (please read guidance note 4)

Signature of applicant or applicant's solicitor or other duly authorised agent (please read guidance note 5). If signing on behalf of the applicant please state in what capacity.

Signature   
 Date 5/7/05  
 Capacity LICENSEE

For joint applications signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent (please read guidance note 6). 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 7)	
Post town	Post code
Telephone number	
E-mail address (optional)	

IF YOU WISH TO APPLY SIMULTANEOUSLY FOR A VARIATION OF THE PREMISES LICENCE IF IT IS CONVERTED FROM YOUR EXISTING LICENCE(S) UNDER SECTION 34 OR 37 OF THE LICENSING ACT 2003, NOW COMPLETE PART B OF THIS FORM.

IF YOU DO NOT WISH TO APPLY SIMULTANEOUSLY FOR A VARIATION OF THE PREMISES LICENCE IF IT IS CONVERTED FROM YOUR EXISTING LICENCE(S), YOU SHOULD LEAVE PART B BLANK.





PART B - Application to vary a premises licence under the Licensing Act 2003

**JONATHAN SCOTT BURDGE**

I/We..... being the proposed premises licence holder of an  
[Insert name of applicant]

existing licence to be converted under the terms of Schedule 8 to the Licensing Act 2003 apply to vary it under section 34/section 37 of the Licensing Act 2003 (delete as applicable) for the premises described in Part A above.

**Part B1 - Variation**

Do you want the proposed variation to have effect from the second appointed day?

Please tick  Y

If not when do you want the variation to take effect from

Day	Month	Year

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

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Please describe briefly the nature of the proposed variation. (Please read guidance note 8)

EXTEND HOURS FOR SALE OF ALCOHOL.  
PLEASE BARE IN MIND THAT THE NEW HOURS  
APPLIED FOR ARE TO COVER ALL POSIDILITIES FOR THE  
YEAR, BANK HOLIDAYS, PRIVATE FUNCTIONS, FUND  
RAISING NIGHTS ETC. THERE IS NO WISH TO USE  
THE FULL EXTENT OF THE HOURS SEVEN DAYS A  
WEEK EVERY WEEK OF THE YEAR.

## Part B2 - Operating Schedule

Please complete those parts of the operating schedule which would be subject to change if this application to vary were successful.

What licensable activities do you now intend to conduct on the premises and/or at what varied times do you intend to conduct them ?

(please see section 1 of the Licensing Act 2003 and Schedule 1 to the Licensing Act 2003)

Please tick Y Yes

### Provision of regulated entertainment

- 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)

### Provision of entertainment facilities:

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j)  
(if ticking yes, fill in box K)

Provision of late night refreshment (if ticking yes, fill in box L)

Sale by retail of alcohol (if ticking yes, fill in box M)

Please complete Part B3 on this form.

**A**

Plays Standard days and timings (please read guidance note 8)			Will the performance of a play take place indoors or outdoors or both – please tick [Y] (please read guidance note 9)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			<b>Please give further details here</b> (please read guidance note 10)		
Tue					
Wed			<b>State any seasonal variations for performing plays</b> (please read guidance note 11)		
Thur					
Fri			<b>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</b> (please read guidance note 12)		
Sat					
Sun					

**P**

<b>Films</b> Standard days and timings (please read guidance note 8)			Will the exhibition of films take place indoors or outdoors or both – please tick [Y](please read guidance note 9)	Indoors	
Day	Start	Finish		Outdoors	
Mon			<b>Please give further details here</b> (please read guidance note 10)	Both	
Tue					
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 11)		
Thur					
Fri			<b>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</b> (please read guidance note 12)		
Sat					
Sun					

**C**

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 8)			Please give further details (please read guidance note 10)
Day	Start	Finish	
Mon			<b>State any seasonal variations for indoor sporting events</b> (please read guidance note 11)
Tue			
Wed			<b>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</b> (please read guidance note 12)
Thur			
Fri			
Sat			
Sun			

## D

Boxing or wrestling entertainment Standard days and timings (please read guidance note 8)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick [Y](please read guidance note 9)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read guidance note 10)		
Tue					
Wed			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 11)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list (please read guidance note 12)		
Sat					
Sun					

