

Ends 10th Oct

Bodicote House • Bodicote • Banbury • Oxfordshire • OX15 4AA  
Telephone **01295 252535**  
Textphone 01295 221572  
DX 24224 (Banbury)  
<http://www.cherwell.gov.uk>

RECEIVED

12 SEP 2011

Cherwell  
paid

## Application for a premises licence to be granted 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.

**JOHN PAUL II CENTRE, CAUSEWAY BICESTER**  
I/We ..... apply for a premises licence under section 17  
of **PARISH OF THE IMMACULATE CONCEPTION**  
(Insert name(s) of applicant) **CAUSEWAY BICESTER**  
the Licensing Act 2003 for the premises described in Part 1 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

#### Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description <b>JOHN PAUL II CENTRE</b> <b>PARISH CENTRE</b> <b>CAUSEWAY</b>	
Post town <b>BICESTER</b>	Post code <b>OX26 6AW</b>
Telephone number at premises (if any)	<b>01869 253277</b>
Non-domestic rateable value of premises	£ <b>0-00</b>

**Part 2 - Applicant details**

Please state whether you are applying for a premises licence as

- |    |  | Please tick ✓ yes   |
|----|--|---|
| a) | an individual or individuals*  | <input type="checkbox"/> please complete section (A)            |
| b) | a person other than an individual*   |   |
|    | i. as a limited company  | <input type="checkbox"/> please complete section (B)            |
|    | ii. as a partnership   | <input type="checkbox"/> please complete section (B)            |
|    | iii. as an unincorporated association or   | <input type="checkbox"/> please complete section (B)            |
|    | iv. other (for example a statutory corporation)  | <input type="checkbox"/> please complete section (B)            |
| c) | a recognised club  | <input type="checkbox"/> please complete section (B)            |
| d) | a charity  | <input checked="" type="checkbox"/> please complete section (B) |
| e) | the proprietor of an educational establishment   | <input type="checkbox"/> please complete section (B)            |
| f) | a health service body  | <input type="checkbox"/> 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 | <input type="checkbox"/> please complete section (B)            |
| h) | the chief officer of police of a police force in England and Wales   | <input type="checkbox"/> please complete section (B)            |

\*If you are applying as a person described in (a) or (b) please confirm:

- |   |   | Please tick ✓ yes        |
|---|---|--------------------------|
| • | I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or | <input type="checkbox"/> |
| • | I am making the application pursuant to a   |                          |
|   | ○ statutory function  | <input type="checkbox"/> |
|   | ○ a function discharged by virtue of Her Majesty's prerogative  | <input type="checkbox"/> |

*Page 3 removed as N/A*

Daytime contact telephone number

01869 253 277

E-mail address  
(optional)

Admin@IMMACULATE-CONCEPTION.ORG.UK.

**(B) OTHER APPLICANTS**

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

Name
JOHN PAUL II CENTRE.
Address
CAUSEWAY BICESTER OXFORDSHIRE OX26 6AW
Registered number (where applicable)
234216

Description of applicant (for example partnership, company, unincorporated association etc)
CHARITY
Telephone number (if any)
01869 253 277
E-mail address (optional)

**Part 3 – Operating Schedule**

When do you want the premises licence to start?

Day	Month	Year
0	8	09 2011

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

Day	Month	Year

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

—
---

Please give a general description of the premises (please read guidance note 1)

A. TWO STORY ANNEXE, ADJOINING THE CHURCH. THE MAIN USES WOULD BE FOR PARISH ACTIVITIES AND MEETINGS AND RECREATIONAL FACILITIES FOR THE LOCAL COMMUNITY. THE BUILDING CONSISTS OF APPROX 20 ROOMS, WHICH INCLUDE OFFICES, 2 KITCHENS, MAIN HALL, MEETING ROOM, BAR, COOL ROOM, TOILETS; DISABLED TOILETS.

THE ENTRANCE HALL, MAIN HALL ON THE GROUND FLOOR AND THE MEETING ROOM AND LOBBY ON THE FIRST FLOOR, AS WELL AS AN ENCLOSED GARDEN TO THE SIDE OF THE CENTER WILL BE USED FOR THE SALE AND CONSUMPTION OF ALCOHOL.

THE OFFICE'S ON THE GROUND FLOOR AND FIRST FLOOR WILL BE USED FOR ADMIN.

THE KITCHENS ON FIRST & GROUND FLOOR FOR PREP. OF FOOD.

