



**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.

I/We NATIONAL BOTANICAL GARDEN OF WALES
(Insert name(s) of applicant)

apply for a premises licence under section 17 of 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			
NATIONAL BOTANICAL GARDEN OF WALES MIDDLETON HALL. LLANARTHNE,			
Post town	CARMARTHEN.	Postcode	SA32 8HG
Telephone number at premises (if any)	01553 667147		
Non-domestic rateable value of premises	£ 46,500.		

Part 2 - Applicant details

Please state whether you are applying for a premises licence as Please tick as appropriate

- | | | |
|--|-------------------------------------|-----------------------------|
| a) an individual or individuals * | <input type="checkbox"/> | please complete section (A) |
| b) a person other than an individual * | | |
| i as a limited company/limited liability partnership | <input checked="" type="checkbox"/> | please complete section (B) |
| ii as a partnership (other than limited liability) | <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) |

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- c) a recognised club please complete section (B)
- d) a charity please complete section (B)
- e) the proprietor of an educational establishment please complete section (B)
- f) a health service body 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 in Wales please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England please complete section (B)
- h) the chief officer of police of a police force in England and Wales please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm (by ticking yes to one box below):

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

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
Date of birth		I am 18 years old or over <input type="checkbox"/>		Please tick yes <input type="checkbox"/>	
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

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Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
Date of birth		I am 18 years old or over		<input type="checkbox"/> Please tick yes	
Nationality					
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

(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	NATIONAL BOTANIC GARDEN OF WALES
Address	MIDDLETON HALL LLANWARTH NE LARDMARTHEN CATHY SA32 8HG.
Registered number (where applicable)	1036354.
Description of applicant (for example, partnership, company, unincorporated association etc.)	LIMITED COMPANY / CHARITY.
Telephone number (if any)	01558 667147.
E-mail address (optional)	CELLAN.WILLIAMS@GARDENOFWALES.ORG.UK

A4

Part 3 Operating Schedule

When do you want the premises licence to start?

DD MM YYYY
01 50 72 10 17

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

DD MM YYYY
| | | | | |

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

BOTANICAL GARDENS TOURIST ATTRACTION WHICH HAS OUTDOOR/INDOOR EVENTS WITH FOOD AND RETAIL OUTLETS WHICH WILL PROVIDE ON AND OFF SALES SUPPLY OF ALCOHOL - LAND TO BE LICENSED AS PER PLANS AND BUILDINGS WHERE PLANS HAVE BEEN PROVIDED.

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

[]

What licensable activities do you intend to carry on from the premises?

(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all that apply

- 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 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 MA

AS

Plays Standard days and timings (please read guidance note 7)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon	8.00	23.00			
Tue	8.00	23.00	<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Wed	8.00	23.00			
Thur	8.00	23.00	<u>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Fri	8.00	23.00			
Sat	8.00	23.00			
Sun	8.00	23.00			

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B

Films Standard days and timings (please read guidance note 7)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon	8.00	23.00			
Tue	8.00	23.00	State any seasonal variations for the exhibition of films (please read guidance note 5)		
Wed	8.00	23.00			
Thur	8.00	23.00	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 (please read guidance note 6)		
Fri	8.00	23.00			
Sat	8.00	23.00			
Sun	8.00	23.00			

Indoor sporting events Standard days and timings (please read guidance note 7)			Please give further details (please read guidance note 4)
Day	Start	Finish	
Mon	8.15	23.15	
Tue	8.15	23.15	State any seasonal variations for indoor sporting events (please read guidance note 5)
Wed	8.15	23.15	
Thur	8.15	23.15	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 (please read guidance note 6)
Fri	8.15	23.15	
Sat	8.15	23.15	
Sun	8.15	23.15	

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D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	8.00	23.00	Please give further details here (please read guidance note 4)	Both	<input checked="" type="checkbox"/>
Tue	8.00	23.00			
Wed	8.00	23.00	State any seasonal variations for boxing or wrestling entertainment (please read guidance note 5)		
Thur	8.00	23.00			
Fri	8.00	23.00	Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list (please read guidance note 6)		
Sat	8.00	23.00			
Sun	8.00	23.00			

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</u> – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon	8.00	01.00			
Tue	8.00	01.00			
Wed	8.00	01.00	<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)		
Thur	8.00	01.00			
Fri	8.00	01.00	<u>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</u> (please read guidance note 6)		
Sat	8.00	01.00			
Sun	8.00	01.00			

A10

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon	8.00	01.00			
Tue	8.00	01.00	State any seasonal variations for the playing of recorded music (please read guidance note 5)		
Wed	8.00	01.00			
Thur	8.00	01.00	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 (please read guidance note 6)		
Fri	8.00	01.00			
Sat	8.00	01.00			
Sun	8.00	01.00			

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place <u>indoors or outdoors or both</u> -- please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish	Both		
Mon	8.00	23.00	<u>Please give further details here</u> (please read guidance note 4)		
Tue	8.00	23.00			
Wed	8.00	23.00	<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)		
Thur	8.00	23.00			
Fri	8.00	22.00	<u>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat	8.00	23.00			
Sun	8.00	23.00			

A12

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)</p>			<p>Please give a description of the type of entertainment you will be providing</p>		
Day	Start	Finish	<p>Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)</p>	Indoors	<input type="checkbox"/>
Mon	8.00	23.00		Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Tue	8.00	23.00	<p>Please give further details here (please read guidance note 4)</p>		
Wed	8.00	23.00			
Thur	8.00	23.00	<p>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)</p>		
Fri	8.00	23.00			
Sat	8.00	23.00	<p>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list (please read guidance note 6)</p>		
Sun	8.00	23.00			

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon	23.00	01.00			
Tue	23.00	01.00	State any seasonal variations for the provision of late night refreshment (please read guidance note 5)		
Wed	23.00	01.00			
Thur	23.00	01.00	Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list (please read guidance note 6)		
Fri	23.00	01.00			
Sat	23.00	01.00			
Sun	23.00	01.00			

A14

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption - please tick (please read guidance note 8)	On the premises	<input type="checkbox"/>			
				Off the premises	<input type="checkbox"/>			
				Both	<input checked="" type="checkbox"/>			
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)					
Mon	8.00	01.00						
Tue	8.00	01.00						
Wed	8.00	01.00						
Thur	8.00	01.00				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 (please read guidance note 6)		
Fri	8.00	01.00						
Sat	8.00	01.00						
Sun	8.00	01.00						

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name	
Date of birth	
Address	21
Postcode	
Personal licence	
Issuing licensing	ILL OF EALING

K

ALS

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).

NONE.

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)
Day	Start	Finish	
Mon	00.00	06.00	<p>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)</p>
Tue	00.00	06.00	
Wed	00.00	06.00	
Thur	00.00	06.00	
Fri	06.00	00.00	
Sat	00.00	07.00	
Sun	00.00	06.00	

ALG

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

a) General - all four licensing objectives (b, c, d and e) (please read guidance note 10)

1. WKT SHOP HAS CLTV.
2. ADMISSION IS BY WATE, TICKET, INVITATION ONLY.
3. PHOTO OF FACE REQUIRED ON SALE OF ALCOHOL.

b) The prevention of crime and disorder

1. CLTV IN SHOP.
2. WE WILL RISK ASSESS DOOR SUPERVISORS USE FOR EVERY EVENT.

c) Public safety

1. ANY CONSUMPTION OR DRINKS OUTSIDE, PLASTIC GLASSES ARE USED.
2. LIAISON WITH BE ON DUTY FOR ALL MASCAR EVENTS.
3. ALL IN RADIO CONTACT.
4. ALL EVENTS IS RISK ASSESSED

d) The prevention of public nuisance

1. CAR PARK ATTENDANTS ON FOR LARGE EVENTS.
2. THE PREMISES IS ISOLATED SO WE DON'T CONTRIBUTE TO NOISE PROBLEMS WITH NOISE POLLUTION FROM ENTERTAINMENT.

e) The protection of children from harm

1. CHALLENGE 25 POLICY.
2. NO CHILDREN UNDER 16 ON THE PREMISES AFTER 22.00 HRS UNLESS PARENT OR A PRIVATE EVENT OR PUBLICATION.

Checklist:

Please tick to indicate agreement

A17

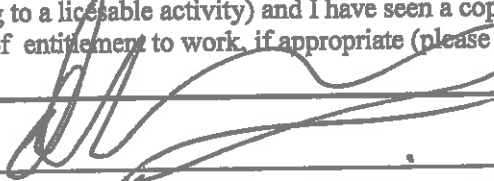
- I have made or enclosed payment of the fee.
- I have enclosed the plan of the premises.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, 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.
- [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15).