## 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 tick [Y](please read guidance note 9)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read guidance note 10)		
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 11)		
Thur					
Fri			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 12)		
Sat					
Sun					

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 8)			Will the playing of recorded music take place indoors or outdoors or both – please tick [Y] (please read guidance note 9)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 10)	Both	
Tue					
Wed				State any seasonal variations for playing recorded music (please read guidance note 11)	
Thur					
Fri				Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list (please read guidance note 12)	
Sat					
Sun					

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 8)			Will the performance of dance take place indoors or outdoors or both – please tick [Y] (please read guidance note 9)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 10)	Both	
Tue					
Wed				State any seasonal variations for the performance of dance (please read guidance note 11)	
Thur					
Fri				Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list (please read guidance note 12)	
Sat					
Sun					

# H

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 8)			<b>Please give a description of the type of entertainment you will be providing</b>		
Day	Start	Finish	<b>Will this entertainment take place indoors or outdoors or both – please tick [Y] (please read guidance note 9)</b>	Indoors	
				Outdoors	
				Both	
Mon			<b>Please give further details here (please read guidance note 10)</b>		
Tue					
Wed					
Thur					
Fri			<b>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 11)</b>		
Sat			<b>Non standard timings. Where you intend to use the premises for the entertainment of similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list (please read guidance note 12)</b>		
Sun					

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 8)			<b>Please give a description of the facilities for making music you will be providing</b>					
			Will the facilities for making music be indoors or outdoors or both – please tick [Y] (please read guidance note 9)		<table border="1"> <tr> <td>Indoors</td> <td></td> </tr> <tr> <td>Outdoors</td> <td></td> </tr> <tr> <td>Both</td> <td></td> </tr> </table>	Indoors		Outdoors
Indoors								
Outdoors								
Both								
Day	Start	Finish	<b>Please give further details here (please read guidance note 10)</b>					
Mon								
Tue								
Wed						<b>State any seasonal variations for the provision of facilities for making music (please read guidance note 11)</b>		
Thur								
Fri						<b>Non standard timings. Where you intend to use the premises for provision of facilities for making music entertainment at different times to those listed in the column on the left, please list (please read guidance note 12)</b>		
Sat								
Sun								

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 8)			<b>Will the facilities for dancing be indoors or outdoors or both – please tick [Y] (see guidance note 9)</b>					
			<table border="1"> <tr> <td>Indoors</td> <td></td> </tr> <tr> <td>Outdoors</td> <td></td> </tr> <tr> <td>Both</td> <td></td> </tr> </table>		Indoors		Outdoors	
Indoors								
Outdoors								
Both								
Day	Start	Finish	<b>Please give further details here (please read guidance note 10)</b>					
Mon								
Tue								
						<b>State any seasonal variations for providing dancing facilities (please read guidance note 11)</b>		
Thur								
Fri						<b>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list (please read guidance note 12)</b>		
Sat								
Sun								

**K**

<b>Provision of facilities for entertainment of a similar description to that falling within I or J</b> Standard days and timings (please read guidance note 8)			<b>Please give a description of the type of entertainment facility you will be providing</b>		
Day	Start	Finish	<b>Will the entertainment facility be indoors or outdoors or both – please tick [Y] (please read guidance note 9)</b>	Indoor	
				Outdoor	
				Both	
Mon			<b>Please give further details here (please read guidance note 10)</b>		
Tue					
Wed					
Thur					
Fri			<b>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within I or J (please read guidance note 11)</b>		
Sat			<b>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times to those listed in the column on the left, please list (please read guidance note 12)</b>		
Sun					

**L**

<b>Late night refreshment</b> Standard days and timings (please read guidance note 8)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick [Y] (please read guidance note 9)</b>	Indoors	
Day	Start	Finish		Outdoors	
				Both	
Mon			<b>Please give further details here (please read guidance note 10)</b>		
Tue					
Wed					
Thur					
Fri			<b>State any seasonal variations for the provision of late night refreshment (please read guidance note 11)</b>		
Sat			<b>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 12)</b>		
Sun					