What licensable activities do you intend to carry on from the premises?  
 (Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Please tick ✓ 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 for:**

- 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)

**Supply of alcohol** (if ticking yes, fill in box M)

**In all cases complete boxes N, O and P**

# A

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon	09-00	24-00	Please give further details here (please read guidance note 3). MIXED AUDIENCE	Both	✓
Tue	09-00	24-00			
Wed	09-00	24-00	State any seasonal variations for performing plays (please read guidance note 4)		
Thur	09-00	24-00			
Fri	09-00	24-00	Non standard timings. Where you intend to use the premises for the performance of a play at different times from those listed in the column on the left, please list (please read guidance note 5)		
Sat	09-00	24-00			
Sun	09-00	24-00			

# B

Films Standard days and timings (please read guidance note 6)			Will the exhibition of films take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	✓
Day	Start	Finish		Outdoors	
Mon	09-00	24-00	Please give further details here (please read guidance note 3). MIXED AUDIENCE		
Tue	09-00	24-00			
Wed	09-00	24-00	State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur	09-00	24-00			
Fri	09-00	24-00	Non standard timings. Where you intend to use the premises for the exhibition of film at different times from those listed in the column on the left, please list (please read guidance note 5)		
Sat	09-00	24-00			
Sun	09-00	24-00			

✓

✱

5

# C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details here (please read guidance note 3)  CLASSES FOR SPORTS, YOGA, MARTIAL ARTS, FITNESS GROUPS.
Day	Start	Finish	
Mon	09.00	24.00	State any seasonal variations for indoor sporting events (please read guidance note 4)  Non standard timings. Where you intend to use the premises for indoor sporting events at different times from those listed in the column on the left, please list (please read guidance note 5)
Tue	09.00	24.00	
Wed	09.00	24.00	
Thur	09.00	24.00	
Fri	09.00	24.00	
Sat	09.00	24.00	
Sun	09.00	24.00	



S

Page 10  
removed  
as N/A



# E

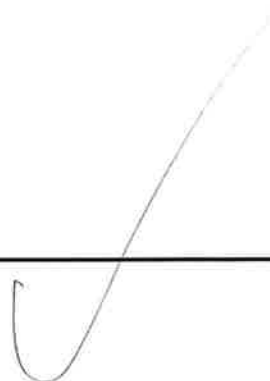
Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	✓
				Outdoors	
				Both	
Day	Start	Finish			
Mon	09-00	24-00	Please give further details here (please read guidance note 3). GROUPS AND BANDS FOR WEDDINGS AND PARTIES		
Tue	09-00	24-00			
Wed	09-00	24-00	State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur	09-00	24-00			
Fri	09-00	02-00	Non standard timings. Where you intend to use the premises for the performance of live music at different times from those listed in the column on the left, please list (please read guidance note 5)		
Sat	09-00	02-00			
Sun	09-00	24-00			



SL

# F

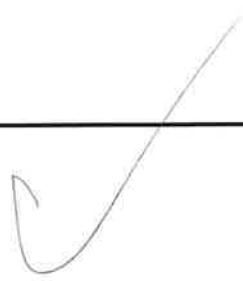
Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	✓
Day	Start	Finish		Outdoors	
Mon	09-00	24-00	Please give further details here (please read guidance note 3). D.J. / SOUND SYSTEM.	Both	
Tue	09-00	24-00			
Wed	09-00	24-00	State any seasonal variations for playing recorded music (please read guidance note 4)		
Thur	09-00	24-00			
Fri	09-00	02-00	Non standard timings. Where you intend to use the premises for the playing of recorded music at different times from those listed in the column on the left, please list (please read guidance note 5)		
Sat	09-00	02-00			
Sun	09-00	24-00			



52

# G

Performance of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3). <b>THERE IS NO STAGE.</b> <b>DANCING FOR ENJOYMENT AT A</b> <b>WEDDING OR A PARTY OR FITNESS</b> <b>CLASS.</b>  State any seasonal variations for the performance of dance (please read guidance note 4)  Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times from those listed in the column on the left, please list (please read guidance note 5)		
Mon	09-00	24-00			
Tue	09-00	24-00			
Wed	09-00	24-00			
Thur	09-00	24-00			
Fri	09-00	02-00			
Sat	09-00	02-00			
Sun	09-00	24-00			