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

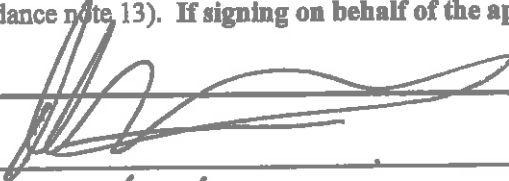
Part 4 – Signatures (please read guidance note 11)

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

Declaration	<ul style="list-style-type: none"> • [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15). • The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15)
Signature	
Date	5/7/17
Capacity	Designated Premises Supervisor

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For joint applications, signature of 2nd applicant 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	5/7/17
Capacity	DESIGNATED PREMISES SUPERVISOR

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)

CELEBRATION WILLIAMS
NATIONAL BOTANICAL GARDEN OF WALES
MIDDLETON HALL
LLANARMAITH.

Post town LLANARMAITH Postcode SA32 8HG

Telephone number (if any) 01552 667147.

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)
CELEBRATION.WILLIAMS@GARDEN.OF.WALES.NDRO.UK

Notes for Guidance

- Describe 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.
- In terms of specific regulated entertainments please note that:
 - Plays: no licence is required for performances between 08:00 and 23:00 on any day, provided that the audience does not exceed 500.
 - Films: no licence is required for 'not-for-profit' film exhibition held in community premises between 08.00 and 23.00 on any day provided that the audience does not exceed 500 and the organiser (a) gets consent to the screening from a person who is responsible for the premises; and (b) ensures that each such screening abides by age classification ratings.
 - Indoor sporting events: no licence is required for performances between 08.00 and 23.00 on any day, provided that the audience does not exceed 1000.
 - Boxing or Wrestling Entertainment: no licence is required for a contest, exhibition or display of Greco-Roman wrestling, or freestyle wrestling between 08.00 and 23.00 on any day, provided that the audience does not exceed 1000. Combined fighting sports – defined as a contest, exhibition or display which combines boxing or wrestling with one or more martial arts – are licensable as a boxing or wrestling entertainment rather than an indoor sporting event.
 - Live music: no licence permission is required for:
 - a performance of unamplified live music between 08.00 and 23.00 on any day, on any premises.
 - a performance of amplified live music between 08.00 and 23.00 on any day on premises authorised to sell alcohol for consumption on those premises, provided that the audience does not exceed 500.
 - a performance of amplified live music between 08.00 and 23.00 on any day, in a workplace that is not licensed to sell alcohol on those premises, provided that the audience does not exceed 500.
 - a performance of amplified live music between 08.00 and 23.00 on any day, in a church hall, village hall, community hall, or other similar community premises, that is not licensed by a premises licence to sell



A20



0 50 100 150m

Graddfa
Scale

1:5000

Canol y Map
Map Centre

[252153.9,217824.6]

Dyddiad
Date

15/08/2017

A21



15/08/2017

Dyddiad
Date

[252422.7,218449]

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A22



Dyddiad
Date

21/08/2017

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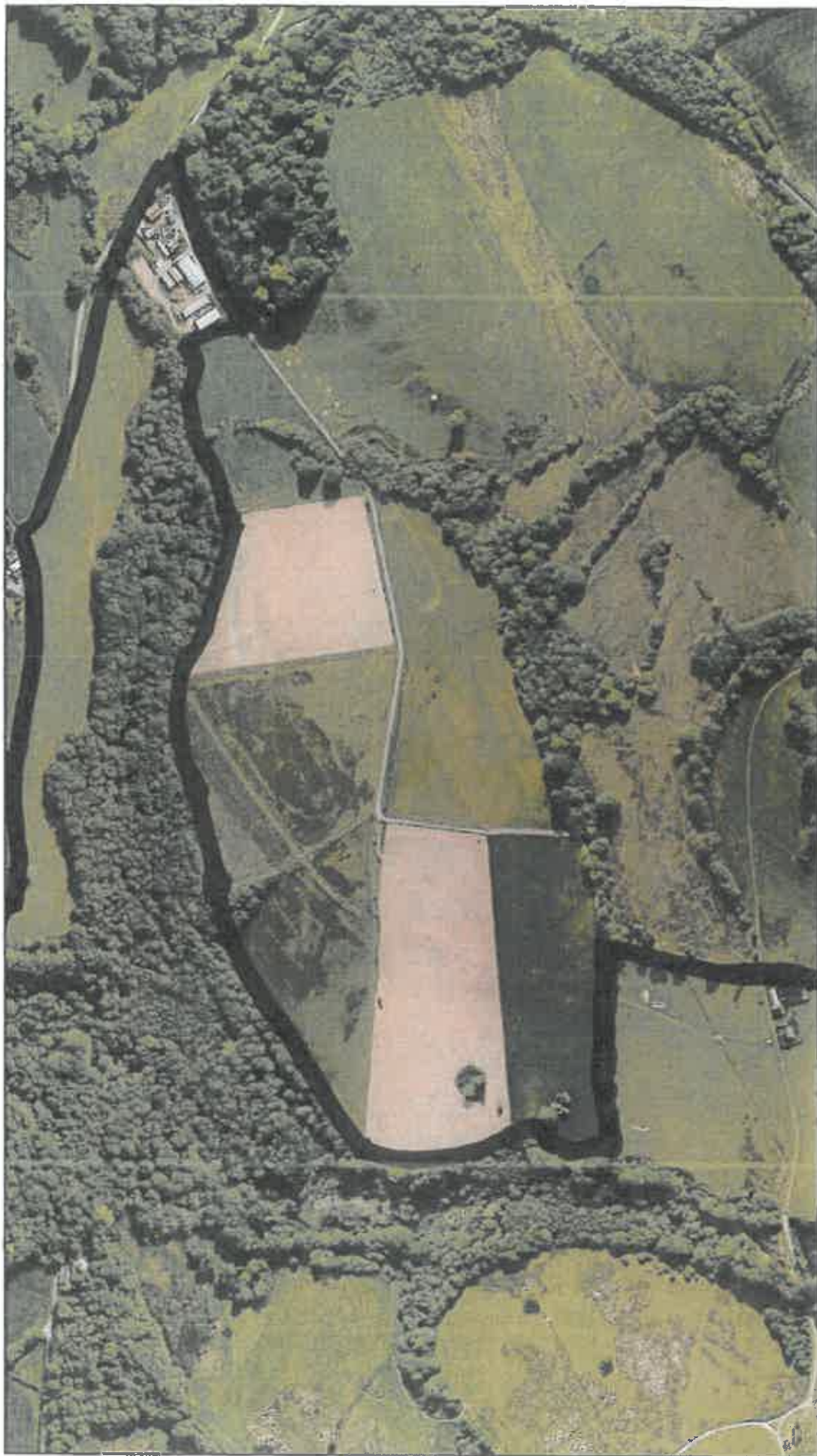
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1:7500



A23



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Scale

1:5000

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[252978.5,218436.4]

