Signature of applicant	Date:	Interest in the premises:
	13th July 2026	**Owner**

Print name

Timothy Manners

Address for correspondence:

Wrag Barn Golf Club
Shrivenham Road
Highworth, SN6 7QQ
Contact telephone number: **01793 861327**

If applying on behalf of a company or other incorporated business please state position in company, address for correspondence, contact telephone number and email address.

1.	Full name of applicant.	**Timothy Manners (Owner)**	
2.	Private addresses of applicant. If the application is made by a limited company please give the address of the registered office and where different state also the main trading address of the Company.	**Wrag Barn Golf Club Shrivenham Road Highworth SN6 7QQ**	
3.	Name, postal address and telephone number of the premises which are the subject of this application.	**Wrag Barn Golf Club Shrivenham Road Highworth SN6 7QQ 01793 861327**	
4.	Please describe the nature of the premises at question 3 (e.g. hotel, stately home, civic accommodation).	**Golf Club**	
5.	Please describe primary and other uses to which it is regularly put.	**The primary use of the premises is a Golf Club with Bar and Restaurant facilities. The space is also used for functions such as Weddings, Wakes and Conferences.**	
6.	Is the person or company named in reply to question 1 the occupier of the premises?	**YES**	
7.	If the answer to question 6 above is 'No' and there is another occupier, please give their name(s) and address(es).		
8.	Please state here the maximum number of people permitted to	ROOM NAME	NUMBER OF PEOPLE PERMITTED

	occupy the room to be registered under any fire certificate or Fire Safety Risk Assessment which applies. Please attach a copy of any certificate, Assessment or Management procedures in force.	**Bellingham Room**	**85 Seated**
9.	Do the premises currently have the benefit of any licence authorising use for public entertainment or similar purposes? If so please attach a copy.	**We have a PPL/PRS for live and copyrighted music (Attached)**	