*SD*  
*52*

# H

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)			<b>Please give a description of the type of entertainment you will be providing</b> MUSIC THAT WOULD PROVIDE ENTERTAINMENT AT A FUNCTION		
Day	Start	Finish	<b>Will this entertainment take place indoors or outdoors or both – please tick ✓</b> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Mon	09-00	24-00	<b>Please give further details here</b> (please read guidance note 3).	Both	<input type="checkbox"/>
Tue	09-00	24-00			
Wed	09-00	24-00	<b>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</b> (please read guidance note 4)		
Thur	09-00	24-00			
Fri	09-00	02-00	<b>Non standard timings. Where you intend to use the premises for entertainment at different times from those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat	09-00	02-00			
Sun	09-00	24-00			

✓  
52

Provision of facilities for making music Standard days and timings (please read guidance note 6)			Please give a description of the type of facilities for making music you will be providing		
			MUSIC, BANDS, D.J. KARAOKE.		
Day	Start	Finish	Will the facilities for making music be indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon	09-00	24-00	Please give further details here (please read guidance note 3). AMPLIFIED MUSIC / NOT AMPLIFIED		
Tue	09-00	24-00			
Wed	09-00	24-00	State any seasonal variations for the provision of facilities for making music (please read guidance note 4)		
Thur	09-00	24-00			
Fri	09-00	02-00	Non standard timings. Where you intend to use the premises for the provision of facilities for making music entertainment at different times from those listed in the column on the left, please list (please read guidance note 5)		
Sat	09-00	02-00			
Sun	09-00	24-00			

A large handwritten checkmark is drawn below the table. To the right of the checkmark, there is a handwritten signature or initials, possibly 'S2'.

J

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			Please give a description of the type of facilities for dancing that you will be providing		
			DANCE AREA WILL DEPEND ON THE SIZE OF EVENT TAKING PLACE.		
Day	Start	Finish	Will the facilities for dancing be indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon	09-00	24-00	Please give further details here (please read guidance note 3). BOTH.		
Tue	09-00	24-00			
Wed	09-00	24-00	State any seasonal variations for providing dancing facilities (please read guidance note 4)		
Thur	09-00	24-00			
Fri	09-00	02-00	Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times from those listed in the column on the left, please list (please read guidance note 5)		
Sat	09-00	02-00			
Sun	09-00	24-00			

*[Handwritten signature]*

# K

Provision of facilities for entertainment of a similar description to that falling within (i) or (j) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment facility you will be providing <i>MUSIC FOR ENJOYMENT.</i>		
Day	Start	Finish	Will the entertainment facility be indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	✓
				Outdoors	
				Both	
Mon	<i>09-00</i>	<i>24-00</i>	Please give further details here (please read guidance note 3). <i>BOTH.</i>		
Tue	<i>09-00</i>	<i>24-00</i>			
Wed	<i>09-00</i>	<i>24-00</i>	State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling with (i) or (j) (please read guidance note 4)		
Thur	<i>09-00</i>	<i>24-00</i>			
Fri	<i>09-00</i>	<i>02-00</i>	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 5)		
Sat	<i>09-00</i>	<i>02-00</i>			
Sun	<i>09-00</i>	<i>24-00</i>			

*52*

L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both - please tick✓ (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	09-00	24-00	Please give further details here (please read guidance note 3). PROVISION OF FOOD FOR CONSUMPTION ON SITE FOR EG. LIGHT SNACKS.		
Tue	09-00	24-00			
Wed	09-00	24-00	State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Thur	09-00	24-00			
Fri	09-00	02-00	Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times from those listed in the column on the left, please list (please read guidance note 5)		
Sat	09-00	02-00			
Sun	09-00	24-00			

^  
only licensable from  
23.00



92



# M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption - please tick ✓ (please read guidance note 7)	On the premises	<input checked="" type="checkbox"/>
Day	Start	Finish		Off the premises	<input type="checkbox"/>
Mon	11-00	24-00	<b>State and seasonal variations for the supply of alcohol</b> (please read guidance note 4).	Both	<input type="checkbox"/>
Tue	11-00	24-00			
Wed	11-00	24-00			
Thur	11-00	24-00		<b>Non standard timings. Where you intend to use the premises for the supply of alcohol at different times from those listed in the column on the left, please list</b> (please read guidance note 5)	
Fri	11-00	02-00			
Sat	11-00	02-00			
Sun	11-00	24-00			

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

Name JOHN DAVID PRETORIUS

# 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 8)

THERE WILL BE NO ADULT ONLY TYPE OF ENTERTAINMENT OR GAMING MACHINES OF ANY KIND ON THE PREMISES AT ANY TIME.

