

* required information

Section 1 of 9				
You can save the form at any time and resume it later. You do not need to be logged in when you resume.				
System reference	Not Currently In Use This is the unique reference for this application generated by the syste			
Your reference		You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.		
Are you an agent acting on be	half of the applicant?	Put "no" if you are applying on your own behalf or on behalf of a business you own or		
⊖ Yes ⊙ N	lo	work for.		
Applicant Details				
* First name	Laura			
* Family name	Poli			
* E-mail				
Main telephone number		Include country code.		
Other telephone number				
Indicate here if you would prefer not to be contacted by telephone				
Are you:				
Applying as a business or organisation, including as a sole trader A sole trader is a business owned by one				
 Applying as an individual 		person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.		

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Your Address		
* Building number or name		
]
District		
* City or town		
County or administrative area		
* Postcode		
* Country		
Section 2 of 9		
APPLICATION DETAILS (See a	also guidance on completing the form, gener	ral notes and note 1)
Have you had any previous or	maiden names?	
• Yes	⊖ No	
Enter details of any previous n	ames o	
Family name]
	Add another previous name]
* Your date of birth	dd mm yyyy	Applicant must be 18 years of age or older
National Insurance number		This box need not be completed if you are an individual not liable to pay UK national insurance.
Place of birth		

Continued from previous page		
Correspondence Address		
Is the address the same as (or similar to) the address given in section one?		If "Yes" is selected you can re-use the details
⊖ Yes	• No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
Building number or name	2/3	
Street	Rivergate Arcade	
District		
City or town	Peterborough	
County or administrative area	Cambridgeshire	
Postcode	PE1 1EL	
Country	United Kingdom	
Additional Contact Details		
Are the contact details the same	e as (or similar to) those given in section one?	If "Yes" is selected you can re-use the details
• Yes	⊖ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
E-mail		
Telephone number		
Other telephone number		
Section 3 of 9		
THE PREMISES		
activity at the premises describ Give the address of the premise		
* Does the premises have an ac	dress?	
Yes	⊖ No	

Continued from previous page		
Address	imilar to) the address given in section and?	15 "Marth is selected you are to use the details
Is the address the same as (or similar to) the address given in section one?		If "Yes" is selected you can re-use the details from section one, or amend them as
• Yes	○ No	required. Select "No" to enter a completely new set of details.
* Building number or name	Fratelli Tavola Calda]
* Street	2/3 Rivergate Arcade]
District]
* City or town	Peterborough]
County or administrative area]
* Postcode	PE1 1EL	
* Country	United Kingdom]
* Does a premises licence or clu to the premises (or any part of	ub premises certificate have effect in relation the premises)?	
O Neither	es licence O Club premises certificate	
* Premises licence number	045778]
Location Details		
* Provide further details about	the location of the event	
Restaurant/ delicatessen		
If you intend to use only part of the premises at this address or intend to restrict the area to which this notice applies, give a description and details below (see also guidance on completing the form, note 3)		
Within the premises only.		
Describe the nature of the prer	nises below (see also guidance on completing t	
Restaurant/delicatessen		
Describe the nature of the ever	nt below (see also guidance on completing the	<u>form, note 5)</u>
Allowing us to continue selling	g alcohol whilst new premises license is being a	ipplied for.

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Section 4 of 9		
LICENSABLE ACTIVITIES		
State the licensable activities that you intend to carry on at the premises (see also guidance on completing the form, note 6):		
The sale by retail of alcohol		
The supply of alcohol by or on behalf of a club to, or to the order of, a member of the club		
The provision of regulated entertainment	<u>(See also guidance on completing the form, note 7).</u>	
The provision of late night refreshment		
The giving of a late temporary event notice	Late notices can be given no later than 5 working days but no earlier than 9 working days before the event. (See also guidance on completing the form,	
Event Dates	<u>note 8).</u>	
There must be a period of at least 10 working days between the date you sub when you will be using these premises for licensable activities.	omit this form and the date of the earliest event	

State the dates on which you intend to use these premises for licensable activities

(see also guidance on completing the form, note 9)

Event start date	14 12 2023 dd mm yyyy	The maximum period for using premises for licensable activities under the authority of a temporary event notice is 168 hours or seven days.
Event end date	19 / 12 / 2023 dd mm yyyy	
State the times during the event period that you propose to carry on licensable activities (give times in 24 hour clock) (see also guidance on completing the form, note 10)	12:00 - 10:00	
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 (see also guidance on completing the form, note 11)	60	Note that the maximum number of people cannot exceed 499.

Continued from previous page
If the licensable activities will include the supply of alcohol, state whether the supplies will be for consumption on or off the premises, or both (see also guidance on completing the form, note 12):
On the premises only
 Off the premises only
O Both
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RELEVANT ENTERTAINMENT (See also guidance on completing the form, note 13)
State if the licensable activities will include the provision of relevant entertainment. If so, state the times during the event period that you propose to provide relevant entertainment
N/A
Section 6 of 9
PERSONAL LICENCE HOLDERS (See also guidance on completing the form, note 14)
Do you currently hold a valid personal licence?
Provide the details of your personal licence below.
Issuing licensing authority
Licence number
Date of issue
Any further relevant details
Section 7 of 9
PREVIOUS TEMPORARY EVENT NOTICES (See also guidance on completing the form, note 15)
Have you previously given a temporary event notice in respect of any premises for events falling in the same • Yes • No calendar year as the event for which you are now giving this temporary event notice?

Continued from previous page					State the number of 3 temporary event notices (including the number of late temporary event 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?	0	Yes	۲	No	
Section 8 of 9					
ASSOCIATES AND BUSINESS	COL	LEAGUES	(See also gu	dance	on completing the form, note 16)
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?	0	Yes	۲	No	
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?		Yes	۲	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?		Yes	۲	No	

Continued from previous page		
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?	⊙ Yes	
Section 9 of 9		
CONDITION <u>(See also guida</u>	nce on completing the form, note 18)	
•	rary event notice that where the relevant licensable activities described in Sections 4 and 5 Icohol that all such supplies are made by or under the authority of the premises user.	
This fee must be paid to the a	uthority. If you complete the application online, you must pay it by debit or credit card.	
This formality requires a fixed	fee of £21	
DECLARATION (See also gui	dance on completing the form, note 19)	
I have attached a COVID-19 s can be found in the councils	Secure Risk Assessment or a COVID-19 Safe Systems of Work. (Information relating to these website)	
* The information contained in	n this form is correct to the best of my knowledge and belief. I understand that it is an offence:	
	make a false statement in connection with this temporary event notice and that a person is an offence to a fine up to level 5 on the standard scale; and	
	d licensable activity to be carried on at any place and that a person is liable on conviction for ot exceeding £20,000, or to imprisonment for a term not exceeding six months, or to both	
Icking this box indica	tes you have read and understood the above declaration	
This section should be comple behalf of the applicant?"	eted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on	
* Full name		
* Capacity		
* Date	dd mm yyyy	
Add another signatory Once you're finished you need to do the following: 1. Save this form to your computer by clicking file/save as 2. Go back to https://www.gov.uk/apply-for-a-licence/temporary-event-notice/peterborough/apply-1 to upload this file and continue with your application.		
5 11	have all your supporting documentation to hand.	

OFFICE USE ONLY

Applicant reference number
ee paid
Payment provider reference
LMS Payment Reference
Payment status
Payment authorisation code
Payment authorisation date
Date and time submitted
Approval deadline
rror message
s Digitally signed
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