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Date

15/08/2017

A24

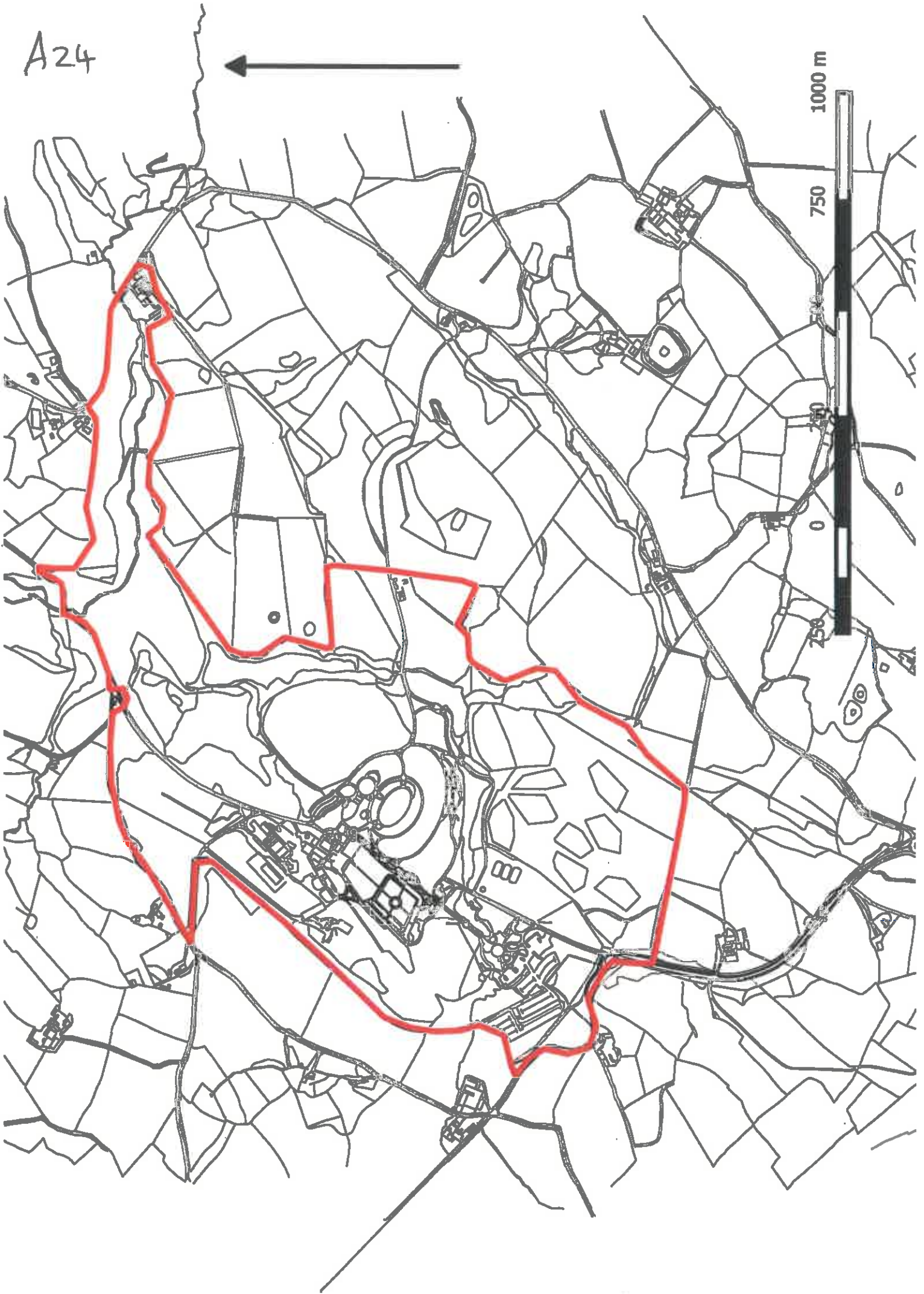


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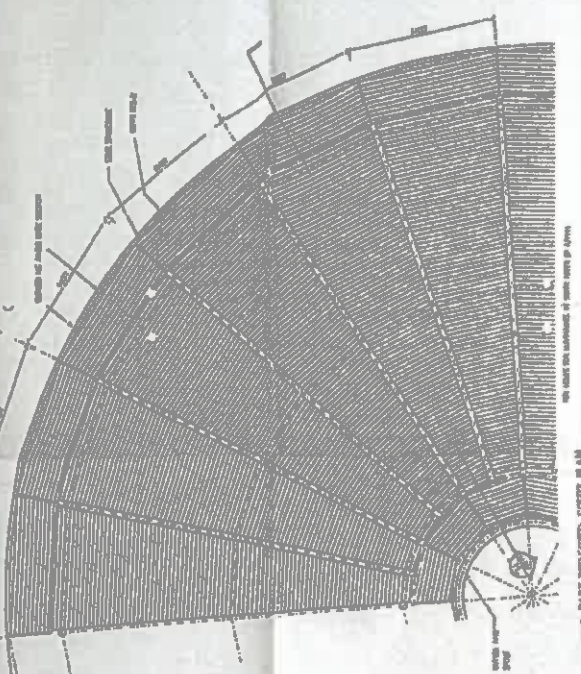




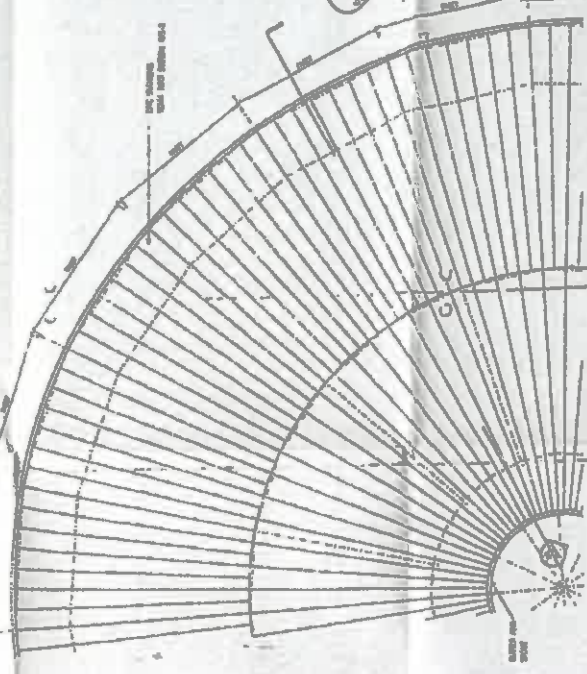
WAUN LAS NATIONAL NATURE RESERVE ENTRANCE

- 1 Gatehouse
- 2 Broadwalk
- 3 Garden Lakes - Fydd yr Awd
- 4 Garden Lakes - Llyn Uchaf
- 5 Garden Lakes - Llyn Canol
- 6 Welsh Water Discovery Centre
- 7 Back to Nature & Dipping Pond
- 8 Ice House
- 9 Scaladagwa Tonda
- 10 Circle of Delusions/The Hill
- 11 Rock of Ages
- 12 Whites' Pains Trees
- 13 Bog Garden
- 14 Japanese Garden
- 15 Bee Garden
- 16 Springwoods
- 17 Auricula Theatre
- 18 Double Walled Garden
- 19 Tropical House
- 20 Millennium Square
- 21 Stable Block, Restaurant, Shop and Gallery
- 22 Theatre Botanico
- 23 Welsh Rare Plants
- 24 Plants for Health Exhibition
- 25 Apothecaries Garden
- 26 Ty Myddfai, not open to the public
- 27 Living Machine
- 28 Nursery Glasshouses
- 29 Flapmuss Boiler
- 30 Welsh Country Walk
- 31 Roots & Shoots Adventure Zone
- 32 Mirror Pool
- 33 Wallace Garden
- 34 Boulder Garden
- 35 The Great Glasshouse
- 36 Conference Centre, not open to the public
- 37 5th Plan of Middleton Hall
- 38 Paston's View and Echo Spot
- 39 Wild Garden
- 40 Sixte Beds
- 41 Woods of the World
- 42 Plant Sales
- 43 Waun Las National Nature Reserve

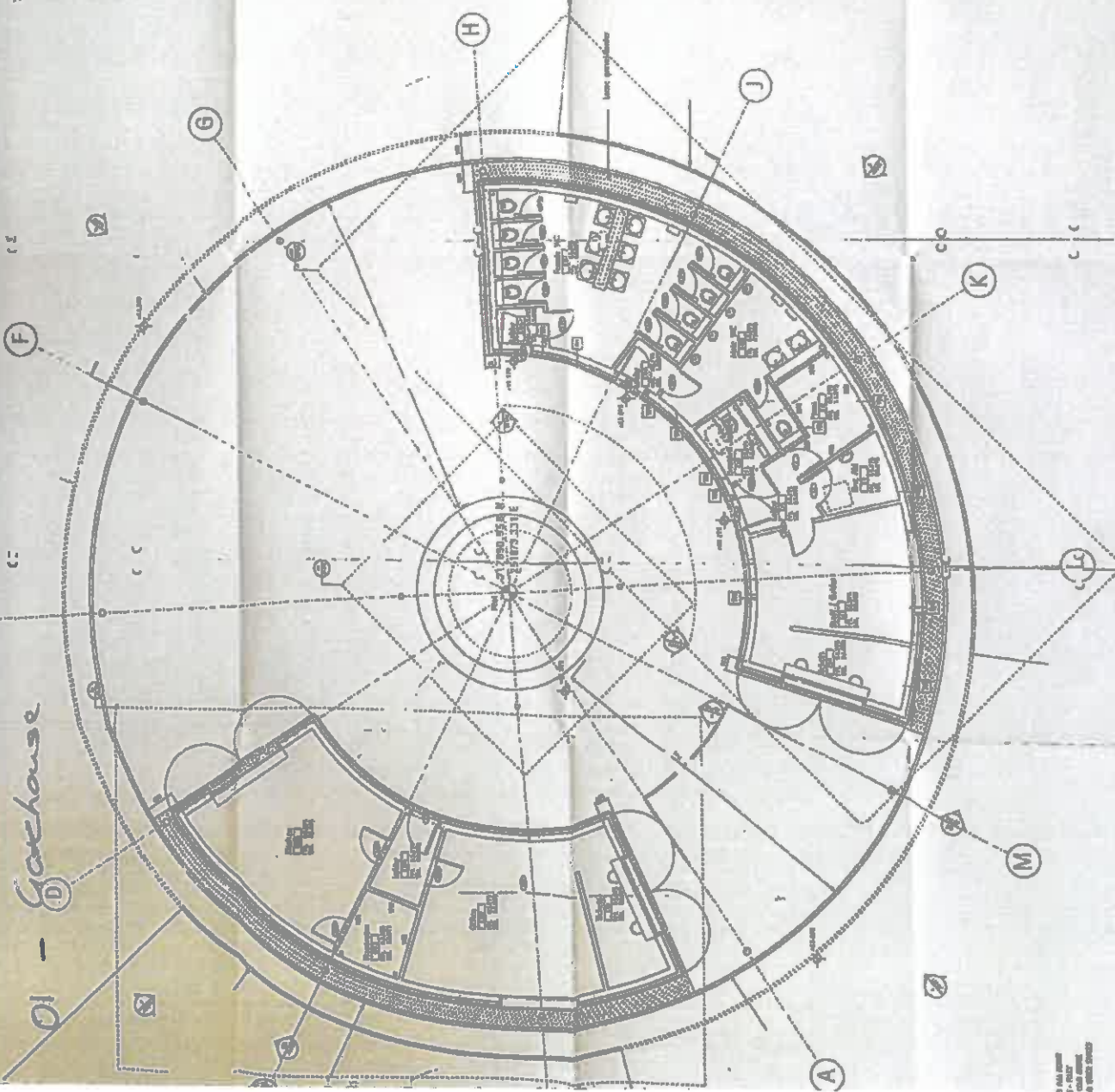
A26



02 PART REFLECTED SOFFIT PLAN



03 ROOF PLAN



01 - Gatehouse

AS BUILT

SCALE: 1/4" = 1'-0"
 APPROVED FOR CONSTRUCTION
 CONTRACT NO. 1110

Project	National Botanic Garden of Wales	Sheet	A1110
Client	The Gatehouse	Date	14.01.98
Author	ALL J E	Scale	1/4" = 1'-0"
Check		Scale	1/4" = 1'-0"
Drawn		Scale	1/4" = 1'-0"
Checked		Scale	1/4" = 1'-0"
Approved		Scale	1/4" = 1'-0"

