



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.

I/We Mrs Rose Savidge & Mr Mark Savidge

(Insert name(s) of applicant)

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 PR01008

Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description The Crown Inn, Lea Ross-on-Wye			
Post town	Herefordshire	Postcode	HR9 7JZ

Telephone number at premises (if any)	None yet
Non-domestic rateable value of premises	£1,541.37

Part 2 – Applicant details

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

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

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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)

Revised layout to interior of pub and the gardens to be landscaped.

Revised alcohol licence hours as per application – section J

Change to opening hours, to plus 1 hour from the end of the hours listed.

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:

N/A

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) | Please tick all that apply |
|-------------------------------------------------------------------------------------------------------------|-----------------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/> |

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

A

Plays Standard days and timings (please read guidance note 8)			Will the performance of a play take place <u>indoors or outdoors or both</u> – please tick (please read guidance note 4)	Indoors	<input type="checkbox"/>
Day				Start	Finish
				Outdoors	<input type="checkbox"/>
Mon			Both	<input type="checkbox"/>	Please give further details here (please read guidance note 5)
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 6)		
Thur					
Fri			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 (please read guidance note 7)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 8)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 4)</u>	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here (please read guidance note 5)</u>		
Mon					
			<u>State any seasonal variations for the exhibition of films (please read guidance note 6)</u>		
Tue					
			<u>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 (please read guidance note 7)</u>		
Wed					
Thur					
Fri					
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 8)			Please give further details (please read guidance note 5)
Day	Start	Finish	
Mon			
Tue			State any seasonal variations for indoor sporting events (please read guidance note 6)
Wed			
Thur			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 (please read guidance note 7)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 8)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 4)</u>	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here (please read guidance note 5)</u>		
Mon					
			<u>State any seasonal variations for boxing or wrestling entertainment (please read guidance note 6)</u>		
Tue					
			<u>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 7)</u>		
Wed					
Thur					
Fri					
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 (please read guidance note 4)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 5)		
Mon					
			State any seasonal variations for the performance of live music (please read guidance note 6)		
Tue					
			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)		
Wed					
Thur					
Fri					
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 8)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 4)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 5)		
Tue					
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 6)		
Thur					
Fri			<u>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</u> (please read guidance note 7)		
Sat					
Sun					

G

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

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 8)</p>			<p>Please give a description of the type of entertainment you will be providing</p>		
Day	Start	Finish	<p><u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 4)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><u>Please give further details here</u> (please read guidance note 5)</p>		
Wed			<p><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 6)</p>		
Thur					
Fri			<p><u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 7)</p>		
Sat					
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 8)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 4)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 5)	Both	<input type="checkbox"/>
Tue			Please give further details here (please read guidance note 5)		
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 6)		
Thur			State any seasonal variations for the provision of late night refreshment (please read guidance note 6)		
Fri			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)		
Sat			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			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)		

J

Supply of alcohol Standard days and timings (please read guidance note 8)			Will the supply of alcohol be for consumption – please tick (please read guidance note 9)	On the premises	<input checked="" type="checkbox"/>			
				Off the premises	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 6)					
Mon	10:00 am	23:00 pm						
Tue	10:00 am	23:00 pm						
Wed	10:00 am	23:00 pm						
Thur	10:00 am	23:00 pm				<u>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</u> (please read guidance note 7) New Years Eve – 10:00am – 02:00am		
Fri	10:00 am	01:00 am						
Sat	10:00 am	01:00 am						
Sun	10:00 am	23:00 pm						

K

<p>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).</p> <p>None.</p>

M Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

a) General – all four licensing objectives (b, c, d and e) (please read guidance note 11)

We will take the following steps to meet all four licensing objectives:

- Provide regular training for all staff to ensure they understand licensing laws and their responsibilities.
- Conduct periodic checks to ensure full compliance with licensing conditions.
- Designate a premises supervisor who will oversee all licensing matters and act as the main point of contact.
- Maintain open communication with local authorities and law enforcement to address any issues promptly.

b) The prevention of crime and disorder

CCTV will be installed: Cameras will cover key areas, including entrances, exits, and the bar, with footage securely stored for a minimum of 28 days and made available to law enforcement if required.

Notice of CCTV in use will be displayed on main doors: Signs will be clearly placed to inform patrons that CCTV is in operation.

Customers will not be allowed to leave premises with open containers: This rule will be enforced to prevent street drinking and reduce disorder.

