



**Hillingdon**  
**Application for a premises licence**  
**Licensing Act 2003**

For help contact  
[applicationsprocessingteam@hillington.gov.uk](mailto:applicationsprocessingteam@hillington.gov.uk)  
 Telephone: 01895 558170

\* required information

**Section 1 of 19**

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  This is the unique reference for this application generated by the system.

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 behalf of the applicant?

Yes  No

Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.

**Applicant Details**

First name

Family name

E-mail address

Main telephone number

Other telephone number

Indicate here if the applicant would prefer not to be contacted by telephone

Is the applicant:

Applying as a business or organisation, including as a sole trader  
 Applying as an individual

A sole trader is a business owned by one person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.

**Applicant Business**

Is the applicant's business registered in the UK with Companies House?  Yes  No

Registration number

Business name

If the applicant's business is registered, use its registered name.

VAT number

Put "none" if the applicant is not registered for VAT.

Legal status

Applicant's position in the business

Home country

The country where the applicant's headquarters are.

**Address**

Building number or name

Street

District

City or town

County or administrative

Postcode

Country

**Agent Details**

First name

Family name

E-mail address

Main telephone number

Other telephone number

Indicate here if you would prefer not to be contacted by telephone

Are you:

- An agent that is a business or organisation, including a sole trader
- A private individual acting as an agent

A sole trader is a business owned by one person without any special legal structure.

**Agent Business**

Is your business registered in the UK with Companies House?  Yes  No

Is your business registered outside the UK?  Yes  No

Business name

If your business is registered, use its registered name.

VAT number

Put "none" if you are not registered for VAT.

Legal status

Your position in the business

Home country

United Kingdom

The country where the headquarters of your business is located.

**Address**

Building number or name

11

Street

The Broadway

District

City or town

Woking

County or administrative

Postcode

GU21 5AP

Country

United Kingdom

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**PREMISES DETAILS**

I/we, as named in section 1, apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in section 2 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003.

**Premises Address**

Are you able to provide a postal address, OS map reference or description of the premises?

Address     OS map reference     Description

**Address**

Building number or name

The Orange Peel

Street

Field Heath Road

District

City or town

Uxbridge

County or administrative

Middlesex

Postcode

UB8 3NJ

Country

United Kingdom

**Contact Details**

Telephone number

Non-domestic rateable value of premises (£)

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**APPLICATION DETAILS**

In what capacity are you applying for the premises licence?

- An individual or individuals
- A limited company
- A partnership
- An unincorporated association
- A recognised club
- A charity
- The proprietor of an educational establishment
- A health service body
- A person who is registered under part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales
- A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England
- The chief officer of police of a police force in England and Wales
- Other (for example a statutory corporation)

**Confirm The Following**

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities
- I am making the application pursuant to a statutory function
- I am making the application pursuant to a function discharged by virtue of Her Majesty's prerogative

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**NON INDIVIDUAL APPLICANTS**

Provide name and registered address of applicant in full. Where appropriate give any registered number. In the case of a partnership or other joint venture (other than a body corporate), give the name and address of each party concerned.

**Non Individual Applicant's Name**

Name

**Details**

Registered number (where applicable)

Description of applicant (for example partnership, company, unincorporated association etc)

**Address**

Building number or name

Street

District

City or town

County or administrative

Postcode

Country

**Contact Details**

E-mail

Telephone number

Other telephone number

**Section 5 of 19**

**OPERATING SCHEDULE**

When do you want the premises licence to start?  /  /   
dd mm yyyy

If you wish the licence to be valid only for a limited period, when do you want it to end?  /  /   
dd mm yyyy

Provide a general description of the premises

For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place will be and its proximity to the premises.

Public House, restaurant, take-away, and catering services.

First Floor Level - meeting rooms/ VIP rooms only.

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

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**PROVISION OF PLAYS**

Will you be providing plays?

- 
- Yes
- 
- No

**Section 7 of 19****PROVISION OF FILMS**

Will you be providing films?

- 
- Yes
- 
- No

**Section 8 of 19****PROVISION OF INDOOR SPORTING EVENTS**

Will you be providing indoor sporting events?

- 
- Yes
- 
- No

**Section 9 of 19****PROVISION OF BOXING OR WRESTLING ENTERTAINMENTS**

Will you be providing boxing or wrestling entertainments?

- 
- Yes
- 
- No

**Section 10 of 19****PROVISION OF LIVE MUSIC**

Will you be providing live music?

- 
- Yes
- 
- No

**Section 11 of 19****PROVISION OF RECORDED MUSIC**

Will you be providing recorded music?

- 
- Yes
- 
- No

**Section 12 of 19****PROVISION OF PERFORMANCES OF DANCE**

Will you be providing performances of dance?

- 
- Yes
- 
- No

**Section 13 of 19****PROVISION OF ANYTHING OF A SIMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF DANCE**

Will you be providing anything similar to live music, recorded music or performances of dance?

- 
- Yes
- 
- No

**Section 14 of 19****LATE NIGHT REFRESHMENT**

Will you be providing late night refreshment?

- 
- Yes
- 
- No

**Standard Days And Timings**

MONDAY

Start

End

Give timings in 24 hour clock.  
(e.g., 16:00) and only give details for the  
days of the week when you intend the  
premises to be used for the activity.

Start

End

TUESDAY

Start

End

Start

End

WEDNESDAY

Start

End

Start

End

THURSDAY

Start

End

Start

End

FRIDAY

Start

End

Start

End

SATURDAY

Start

End

Start

End

SUNDAY

Start

End

Start

End

Will the provision of late night refreshment take place indoors or outdoors  
or both?