O

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	08-00	01-00	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 (please read guidance note 5)
Tue	08-00	01-00	
Wed	08-00	01-00	
Thur	08-00	01-00	
Fri	08-00	02.30	
Sat	08-00	02-30	
Sun	08-00	01-00	

# P

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

a) General – all four licensing objectives (b, c, d, e) (please read guidance note 9)

STAFF TRAINING

b) The prevention of crime and disorder

A. ZERO TOLERANCE TO DRUGS.

c) Public safety

EMERGENCY LIGHTS  
FIRST AID PROVISION

d) The prevention of public nuisance

SOUND TO BE KEPT TO A REASONABLE LEVEL

e) The protection of children from harm

CHILDREN TO BE IN ADULT CARE OR WITH AN ADULT AT ALL TIMES

**CHECKLIST:**


Please tick ✓ yes

- I have made or enclosed payment of the fee
- I have enclosed the plan of the premises
- I have sent copies of this application and the plan to the responsible authorities and other where applicable
- I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable
- I understand that I must now advertise my application
- I understand that if I do not comply with the above requirements my application will be rejected

**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 4 – Signatures** (please read guidance note 10)

**Signature of applicant or applicant's solicitor or other duly authorised agent.** (See guidance note 11). **If signing on behalf of the applicant please state in what capacity**

Signature  .....

Date 08-09-11 .....

Capacity CENTER MANAGER .....