**M**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 8)			Will the supply of alcohol be for consumption (Please tick box Y) (please read guidance note 13)	On the premises	
Day				Off the premises	
	Start	Finish		Both	<input checked="" type="checkbox"/>
Mon	0800	0100	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 11)		
Tue					
Wed					
Thur					
Fri					
Sat					
Sun					
			<b>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</b> (please read guidance note 12)		

IN ALL CASES PLEASE COMPLETE BOXES N, O, P and Q below

**N**

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 14)

NONE

O

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 8)			<b>State any seasonal variations</b> (please read guidance note 11)
Day	Start	Finish	
Mon	00 00	00 00	<b>Non standard timings. Where you intend to use the premises to be open to the public at different times from those listed in the column on the left, please list</b> (please read guidance note 12)  24 HOURS
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			
	↓	↓	

P

Please identify any of the conditions, terms or restrictions currently imposed on the converted licence which you believe could be removed as a consequence of the proposed variation you are seeking

PLEASE REMOVE ANY RESTRICTIONS WHICH ARE TO BE PLACED ON THE LICENSE BY VIRTUE OF SCHEDULE 8 - PARA 6 - (8) OF THE LICENCING ACT 2003.

EXCEPT PEL CONDITIONS - SEE EMAIL CORRESPONDANCE WITH EHO.

**Q** Please describe any additional steps that you intend to take in order to promote the four licensing objectives if the proposed variation is granted:

a) General – all four licensing objectives (b, c, d, e) (please read guidance note 15)

NONE

b) The prevention of crime and disorder

DOOR STAFF WHEN NEEDED

c) Public safety

TO ENSURE CAPACITY LIMIT IS NOT EXCEEDED.

d) The prevention of public nuisance

TO ENCOURAGE QUIET EVACUATION OF PREMISES.

e) The protection of children from harm

NONE

Part B3 – Premises Supervisor

Full name of proposed designated premises supervisor

JONATHAN SCOTT BURDGE

Address of proposed designated premises supervisor

THE THOMAS TRIPP  
STANFORD RD  
LYMINGTON  
HANTS  
SO41 9GF

Personal licence number of proposed designated premises supervisor, if any, and issuing authority of the personal licence, if applicable

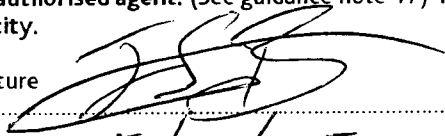
Please tick ✓ Yes

- I enclose the consent form completed by the proposed premises supervisor
- I will give a copy of Part B3 of this application to the chief officer of police (section 37 of the Licensing Act 2003)
- I have sent copies of this application to vary (except Part B3) to responsible authorities and others where applicable (section 34 of the Licensing Act 2003)
- I understand that I must now advertise my application to vary (section 34 of the Licensing Act 2003)
- I understand that if I do not comply with the above requirements my application will be rejected

**Part B4 – Signatures** (please read guidance note 16)

Signature of applicant (the proposed current premises licence holder) or applicant’s solicitor or other duly authorised agent. (See guidance note 17) If signing on behalf of the applicant please state in what capacity.

Signature



Date

5/7/05

Capacity

LICENSEE

Where the premises licence is jointly held signature of 2<sup>nd</sup> applicant (the proposed current premises licence holder) or 2<sup>nd</sup> applicant’s solicitor or other authorised agent. (please read guidance note 18) 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 19)	
Post town	Post code

**Notes for Guidance**

**PART A**

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which would be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you provide a place for consumption of these off-supplies you must include a description of where the place is and its proximity to the premises.
2. Where the conditions to which your existing licence(s) is granted do not relate solely to any one of the four licensing objectives, please describe such conditions in the general box.
3. The law requires you to send a mandatory copy of this application to the chief officer of police for that area at the same time as sending to the relevant licensing authority.
4. The application form must be signed.

5. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
6. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
7. This is the address we shall use to correspond with you about this application.