Project
 National Botanic Garden of Wales
 The Gatehouse

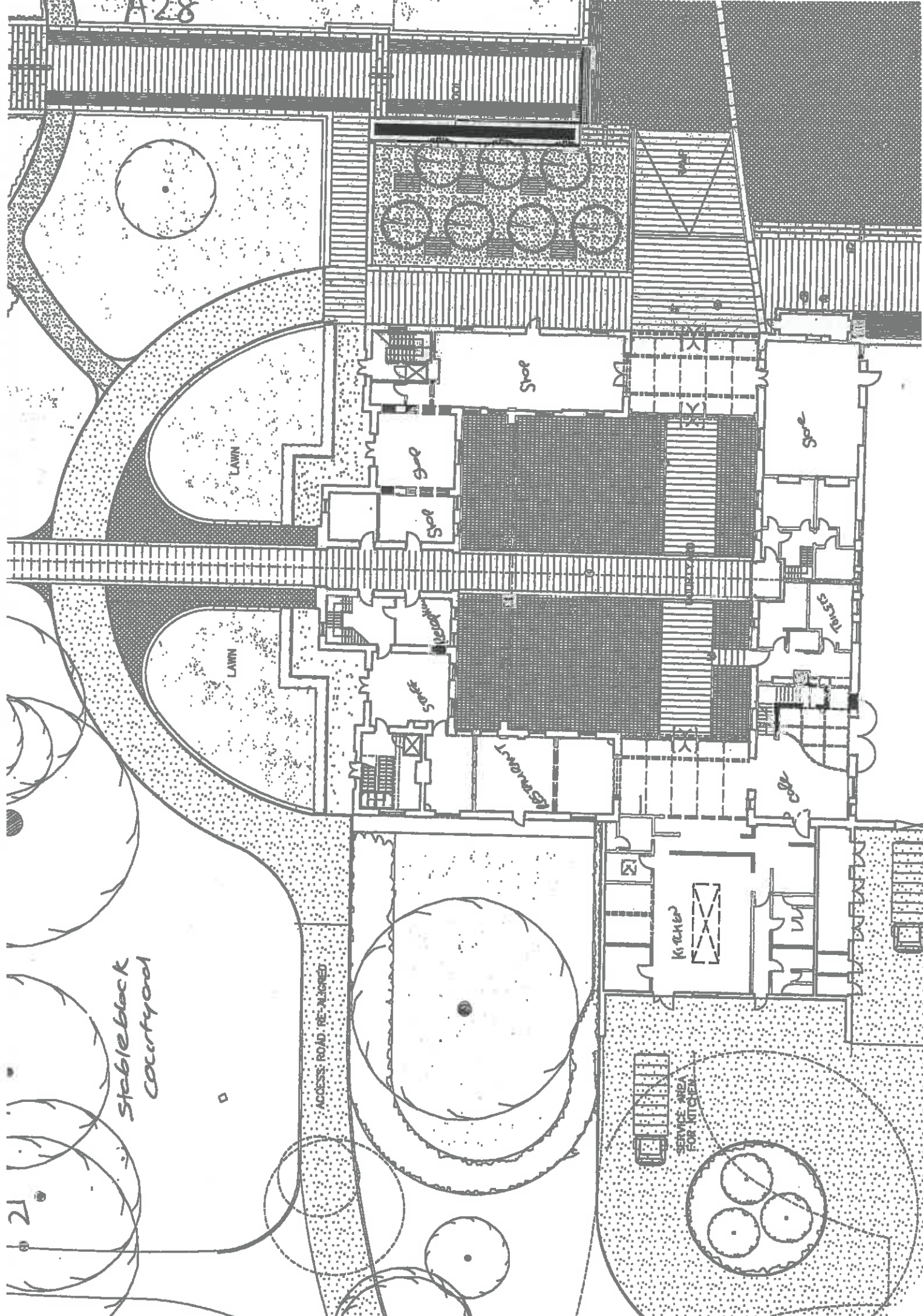
Author and Partners
 Foster and Partners
 15 Abchurch Lane
 London EC4N 3DF
 Tel: 020 7553 3000
 Fax: 020 7553 4100
 Website: www.fosterpartners.com



Rev	Description	Date	By	Check
1	Issue for construction	14.01.98	J.E.	
2	Issue for construction	14.01.98	J.E.	
3	Issue for construction	14.01.98	J.E.	
4	Issue for construction	14.01.98	J.E.	
5	Issue for construction	14.01.98	J.E.	
6	Issue for construction	14.01.98	J.E.	
7	Issue for construction	14.01.98	J.E.	
8	Issue for construction	14.01.98	J.E.	
9	Issue for construction	14.01.98	J.E.	
10	Issue for construction	14.01.98	J.E.	

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A28



Stable block
Courtyard

ACCESS ROAD, RE-ALIGNED

21

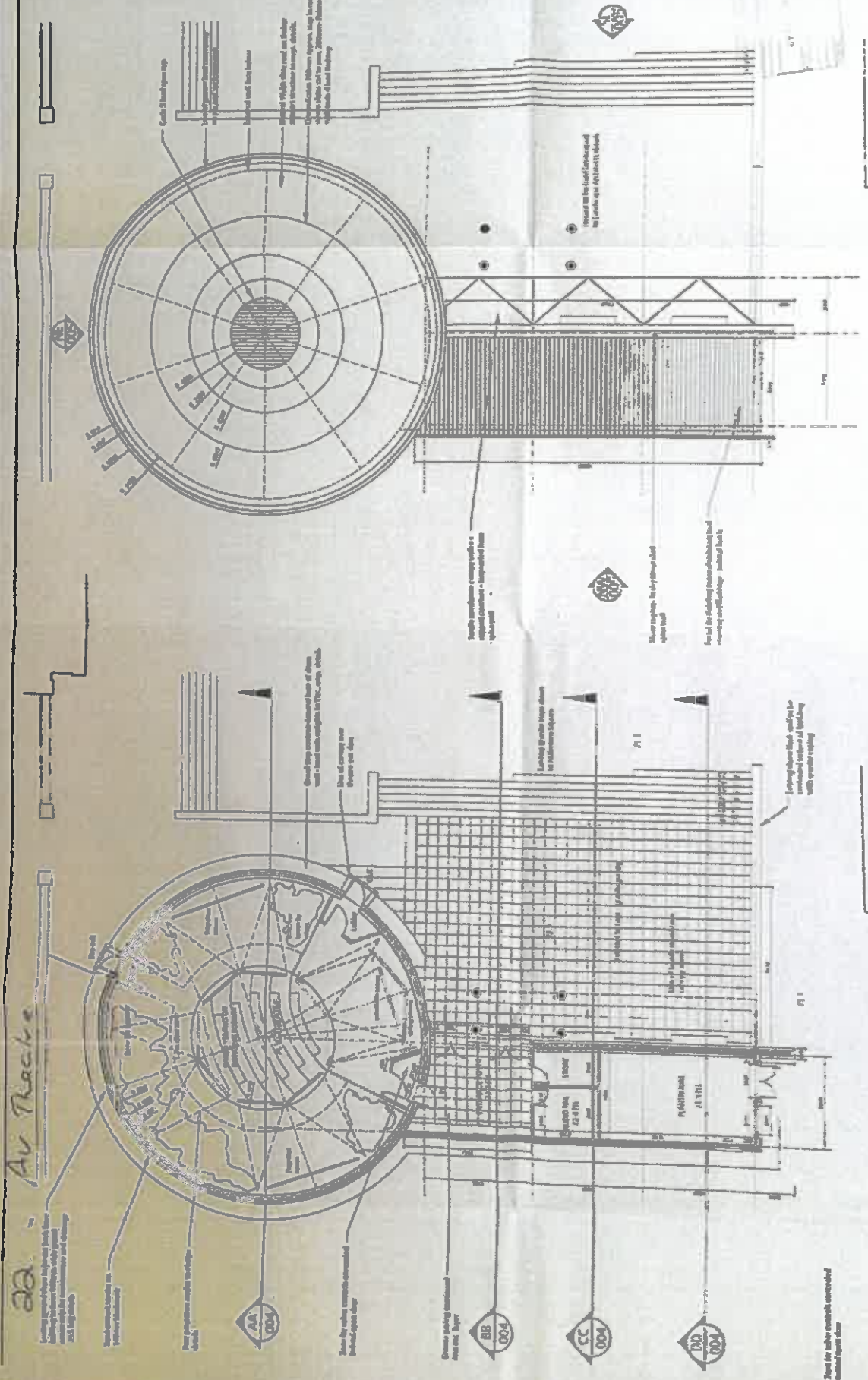
Austin-Smith:Lord

Austin-Smith:Lord
 1000 West 10th Street
 Austin, Texas 78703
 Telephone: (512) 476-1000
 Telex: 480000
 Cable: ASLORD

