

## 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 SARAH WRIGHT  
(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	PLA0412
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## Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description FLYING HORSE 4 WATERFORD ROAD			
Post town	IPSWICH	Postcode	IP1 5NW
Telephone number at premises (if any)			
Non-domestic rateable value of premises	£3900		

## Part 2 – Applicant details

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

ADD DAYTIME INDOORS MUSIC RECORDED FROM 9AM DAILY → CLOSE  
ADD LIVE MUSIC OUTDOORS CUT OFF 8PM + NO HEAVY METAL  
ADD AN OUTSIDE BAR IN BEER GARDEN AREA  
EXTEND THE LICENCED AREAS TO SELL ALCOHOL TO INCLUDE  
BEER GARDEN + EXTEND TO COVER NEW FIELD TO CONSUME  
5 LIVE OUTDOOR MUSIC EVENTS PER YEAR → 11pm  
" " TO INCLUDE BEER GARDEN + FIELD, OUTDOOR  
BAR & MOBILE BAR IN FIELD.  
CHILDREN TO BE ALLOWED IN (BEER GARDEN) + FIELD  
ADD EXHIBITION OF FILMS INDOORS

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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#### 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 tick all that apply

- |                                                                                                                |                                     |
|----------------------------------------------------------------------------------------------------------------|-------------------------------------|
| a) plays (if ticking yes, fill in box A)                                                                       | <input checked="" type="checkbox"/> |
| b) films (if ticking yes, fill in box B)                                                                       | <input checked="" type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C)                                                      | <input checked="" 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 checked="" type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F)                                                              | <input checked="" 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)<br>(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

# B

<b>Films</b> Standard days and timings (please read guidance note 7)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish		Both	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 4) INDOOR ONLY.		
Tue					
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 5)		
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 6)		
Sat					
Sun					

C

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 7)			<b>Please give further details</b> (please read guidance note 4) INDOOR TV EVENTS ONLY
Day	Start	Finish	
Mon			
Tue			<b>State any seasonal variations for indoor sporting events</b> (please read guidance note 5)
Wed			
Thur			<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 6)
Fri			
Sat			
Sun			

E

Live music Standard days and timings (please read guidance note 7)			Will the performance of live music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors <u>I</u>	<input type="checkbox"/>
Day	Start	Finish		Outdoors <u>O</u>	<input type="checkbox"/>
Mon <u>I</u>	<del>12</del> <u>12</u>	<del>11.30</del> <u>8</u>	Please give further details here (please read guidance note 4) LIVE MUSIC OUTSIDE IN GOOD WEATHER. PLEASANT MUSIC - NOT HEAVY/LOW BASE. CUT 8PM FOR NEIGHBOURS INDOOR BANDS/MUSIC FROM LUNCATIME IE REQUIRED FOR PARTIES ETC WITH NOISE LOWERED FOR NEIGHBOURS		
BH <u>O</u>	12	8			
Tue <u>I</u>	12	11			
<u>O</u>	12	8			
Wed <u>I</u>	12	11	State any seasonal variations for the performance of live music (please read guidance note 5) 5 EVENTS REQUESTED FOR THE YEAR FOR EVENTS TICKET EVENT. LARGER CROWD 499. STAGE 21 MUSIC TIL 11PM. SUMMER/AUTUM/SPRING		
<u>O</u>	12	8			
Thur <u>I</u>	12	11			
<u>O</u>	12	8			
Fri <u>I</u>	12	11.30	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 6) AS ABOVE. 5 DATES. EASTER SATURDAY, MAY BANK HOLIDAY (AND) AUGUST BANK HOL, ANNIVERSARY DATE SAT NEAR NEAREST 20th SEPT + ONE OTHER.		
<u>O</u>	12	8			
Sat <u>I</u>	12	11.30			
<u>O</u>	12	8			
Sun <u>I</u>	12	10			
<u>O</u>	12	8			