#### **PART B**

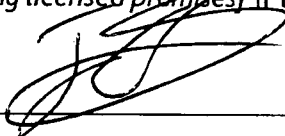
**This application cannot be used to vary the licence to vary substantially the premises to which it relates. If you wish to make that type of change to the premises licence you should make a new premises licence application under section 17 of the Licensing Act.**

8. Please give timings in 24 hour clock and only give details for days of the week when you intend the premises to be used for the activity.
9. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
10. Please state type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
11. For example (but not exclusively), where the activity will occur on additional days during the summer.
12. For example (but not exclusively), where you wish the activity to go on longer on a particular day i.e. Christmas Eve.
13. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
14. Please give information about anything to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gambling machines.
15. Please list here steps you will take to promote all four licensing objectives together.
16. The application form must be signed.
17. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
18. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
19. This is the address which we shall use to correspond with you about this application.

Form of consent given by the person whom the applicant wishes to be the premises supervisor

I, JONATHAN SCOTT BUDGE [insert first names and surname of prospective premises supervisor] hereby consents to being named as the premises supervisor in a new licence granted under paragraph 4 of Schedule 8 to the Licensing Act 2003 to JONATHAN SCOTT BUDGE [insert full name of applicant] in respect of the application to convert an existing justices' licence held by the applicant/where the holder of the licence has consented to the application being made by the applicant [delete as applicable] for THE THOMAS TRIPP, STANFORD RD, [insert name and address of existing licensed premises] LYNINGTON, HANTS. SO41 9GF if that application is successful.

Signed



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Dated

5/7/05

Form of consent given by the person who holds the existing licence

JONAH ALAN LOVELL, JONATHAN SCOTT BURDLE, SIMON GOULDING  
I/We, ..... [insert full

name(s) of existing licence holder(s)] being the holder(s) of an existing

licence/existing licences .....

..... [insert name of licence(s), the date of  
grant of the licence(s) and by whom the grant(s) was/were made] hereby consent(s)

to the application by JONATHAN SCOTT BURDLE ..... [insert full

name or names of applicant] under paragraph 2 of Schedule 8 to the Licensing Act

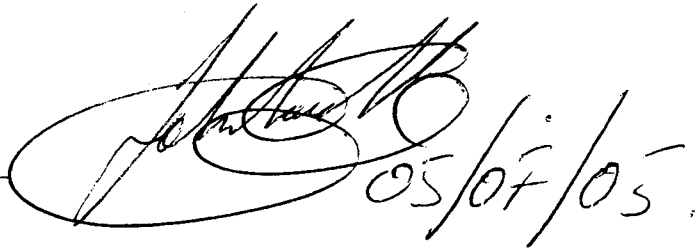
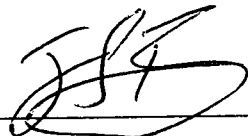
2003 for the grant of a new licence under paragraph 4 of that Schedule to succeed

the said existing licence(s) held by me in respect of THE THOMAS TRIP,

STANFORD RD, LYMINGTON, HANTS. SO41 96A [insert name

and address of premises].

Signed



05/07/05

Dated

5/7/05



5/7/05



**LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) 1982  
(AS AMENDED)  
ANNUAL INDOOR PUBLIC ENTERTAINMENT LICENCE**

**NUMBER 355**

The New Forest District Council of Appletree Court, Lyndhurst, Hampshire as the Licensing Authority under Section 1 of the Act DO HEREBY RENEW the annual licence, as detailed below, until the same shall be sooner revoked, subject to the terms and conditions set out in the regulations made by the Council, as amended or supplemented by the special conditions set out in the schedule hereto:

**Name of person to whom the licence is granted:** Mr J S Burdge

**To keep and use the premises situate and known as:** The Thomas Tripp  
Stanford Road  
Lymington  
Hampshire  
SO41 9GF

**Period for which the licence is granted:** **Starting:** 01 April 2005  
**Expiring:** 31 March 2006

**SCHEDULE**

**1. Permitted Hours**

For the permitted hours there shall be substituted the following:-

Days	From (Hrs)	To (Hrs)	Period
Wednesday	2000	2300	January to December
Friday	2000	2300	January to December
Saturday	2000	2300	January to December
Sunday	2000	2230	January to December

24



**Numbers Admitted:**

To include performers, presenters, employees and customers

The number of persons admitted at any entertainment shall not exceed:

Area or Room	Maximum Numbers	
	Seated	Dancing
Restaurant		50

**Total Capacity** **50**

**3. Additional Conditions:**

These conditions are in addition to the Standard Conditions and are contained in the attached Schedule Number(s) 61

**Date issued:** 10 March, 2005

A.R.  
**A Righton**  
**Assistant Director (Environmental Health)**

(L:/Letters/PubEnt/Licences/Indoor AnnLicadcon renew

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) 1982  
(AS AMENDED)  
ANNUAL INDOOR PUBLIC ENTERTAINMENT LICENCE

ADDITIONAL CONDITIONS

LICENCE NO: 355

Period for which the licence is granted	Starting:	01 April 2005
	Ending:	31 March 2006

61. NOISE POLLUTION

- 61.1 A noise limiter of a design approved and set to a level determined by the Chief Environmental Health Officer of New Forest District Council must be fitted in the room licensed for the purpose of public entertainment, i.e. the Restaurant.
- 61.2 The noise limiter shall at all times be biased to the bass beat (on setting B) and must be in operation for all licensable functions.
- 61.3 The noise limiter must be fitted in a secure place and kept locked. The key should be kept in the possession of either the owner or the manager of the premises and no other person should have access to the noise limiter.
- 61.4 All musical and vocal equipment using electricity must be wired in such a manner to ensure that they are wholly controlled by the noise limiter.
- 61.5 The Licensee must take all appropriate measures to ensure that no noise emanates from the building during licensed functions.

**1. THE COUNTY OF HAMPSHIRE**  
**APPLICATION TO RENEW JUSTICES' LICENCE**

Date of Session : 2nd February 2004

Permit/Licence No : 2755

Liquor Type : ALL INTOXICATING LIQUOR

Licence Holders :  
**John Alan Lovell**  
**Simon Golding**

Name & Address of Premises :  
**THOMAS TRIPP 2**  
**Stanford Road**  
**Lymington**  
**Hampshire**

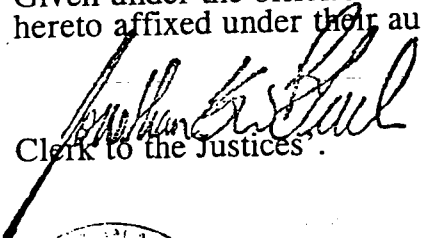
Owner : The Licence Holders

**JUSTICES' ON LICENCE**

THIS RENEWED JUSTICES' ON LICENCE as described above, hereby authorises the person(s) above, to sell by retail at the above premises the type of liquor stated for consumption either on or off the premises.

This licence is granted subject to the attached conditions and undertakings (if any) and shall have effect from the date hereof until the end of the fourth day of April 2007.

Given under the official stamp of the Licensing Justices which is hereto affixed under their authority by me.

  
Clerk to the Justices.



SOUTHAMPTON

23rd August 2005.

The Coach House,

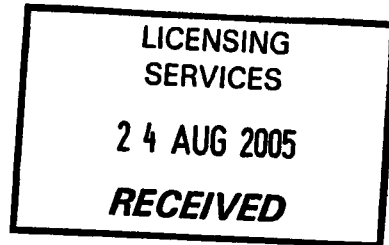
Stanford Road,

Lymington SO41 9GF

Dear Sir,

THOMAS TRIPP PUBLIC HOUSE

APPLICATION TO EXTEND HOURS FOR  
SALE OF ALCOHOL AND HOT FOOD TO 6100 HRS  
MONDAY TO SUNDAY.