A proof-of-age policy will be implemented: A Challenge 25 policy will require customers to show valid ID if they appear under 25.

An anti-drugs policy will be enforced: Anti-drug signage will be displayed, and regular checks of the premises will be conducted to ensure no illegal substances are used.

c) Public safety

A fire risk assessment will be completed: Emergency exits will be inspected, and all necessary fire safety measures will be put in place.

First aid equipment will be available: A fully stocked first aid kit will be kept on-site, and staff will be trained in basic first aid.

Free drinking water will be provided: Patrons will have access to clean, free drinking water at all times.

A no-smoking policy will be enforced indoors: Smoking will not be permitted inside the premises, and designated no-smoking areas will be created for families.

d) The prevention of public nuisance

Music levels will be reduced during the final hour of opening: Noise levels will be gradually lowered to minimize disturbances for nearby residents.

Signage will request patrons to keep noise levels down: Signs will be prominently displayed, reminding customers to respect neighbours when leaving.

Local taxi services will be promoted: Contact details for local taxi providers will be made available to ensure customers leave quietly and efficiently.

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

N/A

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) The protection of children from harm

A proof-of-age policy will be enforced: A strict Challenge 25 policy will ensure no alcohol sales are made to underage individuals.

No-smoking areas will be provided for families: Clear, designated smoke-free zones will be created both indoors and outdoors for family use.

Checklist:

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 158 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	
Date	13/01/25
Capacity	Licence holder

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	14/01/25
Capacity	Licence holder

LEGEND

FIRE ALARM

- FAP** FIRE ALARM PANEL
- S** SMOKE DETECTOR
- S** SMOKE DETECTOR & SOUNDER
- S** SMOKE DETECTOR & BEACON
- S** SMOKE DETECTOR & SOUNDER BEACON
- H** HEAT DETECTOR
- M** MULTI-DETECTOR
- CO** CARBON MONOXIDE DETECTOR
- CV** CEILING VOID
- FV** FLOOR VOID
- ⊙** MANUAL CALL POINT
- ⊙** SOUNDER (CEILING)
- ⊙** SOUNDER (WALL)
- ⊙** BEACON (CEILING)
- ⊙** BEACON (WALL)
- WIRED IN FP 200 1.5MM



— Licensable Activity
 — Alcohol consumption area
 — Stairs

Ground Floor

Rev	Date	Details	Chn'd
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BeSecure
 Protection Systems Ltd
 BeSecure Protection Systems Ltd
 Hagley Showrooms, Bartestree, Hereford HR1 4BX
 Tel 01432 263416 www.besafebesecure.co.uk

Client
THE CROWN INN

Drawing Status
AS FITTED

Date	Scale	CAD Tech	Checked	Approved
23.07.2024	1:100	BL	MP	SA

Project
 THE CROWN INN
 LEA
 ROSS-ON-WYE
 HR9 7JZ

Drawing Title
**GROUND FLOOR
 FIRE ALARM LAYOUT**

Drawing Number	Rev	Size
BPS-E-001	-	A3

LEGEND

FIRE ALARM

- FAP** FIRE ALARM PANEL
- S** SMOKE DETECTOR
- S** SMOKE DETECTOR & SOUNDER
- S** SMOKE DETECTOR & BEACON
- S** SMOKE DETECTOR & SOUNDER BEACON
- H** HEAT DETECTOR
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- ⊙** MANUAL CALL POINT
- ⊙** SOUNDER (CEILING)
- ⊙** SOUNDER (WALL)
- ⊙** BEACON (CEILING)
- ⊙** BEACON (WALL)
- WIRED IN FP 200 1.5MM

Rev	Date	Details	Chkd

BeSecure
 Protection Systems Ltd
 BeSecure Protection Systems Ltd
 Hagley Showrooms, Bartestree, Hereford HR1 4BX
 Tel: 01432 263416 www.besafebesecure.co.uk

