



Babergh and Mid Suffolk District Councils
 Licensing Team
 Endeavour House
 8 Russell Road
 Ipswich
 IP1 2BX
 Phone Number: 0300 123 4000 Option 6
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BUSINESS AND PLANNING ACT 2020	APPLICATION FOR THE GRANT OF A PAVEMENT LICENCE
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(Please read the guidance notes at the end of this form when completing it)

SECTION 1: APPLICANT DETAILS (INDIVIDUAL APPLICANTS)		
Title: Mr	First name(s): Nicholas	Surname: Barnes
Postal Address: Crown Inn Hall Street Long Melford		
Post Town: Sudbury		Post Code: CO10 9JL
Phone (Home):		Phone (Mobile):
e-mail address: info@thecrownhotelmelford.co.uk		
Date of Birth:		NI number:

SECTION 2: APPLICANT DETAILS – OTHER APPLICANTS (eg companies)	
Name:	
Registered Address:	
Post Code:	
Phone (daytime):	Phone (Mobile):
e-mail address:	
Registered number (where applicable):	

SECTION 3 – BUSINESS PREMISES DETAILS	
Trading Name: ATTAP LTD, T/A The Crown Hotel	
Postal Address: Crown Inn, Hall Street, Long Melford, Sudbury, Suffolk.	
Post Code: CO10 9JL	

SECTION 4 – USE OF THE BUSINESS PREMISES	
Which of the following is the above business premises used for? (please select ONE of the following options)	
Use as a public house, wine bar or other drinking establishment	<input checked="" type="checkbox"/>
Other use for the sale of food or drink for consumption on or off the premises	<input type="checkbox"/>
Both of the above uses	<input type="checkbox"/>

SECTION 5 – AREA OF HIGHWAY PROPOSED TO BE USED
<p>Please provide a description of the area of the highway to which this application relates: (Please note you are also required to submit a scale plan of this area with your application)</p> <p>The application relates to the pavement immediately in front of the hotel on which there are three benches which have been there for the past 30 years. If the benches were removed, cars would use this area to park as there are no posts to prevent this activity and this would severely restrict use of the pavement for pedestrians using pushchairs, disability and mobility scooters. I would also prevent delivery of beer to our property as the access hatch to the cellar is on the pavement.</p>

SECTION 6 – RELEVANT PURPOSE THE APPLICATION RELATES TO:

Which of the following relevant purposes do you wish to put furniture on the highway for?
 (please select **ONE** of the following options)

To sell or serve food or drink supplied from, or in connection with relevant use of, the premises	<input type="checkbox"/>
For the purpose of consuming food or drink supplied from, or in connection with relevant use of, the premises	<input type="checkbox"/>
Both of the above purposes	<input checked="" type="checkbox"/>

SECTION 7: DAYS AND TIMES

During what times do you propose to place furniture on the highway on each of the following days:
 Please use the 24hr clock, e.g. 10:00 to 20:00.

	Mon	Tues	Wed	Thu	Fri	Sat	Sun
From	11:00	11:00	11:00	11:00	11:00	11:00	11:00
To	23:00	23:00	23:00	23:00	23:00	23:00	23:00

SECTION 8 – FURNITURE TO BE PLACED ON THE HIGHWAY

Please provide a description of the furniture you propose to place on the highway
 (Please note you are required to provide photographs or brochures of the proposed furniture with your application)

Wooden picnic benches x 3

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SECTION 9 – DATE OF APPLICATION

Please state the date that this application for a pavement licence is being submitted	17/03/2025
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SECTION 10 – CHECKLIST FOR DOCUMENTS TO INCLUDE WITH APPLICATION

Please note that your application will not be considered complete and the public consultation period of 14 days will not begin unless all of the following documents have been submitted with your application.

A plan showing the location of the premises shown by a red line, so the application site can be clearly identified	<input checked="" type="checkbox"/>
A plan clearly showing the proposed area covered by the licence in relation to the highway	<input checked="" type="checkbox"/>
Copy of current public liability insurance certificate	<input checked="" type="checkbox"/>
Photos or brochures showing the proposed type of furniture	<input checked="" type="checkbox"/>
Evidence of consent from neighbouring frontager(s) to use footway space outside their property (if applicable)	<input type="checkbox"/>
Fee required for 2 year licence - £500.00 for new application or £350.00 for renewal application	<input checked="" type="checkbox"/>

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SECTION 11 – DECLARATIONS BY APPLICANT

I understand that I am required to give notice of my application in accordance with the requirements of the Business and Planning Act 2020 and that failing to do so will lead to the revocation of any licence granted.

I understand I must hold and maintain public liability insurance up to a value of £5million.
I understand my application will not be considered to be complete until all the required documents and information have been provided and the application fee has been paid.
I understand that the application fee paid is non-refundable if my application is refused or if any licence granted is subsequently surrendered or revoked.
I understand that the Authority is under a duty to protect the public funds it administers, and to this end may use the information I have provided on this form for the prevention and detection of fraud. I understand that it may also share this information with other bodies responsible for auditing or administering public funds for these purposes.
I declare that the information given above is true to the best of my knowledge and that I have not wilfully omitted any necessary material. I understand that if there are any wilful omissions, or incorrect statements made, my application may be refused without further consideration or, if a licence has been issued, it may be liable to revocation.
I understand that the Authority is collecting my data for the purposes described on this form and will not be used for any other purpose, or passed on to any other body, except as required by law, without my consent.

Signature: _____

Print Name: _____

Date: 20/3/2025

Contact name (where not previously given) and postal address for correspondence associated with this application

Post town	_____	Postcode	_____
Telephone number (if any)	_____		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			