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

JOHN PRETORIUS

JOHN PAUL II CENTRE  
CAUSEWAY

Post town BICESTER

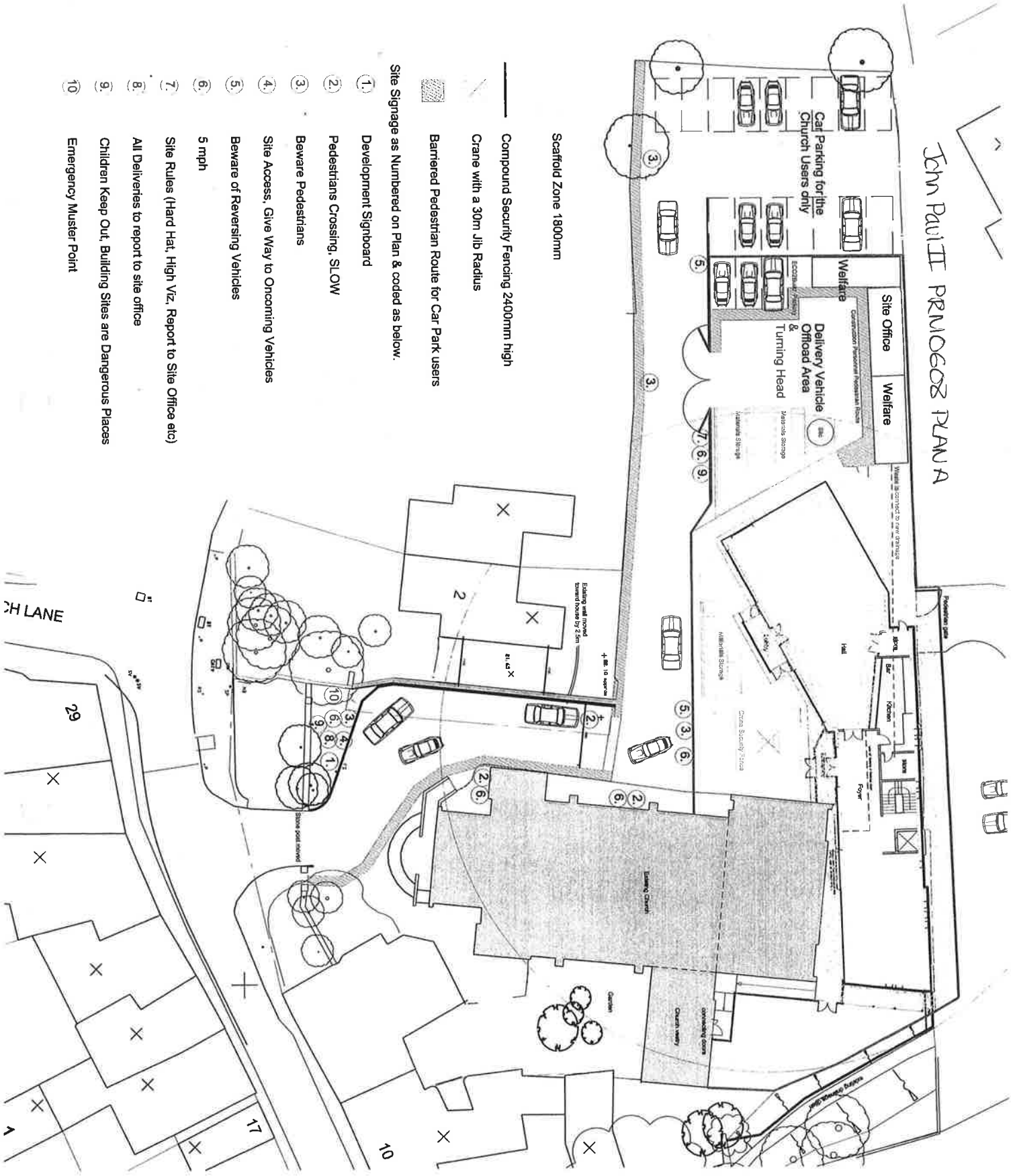
Post code OX26 6AW

Telephone number (if any) 01869 253277.

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

Admin@IMMACULATE-CONCEPTION.ORG.UK.

# Im Pui II PRIMEOS PLAN A



Scaffold Zone 1800mm

Compound Security Fencing 2400mm high

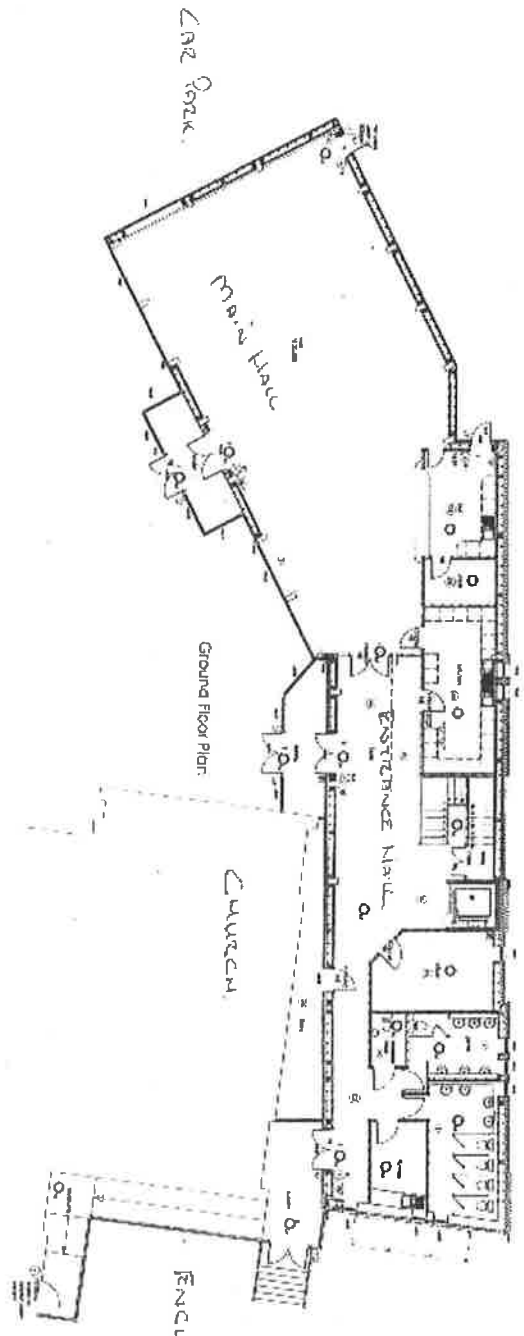
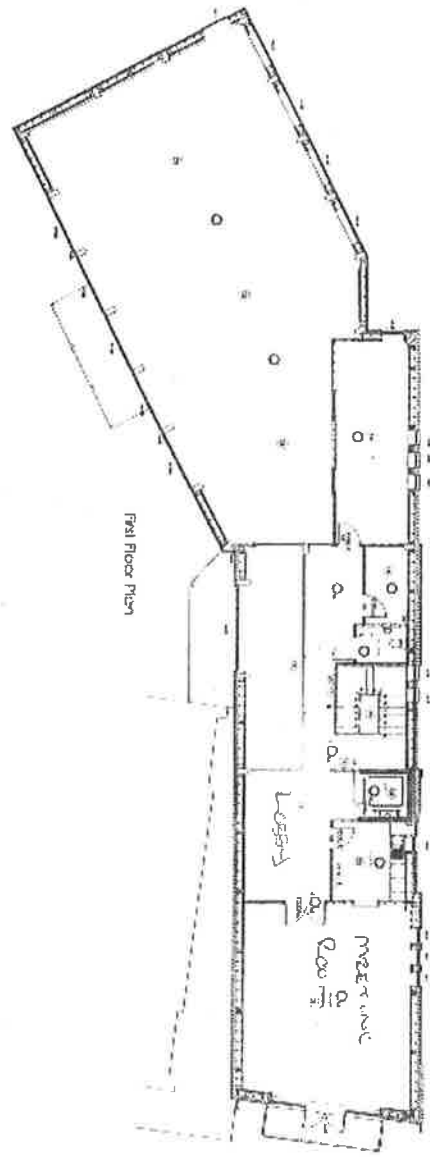
Crane with a 30m Jib Radius