Client
 THE CROWN INN

Drawing Status
 AS FITTED

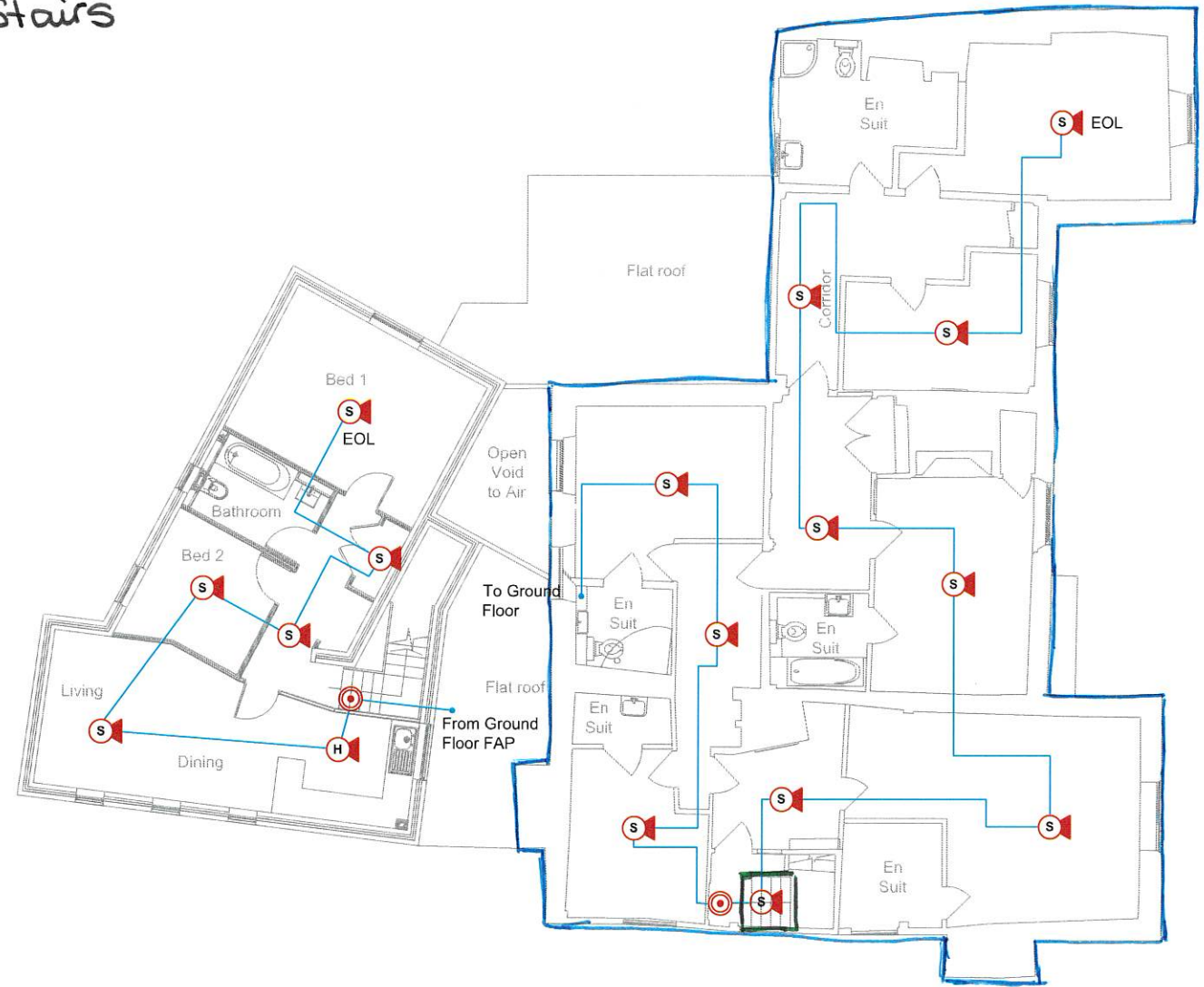
Date	Scale	CAD Tech	Checked	Approved
24.07.2024	1:100	BL	MP	SA