MAJOR DESIGN
 GROUP OF WALLS
 FROM VISUAL TOWER

General Arrangement
 Building Plans

DATE	11/06/70
BY	24/07/70
SCALE	1/8" = 1'-0"
PROJECT NO.	300163
REV.	
DESIGNER	ASL
CHECKED	ASL
DATE	11/06/70



22
 Av Thacker

Section through the wall and roof
 showing the reinforcement and
 the floor slab.

Section through the wall and roof
 showing the reinforcement and
 the floor slab.

Section through the wall and roof
 showing the reinforcement and
 the floor slab.

Section through the wall and roof
 showing the reinforcement and
 the floor slab.

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 showing the reinforcement and
 the floor slab.

Section through the wall and roof
 showing the reinforcement and
 the floor slab.

Section through the wall and roof
 showing the reinforcement and
 the floor slab.

ROOF PLAN

GROUND FLOOR PLAN

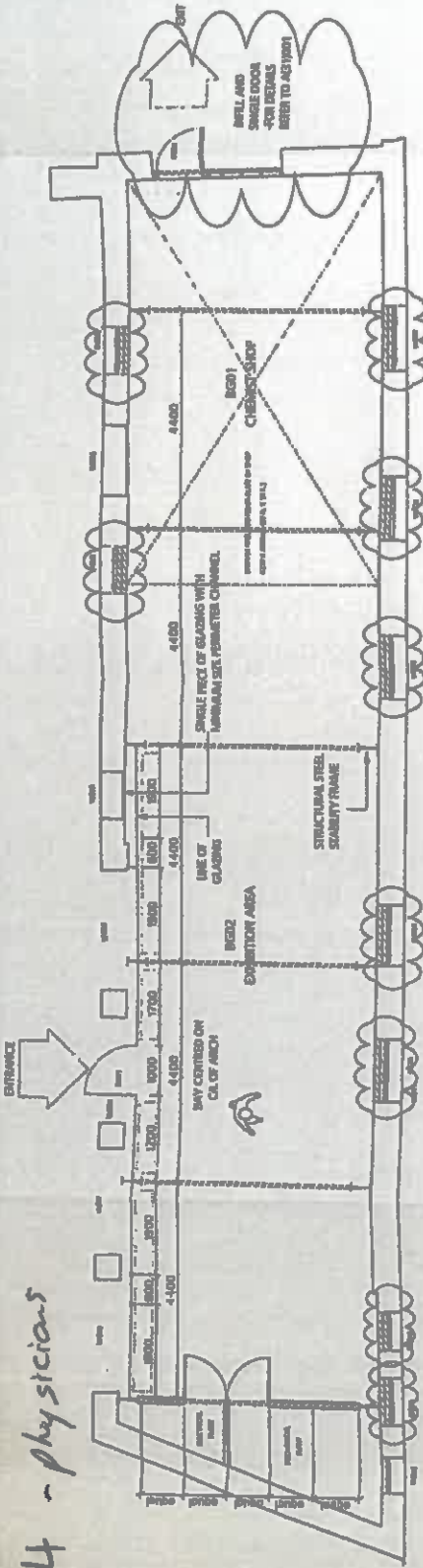
EXHIBITION HALL

PREPARED BY: ASL
 CHECKED BY: ASL
 DATE: 11/06/70
 PROJECT NO.: 300163

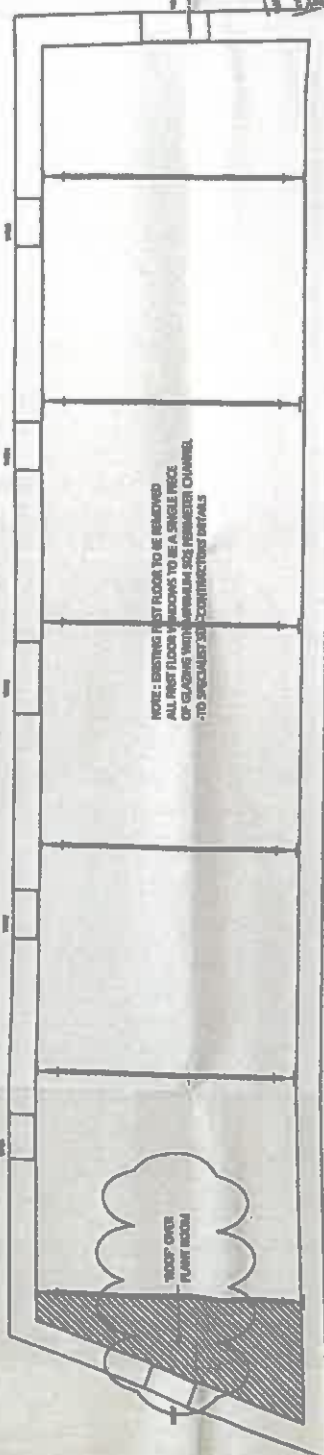
A30

Austin-Smith:Lord

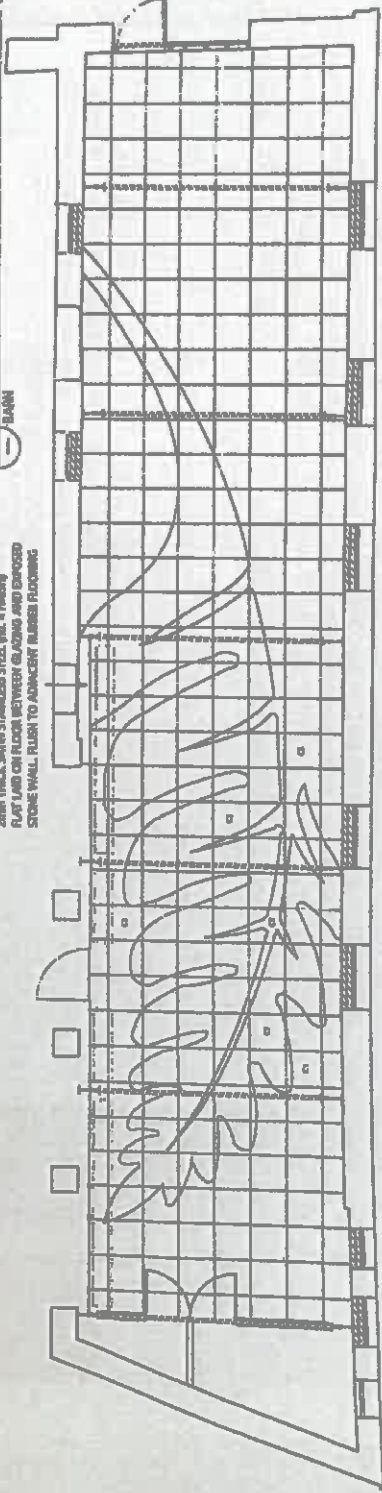
24 - physicians



01 PROPOSED GROUND FLOOR PLAN
1:50



02 PROPOSED FIRST FLOOR PLAN
1:50



03 FLOOR FINISH PLAN
1:50

- EXISTING FIRST FLOOR TO BE REMOVED AND STRUCTURAL STEEL COLUMN REMAINS INSTALLED
- EXISTING FLOOR TO BE TAKEN UP AND REPLACED BY NEW CONCRETE SLAB-FLOOR ON DPM WITH INSULATION AND HEATED SCREED OVER
- EXISTING STAINLESS STEEL TO BE TAKEN UP AND REWORKED EXTERNALLY AND REWORKED INTERNALLY
- INSULATED PLASTERBOARD LINING TO BE FIXED TO STONE WALLS EXTERNALLY ON OPTIC METAL BRACKETS TO STAINLESS STEEL
- EXISTING WINDOWS TO BE REMOVED AND REPLACED BY NEW DOUBLE GLAZED WINDOWS WITH SILVER LOW E MIRROR ALUMINIUM FRAMES
- EXISTING ARCHWAYS TO BE OPENED UP AND SINGLE GLAZED SCREEN WITH EXISTING DOOR INSTALLED BETWEEN STEEL STABILITY FRAMES AS SHOWN
- MAJORITY OF EXISTING GROUND FLOOR EXPOSURE TO BE RAISED WITH BLOCKWORK AND TIMBER BOARDING
- EXISTING ROOF STRUCTURE AND COVERINGS TO REMAIN IN PLACE. INSULATION TO BE FIXED BETWEEN RAFTERS AND PLASTERBOARD CEILING LINING COMPLETE WITH VAPOUR BARRIER AND FILLING INFOSSED.
- EAVES DETAIL TO BE MODIFIED TO CREATE VENTILATION ABOVE NEW INSULATION

DATE: 14.11.99
DRAWN BY: J. SMITH
CHECKED BY: A. SMITH

NO.	REV.	DATE	DESCRIPTION
1			
2			
3			
4			
5			
6			
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8			
9			
10			

NATIONAL BOTANIC GARDENS OF WALES, MUDLETON HILL, CARMARTHENSHIRE

Drawn - Proposed Plans

NO.	REV.	DATE	DESCRIPTION
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

GARD DDA
POTAWGO GARDEN/ASTROL.