F

<b>Recorded music</b> Standard days and timings (please read guidance note 7)			<b>Will the playing of recorded music take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	
			Indoors	<input checked="" type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 4) RADIO 1sky / ALEXA all day inside BACKGROUND MUSIC	
Mon	9 AM	11 PM		
Tue	9 AM	11 PM	<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 5)	
Wed	9 AM	11 PM		
Thur	9 AM	11 PM	<b>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</b> (please read guidance note 6)	
Fri	9 AM	11 PM		
Sat	9 AM	11 PM		
Sun	9 AM	10 PM		



J

TIMINGS FOR OUTSIDE BAR (IN ADDITION TO CURRENT

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b>Will the supply of alcohol be for consumption</b> - <u>please tick</u> (please read guidance note 8)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
Day	Start	Finish		Both	<input checked="" type="checkbox"/>
Mon 3H	12	20:00	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5) OUTSIDE BAR IN GOOD WEATHER ONLY & ONLY FRI/SAT/SUN AND BANK HOLIDAYS MONAYS ONLY.		
Tue					
Wed					
Thur			<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 6) CLOSED/SEALED ALCOHOL CAN BE PURCHASED TO TAKE HOME. 5 EVENTS PER YEAR (BANK HOLIDAYS) MOBILE BAR ON THE FIELD FROM 1200-2300		
Fri					
	18:00	22:00			
Sat	12:00	22:00			
Sun	12:00	19:00			

 LICENSED  
 TIMINGS  
 11:00 AM  
 01:00 AM

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 9).

NOTHING



L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5) NEW YEARS EVE → 1AM (CURRENTLY LICENCED TIL 1AM DAILY) CAN KEEP THIS IF OK.
Day	Start	Finish	
Mon	11	2300	Non standard timings. 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 6)
Tue	11	2300	
Wed	11	2300	
Thur	11	2300	
Fri	11	1-AM	
Sat	11	1AM	
Sun	11	10pm	
	11	22-00	

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

REMOVE OUTDOOR MUSIC RESTRICTION

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 10)**

UNDER 25 POLICY ENFORCED + SIGNAGE  
CHILDREN TO LEAVE BY 10PM  
ANTI DRUG SIGNS UP EVERYWHERE + LIQUID ON SURFACES  
CCTV  
ANGELA

**b) The prevention of crime and disorder**

CCTV EVERYWHERE  
STAFF TRAINING  
ANTI DRUG POLICY + ZERO TOLERANCE  
ZERO TOLERANCE OF BAD BEHAVIOUR  
NO KNIVES ETC.  
TICKET SALES FOR LARGE EVENTS  
Bouncers + SECURITY  
FOR LARGE/BUSY EVENTS

**c) Public safety**

ZERO TOLERANCE OF VIOLENCE/VERBAL ABUSE/DRUGS  
LIMITED DRINK/STOP SERVING IF TOO DRUNK  
NO KNIVES/GUNS ETC  
DOGS ON LEADS  
100% STICKING TO LICENCE RULES  
ASK ANGELA  
TICKET SALES  
BOUNCERS FOR LARGE EVENTS

**d) The prevention of public nuisance**

STOP SERVING DRINK IF TOO DRUNK  
ZERO TOLERANCE OF VIOLENCE/VERBAL ABUSE  
NOT USING GARDEN AFTER 11  
QUIET WHEN LEAVE PREMISES  
KEEPING NOISE OF MUSIC LOWER  
BOUNCERS + SECURITY  
TICKET SALES

**e) The protection of children from harm**

I HAVE A CHILDCARE BUSINESS SO I AM SAFEGUARD TRAINED, AS ARE MOST STAFF.  
CHILDREN SUPERVISED BY AN ADULT OVER 18 AT ALL TIMES  
UNDER 25 POLICY ENFORCED  
NO CHILDREN AT BAR/SERVED AT ALL  
CHILDREN TO LEAVE BY 10PM.  
CHILD SAFETY TOP PRIORITY  
TICKET SALES

**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, 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.**

**Part 5 – Signatures** (please read guidance note 11)

**Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly  
authorised agent (please read guidance note 12). If signing on behalf of the applicant, please  
state in what capacity.**