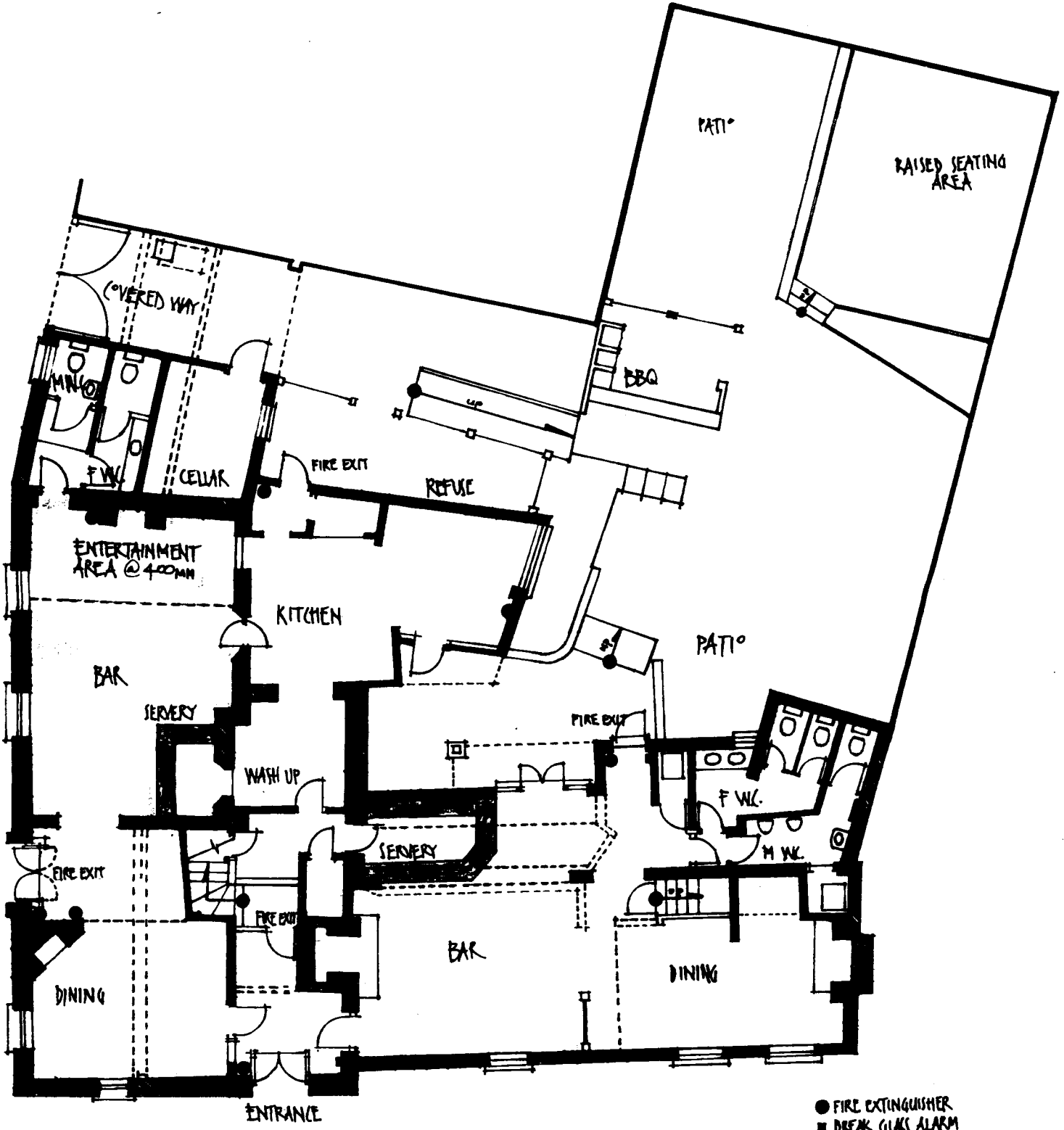
I and my wife are council tax payers  
at the above address.

We object to the above application on these grounds:-

- (1) We are contiguous neighbours.
  - (2) Annoyance in the garden already disturbs us at  
night. The noise, which is drunken and raucous,  
penetrates into our bedroom and more so into  
our garden.
  - (3) There is a constant disturbance and litter in  
the area of Queen Street, which is bound to get  
worse if the application is granted.
  - (4) The application is inappropriate to a residential area.
- Yours faithfully,

28

W. P. Andrew-Jones QC.



GROUND FLOOR PLAN

1:100

THE THOMAS TRIPP  
 STANFORD ROAD  
 LYMINGTON  
 HAMPSHIRE

- FIRE EXTINGUISHER
- BREAK GLASS ALARM
- FIRE BLANKET
- DINING AREA
- ▭ BAR AREA
- ▩ SERVERY