Project
 THE CROWN INN
 LEA
 ROSS-ON-WYE
 HR9 7JZ

Drawing Title
 FIRST FLOOR
 FIRE ALARM LAYOUT

Drawing Number	Rev	Size
BPS-E-101	-	A3

— Alcohol consumption area
 — Stairs

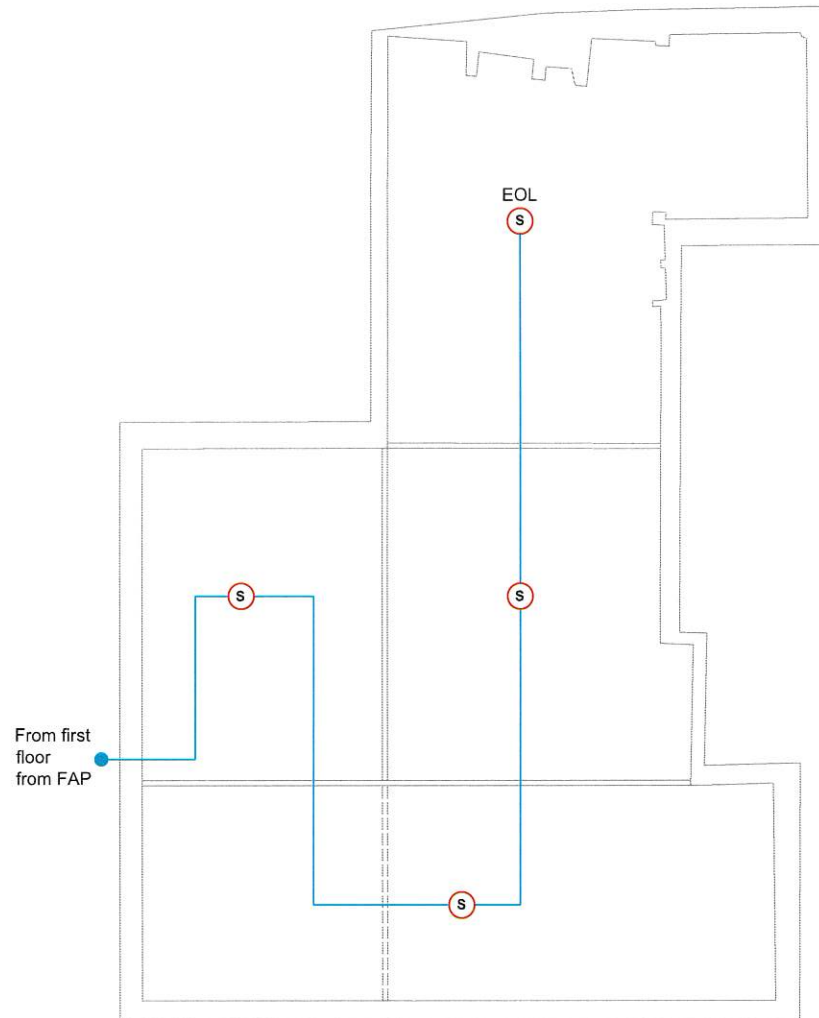


First Floor

LEGEND

FIRE ALARM

- FAP** FIRE ALARM PANEL
- S** SMOKE DETECTOR
- S** SMOKE DETECTOR & SOUNDER
- S** SMOKE DETECTOR & BEACON
- S** SMOKE DETECTOR & SOUNDER BEACON
- H** HEAT DETECTOR
- M** MULTI-DETECTOR
- CO** CARBON MONOXIDE DETECTOR
- CV** CEILING VOID
- FV** FLOOR VOID
- ⊙** MANUAL CALL POINT
- ⊙** SOUNDER (CEILING)
- ⊙** SOUNDER (WALL)
- ⊙** BEACON (CEILING)
- ⊙** BEACON (WALL)
- WIRED IN FP 200 1.5MM



Attic

Rev	Date	Details	Chkd
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BeSecure Protection Systems Ltd
 Hagley Showrooms, Bantleslee, Hereford HR1 4BX
 Tel: 01452 263416 www.besafebesecure.co.uk