Barriered Pedestrian Route for Car Park users

Site Signage as Numbered on Plan & coded as below.

- 1. Development Signboard
- 2. Pedestrians Crossing, SLOW
- 3. Beware Pedestrians
- 4. Site Access, Give Way to Oncoming Vehicles
- 5. Beware of Reversing Vehicles
- 6. 5 mph
- 7. Site Rules (Hard Hat, High Viz, Report to Site Office etc)
- 8. All Deliveries to report to site office
- 9. Children Keep Out, Building Sites are Dangerous Places
- 10. Emergency Muster Point

# John Paul II PRINCES PLANS



## Legend

- DH Hear detector
- DS Smoke detector
- CP Call point
- IP Indicator panel
- Vapour Beacon (rad)
- CO2 2kg carbon dioxide extinguisher.
- W Water extinguisher 13A rating
- Fire blanket 1.5sqm
- E Illuminated exit sign-maintained to BS 5499
- Emergency lighting non-maintained
- Emergency lighting maintained
- E Fire ext sign

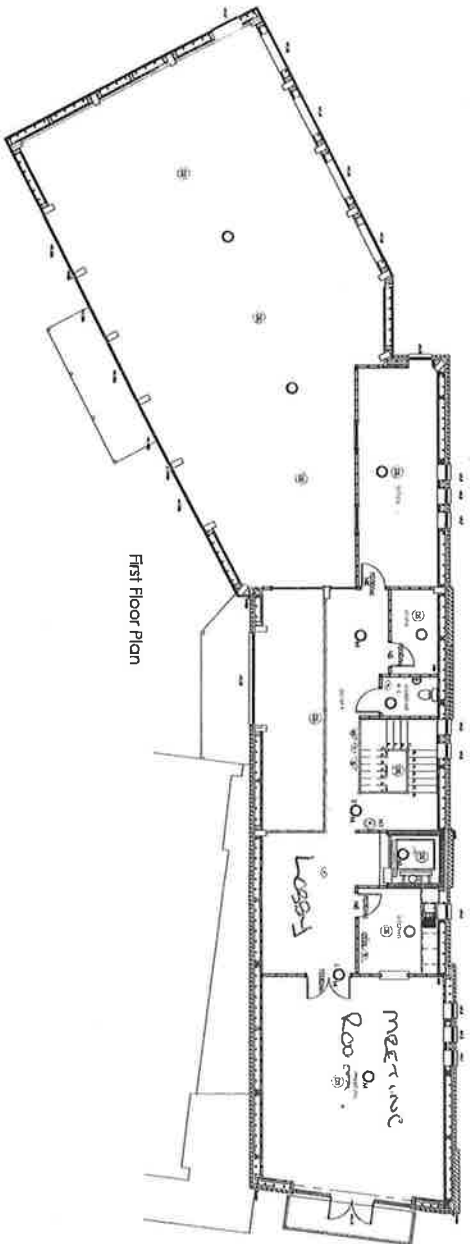
- Emergency light
- P8 Push door
- N1 General fire notice
- N5 Fire door keep locked
- N7 Fire escape keep clear
- N8 Fire door keep shut (to both sides all FD30 SCL)
- F Wet chemical F class extinguisher.