CYMRU

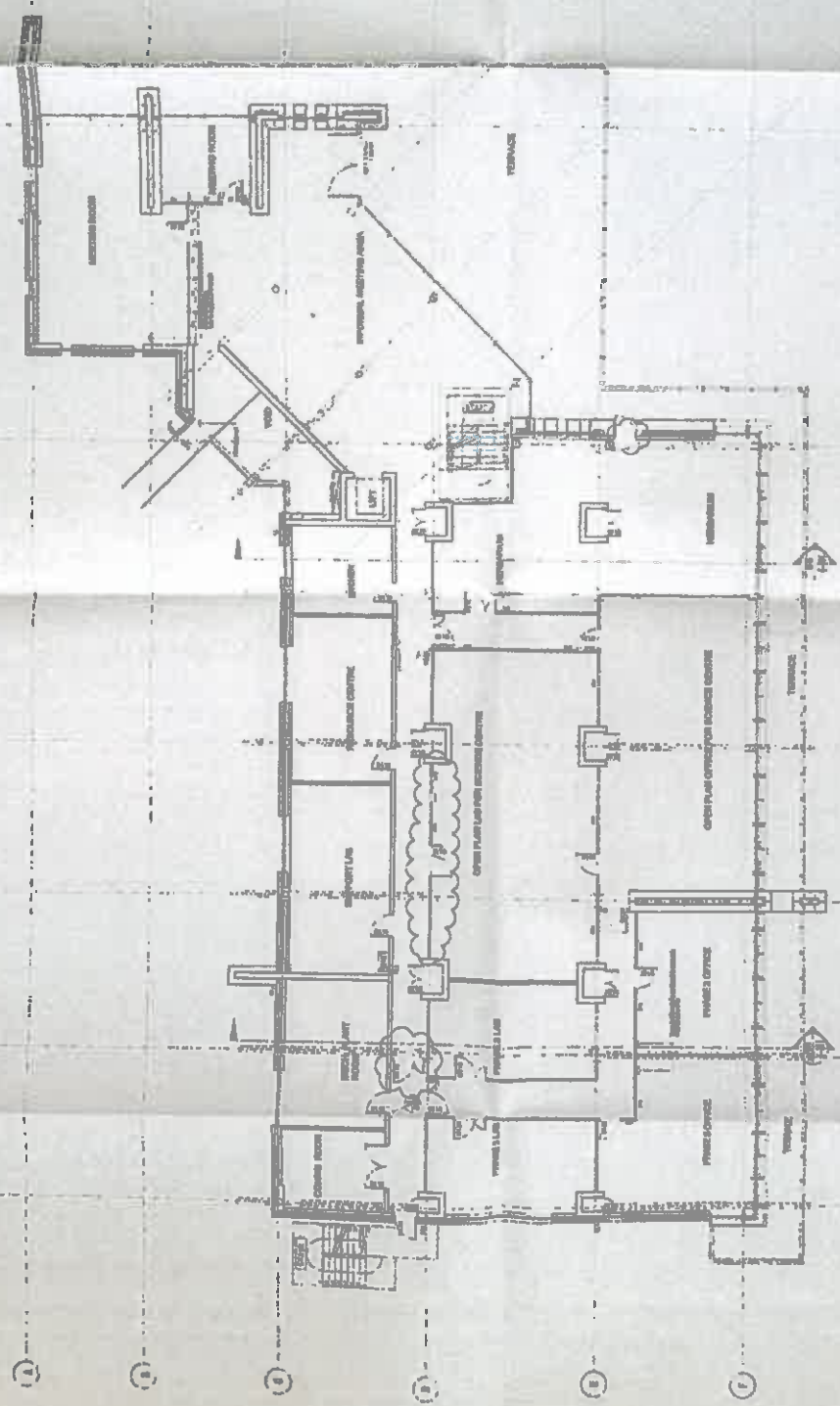
THE NATIONAL BOTANIC GARDEN OF WALES

A32

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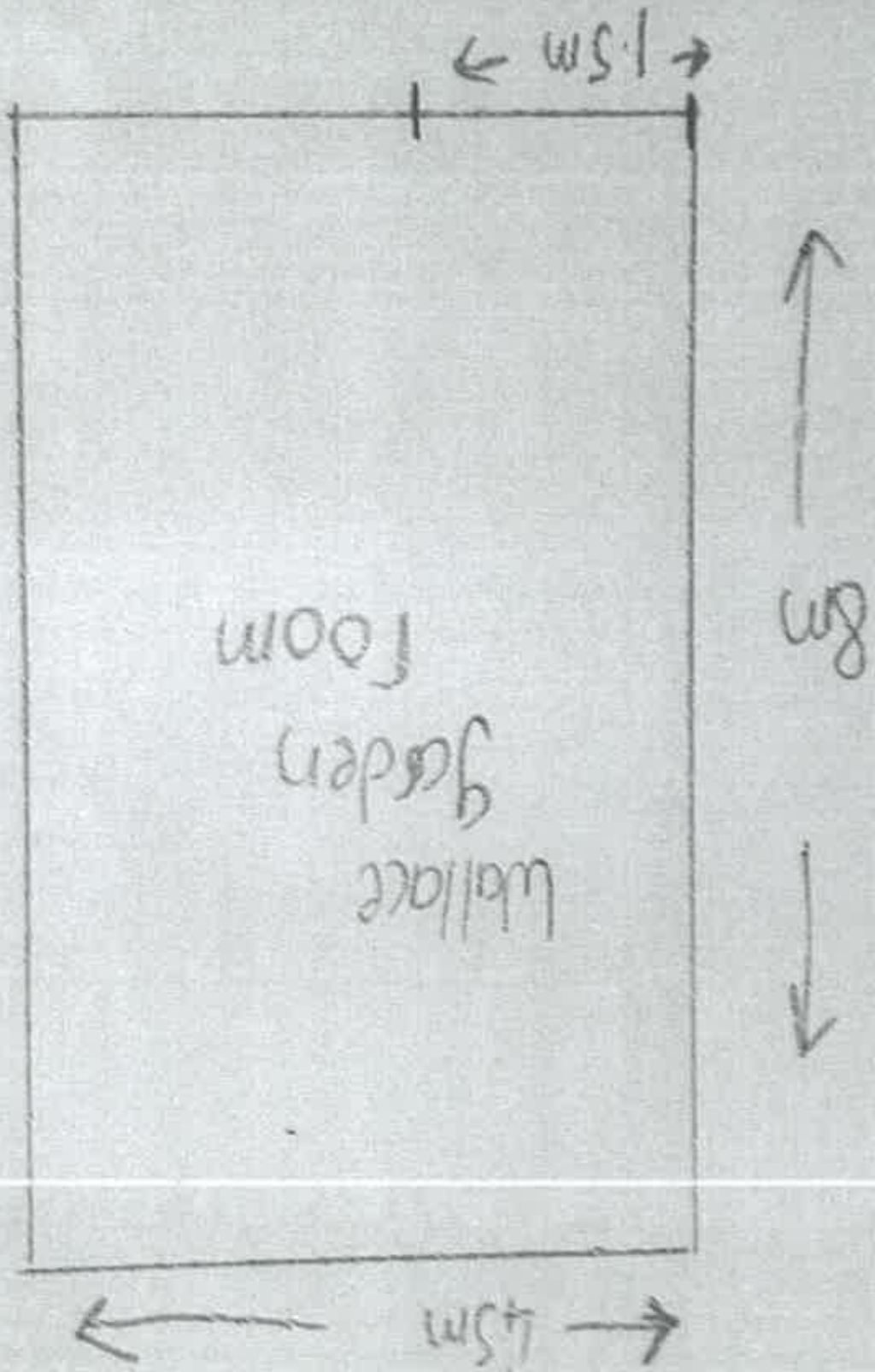
DRAWING	
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49	10/10/00
50	10/10/00