Client

THE CROWN INN

Drawing Status
AS FITTED

Date	Scale	CAD Tech	Checked	Approved
24.07.2024	1:100	BL	MP	SA

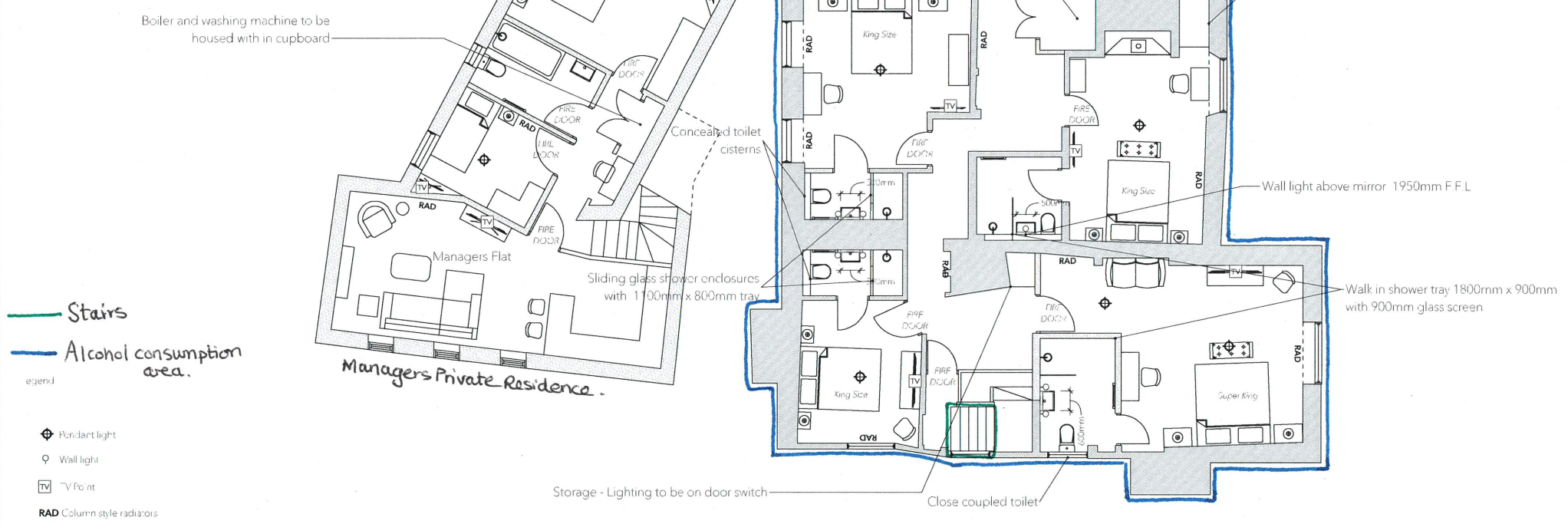
Project
 THE CROWN INN
 LEA
 ROSS-ON-WYE
 HR9 7JZ

Drawing Title
**ATTIC
 FIRE ALARM LAYOUT**

Drawing Number	Rev	Size
BPS-E-201	-	A3

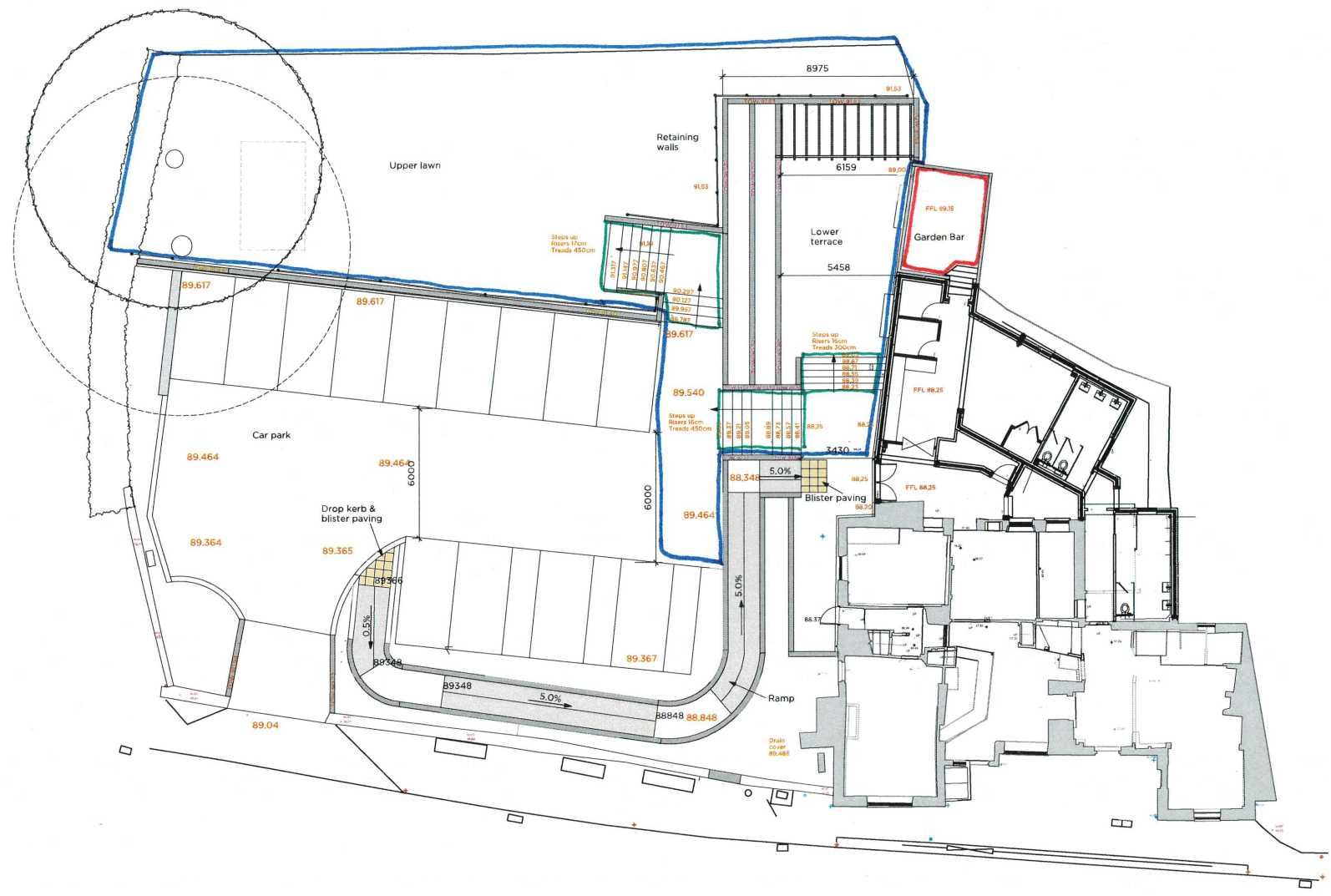
Lighting Notes:

1. Downlights to be installed throughout hallways & bathrooms unless otherwise stated.
2. Sub-contractor responsible for downlight quantity and positioning
3. All hallway lighting to be on sensors
4. Sub-contractor responsible for switch and socket placement
5. Please allow for double sockets by dressing tables
6. All bedrooms to have one single pendant in centre of flat ceilings
7. Main bedroom two way switched upon entry and either side of beds (switches 700mm F.F.L)
8. Bathroom wall lights to be 1650mm F.F.L unless otherwise stated
9. Lighting shown for design intent purposes only. Sub- contractor responsible for final detailed design of lighting to include lighting and load assessment.
10. Final design to comply fully with CIBSE Lighting Guides and Codes, BS EN, Building Regulations and BS7671 - IET Wiring Regulations.

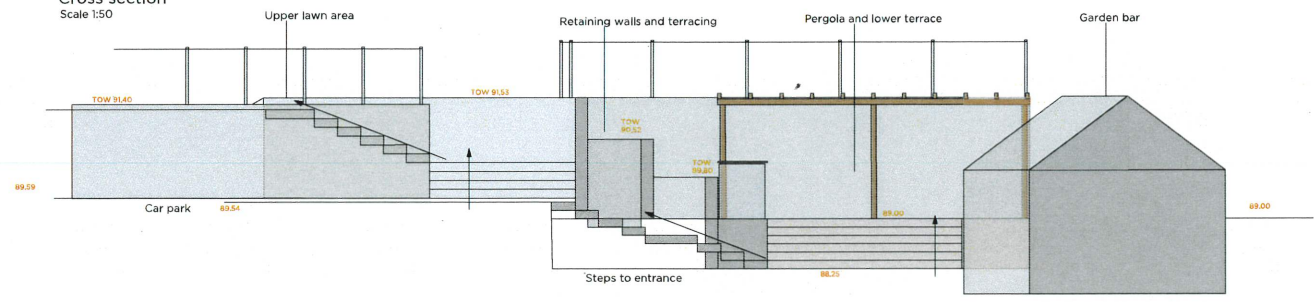


All images are used for illustration purposes only and are to convey the concept and vision for the project. They are for guidance only and may alter as work progresses

- Alcohol consumption area
- Licensable Activity
- Stairs



Cross section
Scale 1:50



Scale 1:100 A1

Leaf Creative Gardens		Ross Road Huntley Glos GL19 3EX
Project Name Garden Design		
Client Name Ben & Amy Savidge	Client Address The Crown Lea HR9 7JZ	
Date 09/09/2024	Sheet Number 05	Sheet Title Revised ramp layout B
Revisions	Rev No A B	Rev Date 09/09/2024 09/09/2024