Indoors       Outdoors       Both

Where taking place in a building or other  
structure tick as appropriate. Indoors may  
include a tent.

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.

State any seasonal variations

For example (but not exclusively) where the activity will occur on additional days during the summer months.

Non-standard timings. Where the premises will be used for the supply of late night refreshments at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

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**SUPPLY OF ALCOHOL**

Will you be selling or supplying alcohol?

Yes  No

**Standard Days And Timings**

MONDAY

Start

End

Start

End

Give timings in 24 hour clock.  
(e.g., 16:00) and only give details for the  
days of the week when you intend the  
premises to be used for the activity.

TUESDAY

Start

End

Start

End

WEDNESDAY

Start

End

Start

End

THURSDAY

Start

End

Start

End

FRIDAY

Start

End

Start

End

SATURDAY

Start

End

Start

End

SUNDAY

Start

End

Start

End

Will the sale of alcohol be for consumption:

- On the premises     Off the premises     Both

If the sale of alcohol is for consumption on the premises select on, if the sale of alcohol is for consumption away from the premises select off. If the sale of alcohol is for consumption on the premises and away from the premises select both.

State any seasonal variations

For example (but not exclusively) where the activity will occur on additional days during the summer months.

Non-standard timings. Where the premises will be used for the supply of alcohol at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

**Name**

First name

Family name

**Address**

Building number or name

Street

District

City or town

County or administrative

Postcode

Country

Personal Licence number  
(if known)

Issuing licensing authority  
(if known)

### PROPOSED DESIGNATED PREMISES SUPERVISOR CONSENT

How will the consent form of the proposed designated premises supervisor be supplied to the authority?

- Electronically, by the proposed designated premises supervisor
- As an attachment to this application

Reference number for  
consent form (if known)

If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.

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#### ADULT ENTERTAINMENT

Highlight any adult entertainment or services, activities, or other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children

Give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups etc gambling machines etc.

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#### HOURS PREMISES ARE OPEN TO THE PUBLIC

##### Standard Days And Timings

MONDAY

Start

End

Start

End

Give timings in 24 hour clock. (e.g., 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.

TUESDAY

Start

End

Start

End

WEDNESDAY

Start

End

Start

End

THURSDAY

Start

End

Start

End

FRIDAY

Start 12:00

End 00:00

Start

End

SATURDAY

Start 12:00

End 00:00

Start

End

SUNDAY

Start 12:00

End 00:00

Start

End

State any seasonal variations

For example (but not exclusively) where the activity will occur on additional days during the summer months.

Non standard timings. Where you intend to use the premises to be open to the members and guests at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

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### LICENSING OBJECTIVES

Describe the steps you intend to take to promote the four licensing objectives:

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

List here steps you will take to promote all four licensing objectives together.

The Orange Peel is a family-orientated venue. Binge-drinking, disorderly conduct will not be tolerated or accepted.

The atmosphere, environment, and nature of the venue; will not allow binge-drinking, disorderly conduct to take place within the premises.

b) The prevention of crime and disorder

Illicit activities, disorderly behaviour, binge-drinking, unacceptable conduct/behaviour; will be reported to Police.

The Management Team will co-operate with the Police to carry out investigation, to discourage, prevent crime and anti-social behaviour.

Alcohol will not be served to drunk, disorderly persons.

Glasses, bottles will not be allowed to be taken out of the premises.

c) Public safety

Regularly updated & reviewed/improved fire-risk assessment, fire-escape strategy.  
Fire-escape routes & strategy on prominent display to patrons.  
Regularly updated & reviewed/improved risk assessment operations.  
Regularly updated & reviewed/improved 'Health and Safety' practice / strategy files.

d) The prevention of public nuisance

Doors and windows to be kept closed in the evenings and at night.  
Prominently displayed Notices which request Patrons to behave in quiet, respectable, gentlemanly/lady-like manner; within and around the premises; at all times.  
Glasses and bottles will not be permitted to be taken outside of the premises.

e) The protection of children from harm

Staff to be trained, to be aware of law relating to consumption of alcohol & tobacco by persons under the age of 18 (including prevention of alcohol purchasing by proxy).  
Persons under 18 years of age, attending premises to be accompanied by responsible adults.  
Persons of all ages to behave in respectable, gentlemanly/lady-like manner; within and around the premises; at all times.  
Glasses and bottles will not be permitted to be taken outside of the premises.

**Section 19 of 19**

**PAYMENT DETAILS**

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card. Premises' licence fees are determined by the non-domestic rateable value of the premises. To find out a premises' non-domestic rateable value, go to the Valuation Office Agency website at [http://www.voa.gov.uk/business\\_rates/index.htm](http://www.voa.gov.uk/business_rates/index.htm). For full details, refer to the 'Fees for Applications' webpage: <http://www.hillingdon.gov.uk/media.jsp?mediaid=22879&filetype=pdf>

Fee amount (£)

**ATTACHMENTS**

**AUTHORITY POSTAL ADDRESS**

**Address**

Building number or name   
Street   
District   
City or town   
County or administrative   
Postcode   
Country

**DECLARATION**

\* I/we understand 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.

Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

Full name

Capacity

Date (dd/mm/yyyy)

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 to upload this file and continue with your application.
- Don't forget to make sure you have all your supporting documentation to hand.

**IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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**

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