Science
26-1st floor



MECHANICAL REFERENCE (MRS)

33 - Wallace Garden Room

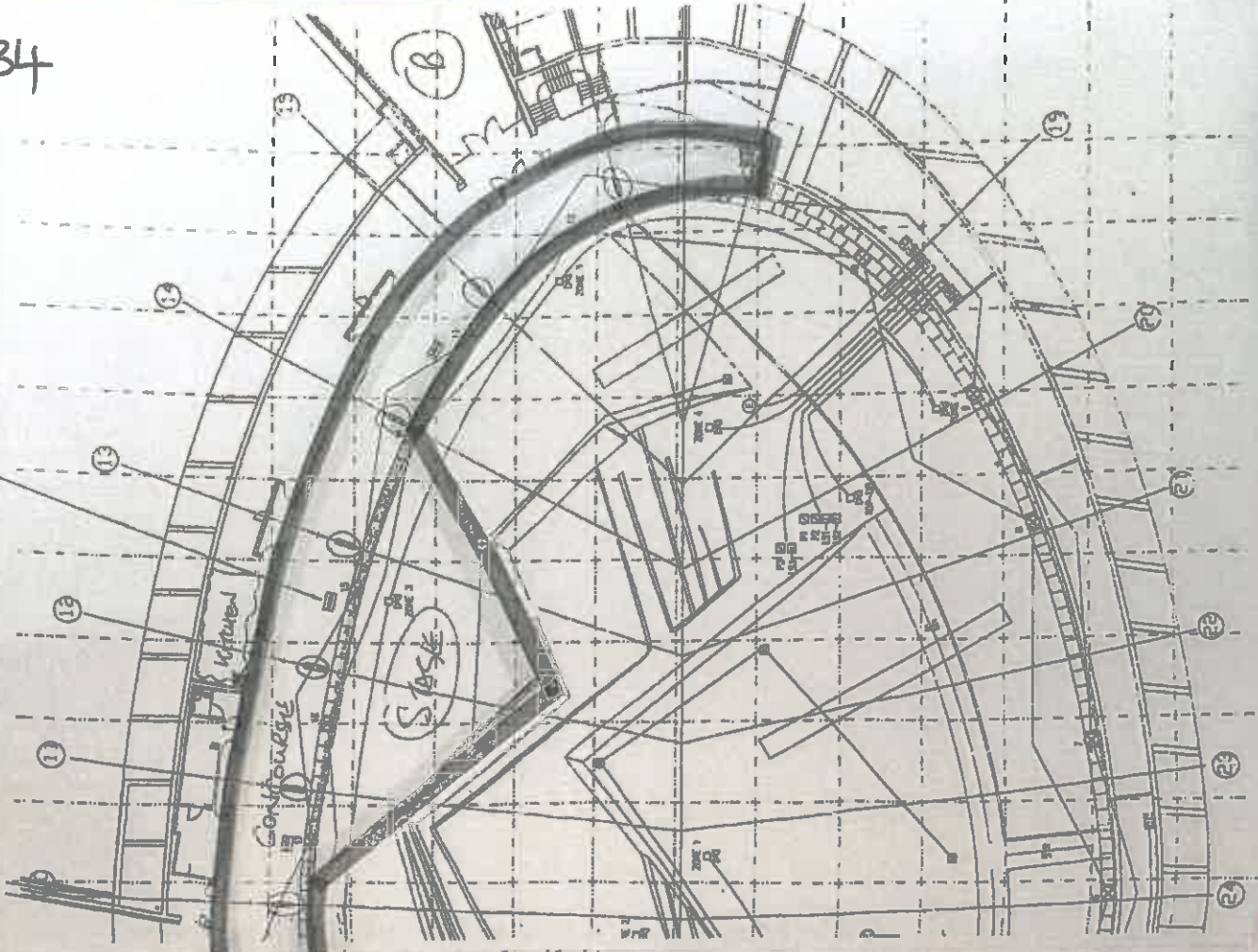
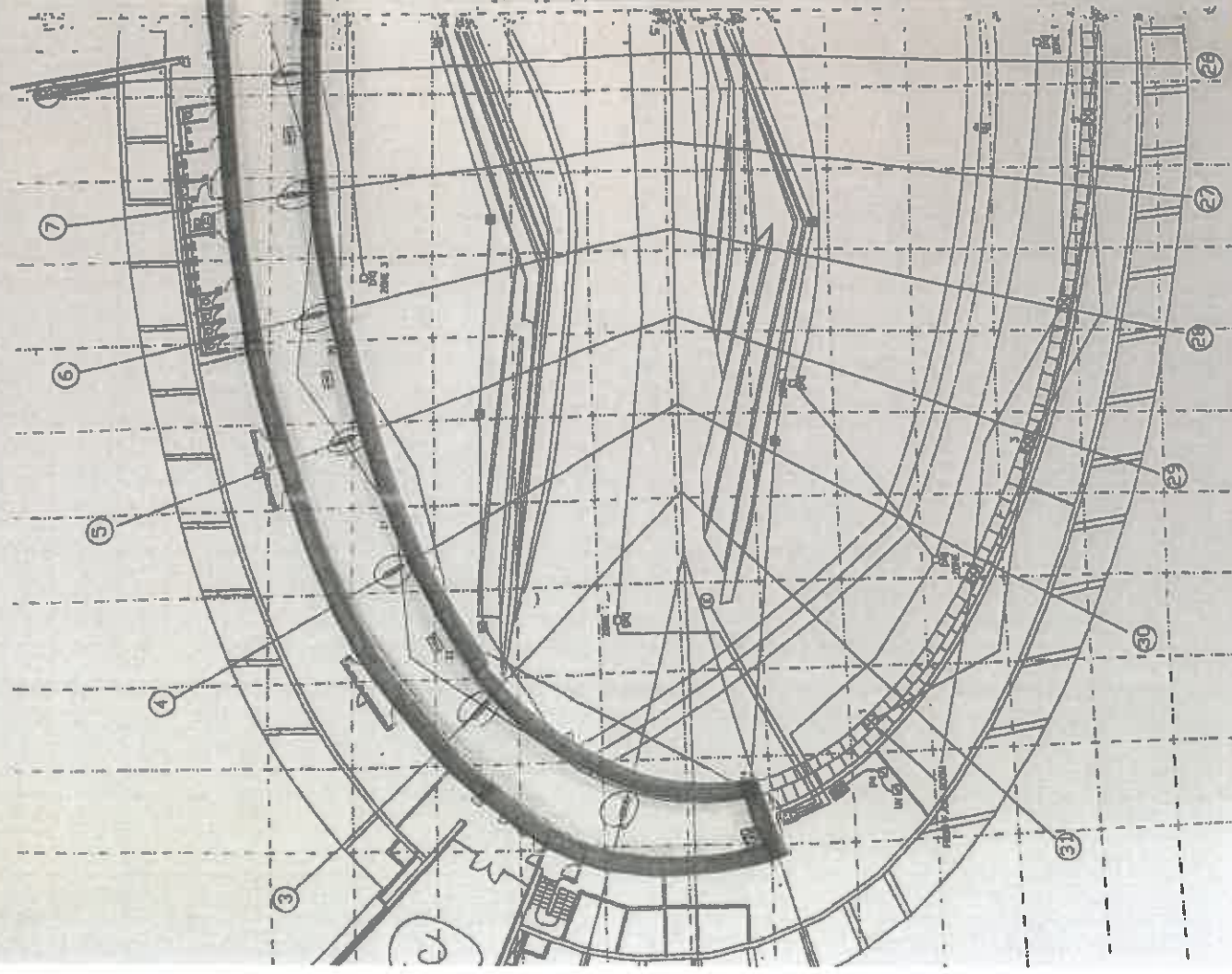


A34

ALL MOVEMENT FANS, CEILING RECYCLED TO FANS BY ZONE, CLIMATE CONTROL, AIR TO REMOVAL CHILLING AND CONDENSATION PIPING CORRECTIONS & ASSOCIATED SCHEMATIC.