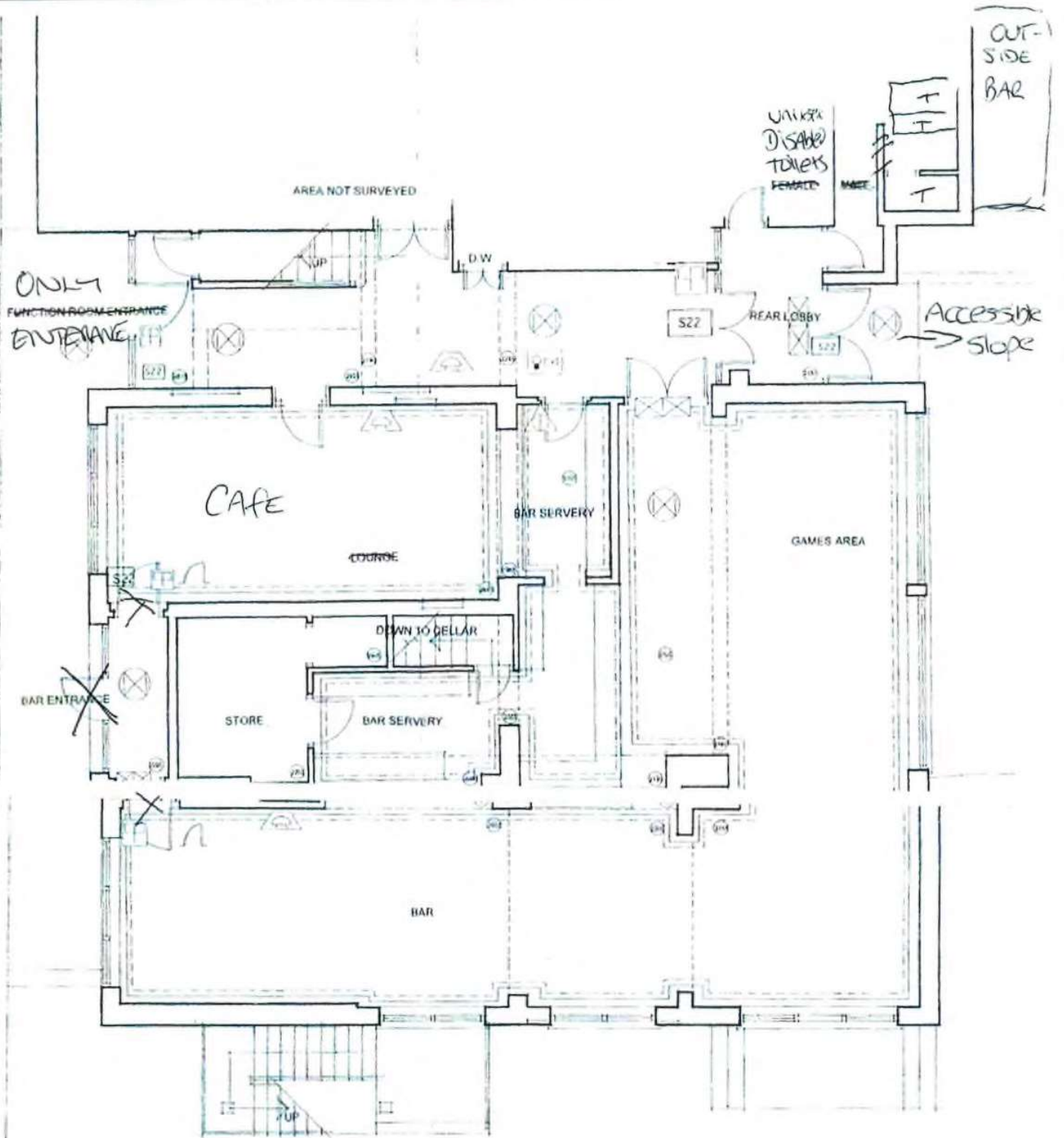
Signature	
Date	8-3-2025
Capacity	240 INSIDE BUILDING + 499 OUTSIDE

**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  
13). 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 14)**

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)			



OR PLAN AS EXISTING