ENCLOSED GARDENS

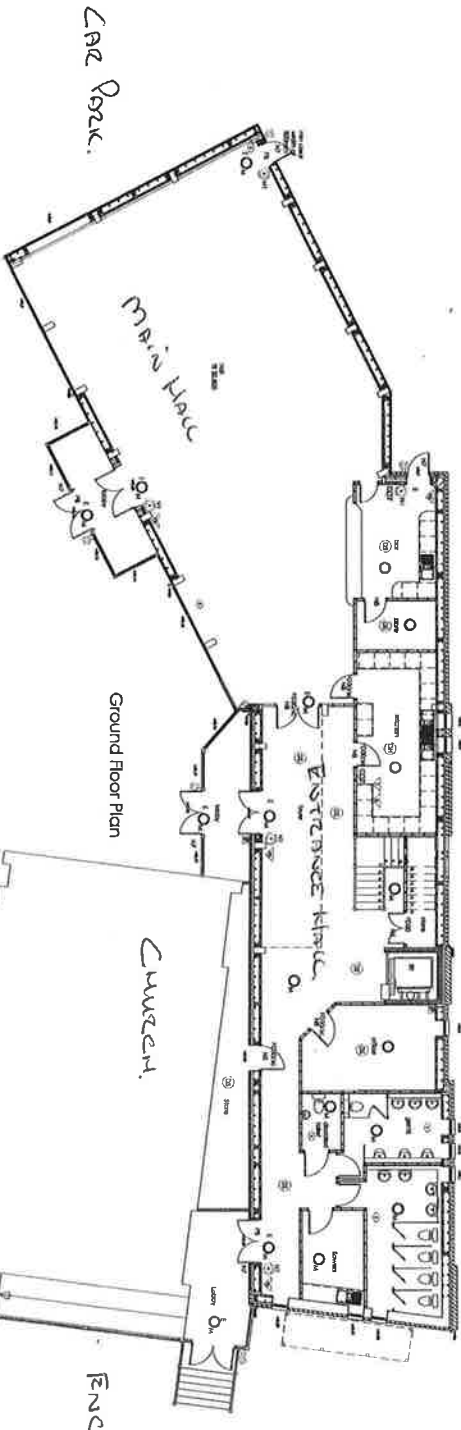
Key	Notes	Date
<b>ZIGGURAT</b>		
Project Lead: [Name]		
Project Engineer: [Name]		
DATE: [Date]		
SITE: [Location]		
PROJECT: [Project Name]		
TITLE: [Title]		
SCALE: 1:100		



# John Paul II PRMOSOS PLAN B.



First Floor Plan



Ground Floor Plan

Legend

①	New structure
②	Structural concrete
③	Steel frame
④	Car park
⑤	Window panel
⑥	Structural steel beam
⑦	Structural steel column
⑧	Structural steel truss
⑨	Structural steel joist
⑩	Structural steel beam
⑪	Structural steel column
⑫	Structural steel truss
⑬	Structural steel joist
⑭	Structural steel beam
⑮	Structural steel column
⑯	Structural steel truss
⑰	Structural steel joist
⑱	Structural steel beam
⑲	Structural steel column
⑳	Structural steel truss
㉑	Structural steel joist
㉒	Structural steel beam
㉓	Structural steel column
㉔	Structural steel truss
㉕	Structural steel joist
㉖	Structural steel beam
㉗	Structural steel column
㉘	Structural steel truss
㉙	Structural steel joist
㉚	Structural steel beam
㉛	Structural steel column
㉜	Structural steel truss
㉝	Structural steel joist
㉞	Structural steel beam
㉟	Structural steel column
㊱	Structural steel truss
㊲	Structural steel joist
㊳	Structural steel beam
㊴	Structural steel column
㊵	Structural steel truss
㊶	Structural steel joist
㊷	Structural steel beam
㊸	Structural steel column
㊹	Structural steel truss
㊺	Structural steel joist
㊻	Structural steel beam
㊼	Structural steel column
㊽	Structural steel truss
㊾	Structural steel joist
㊿	Structural steel beam

ENCLOSED GARDEN

Rev	Notes	Date
1		

**ZIGGURAT**  
 Architectural Dept.  
 01888 20201  
 www.ziggurat.co.uk

DATE: March 2011

SITE: The Church of the Immaculate Conception  
 The Charlemagne, Bicester

PROJECT: New Parish Centre

TITLE: Fire protection works

SCALE: 1:100 DWG: 1607/06A