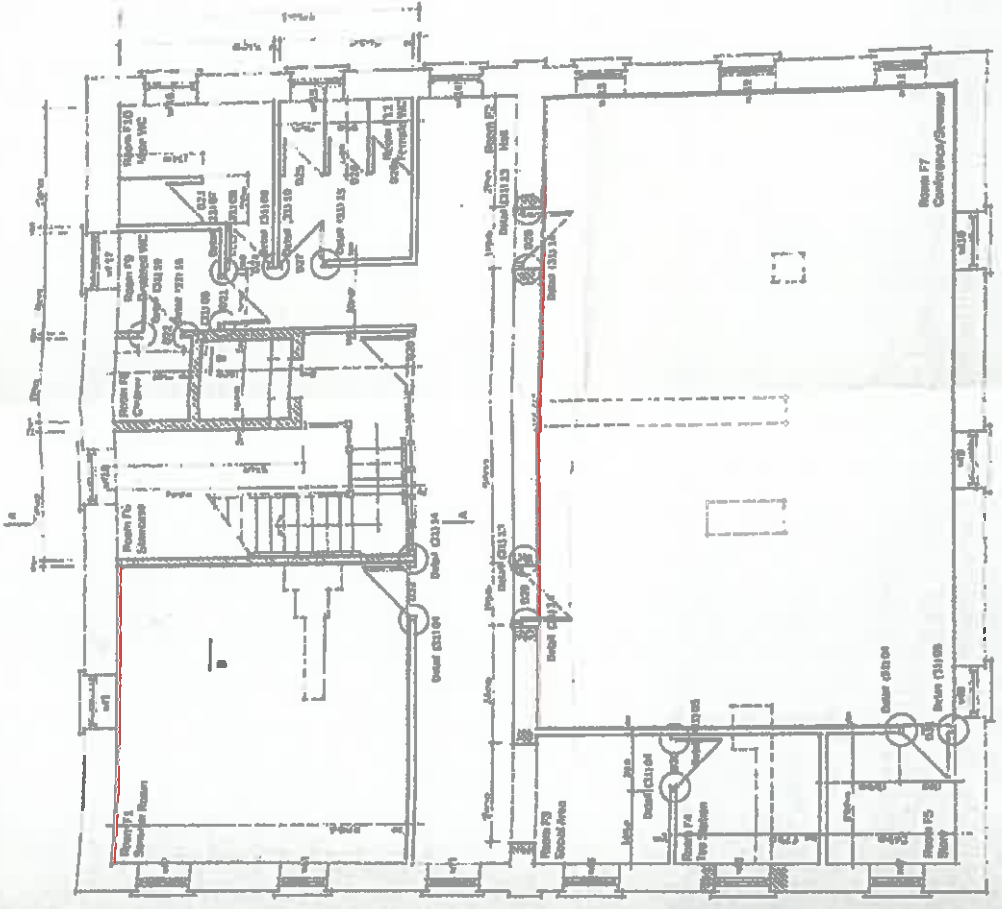
35 - Glass Louvers Ceiling Casework
NBCW

A

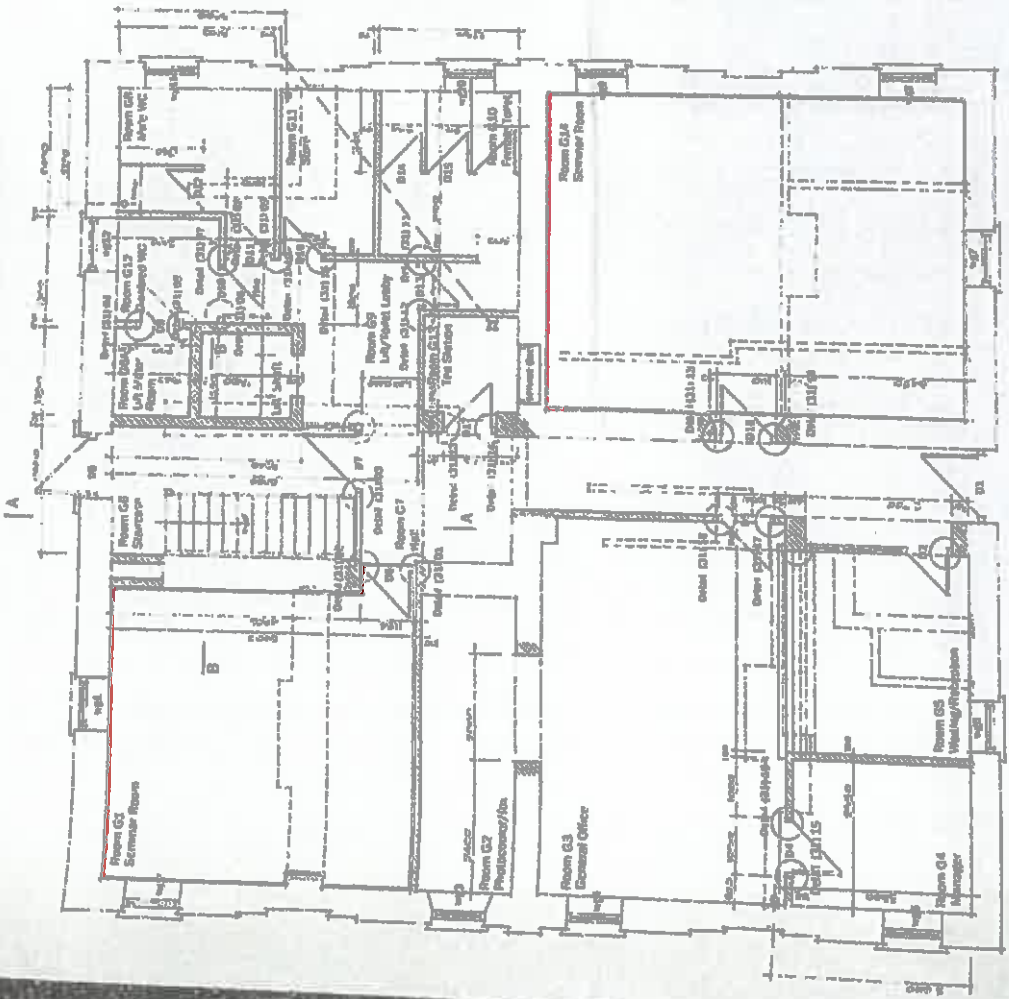


A35

PROJECT NO.	305
CLIENT	INDUSTRIAL - UTE LABOR COMPANY
DESIGNER	Boley Regan Morris
DATE	11/11/09
PROJECT NAME	FLOOR PLANS
PROJECT NO.	100-020-09



First Floor Plan

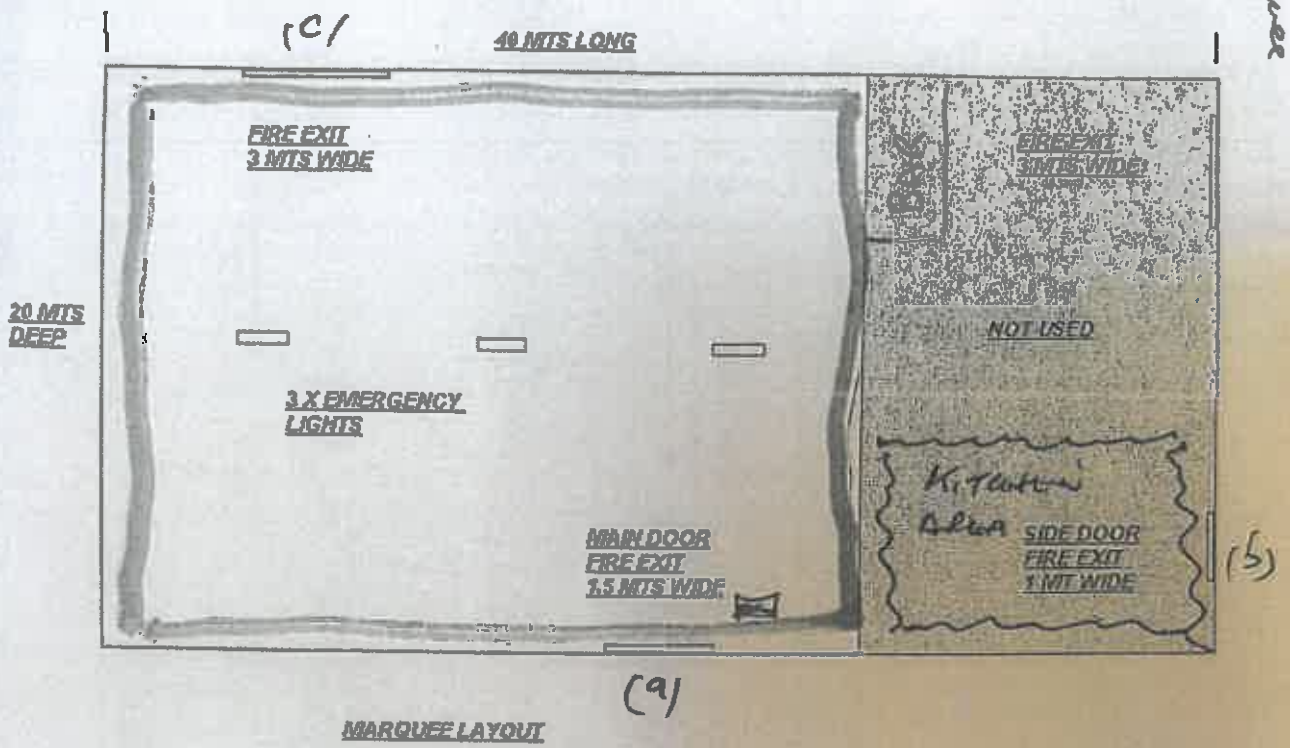



Ground Floor Plan

36 - Principal

A36

Marquee

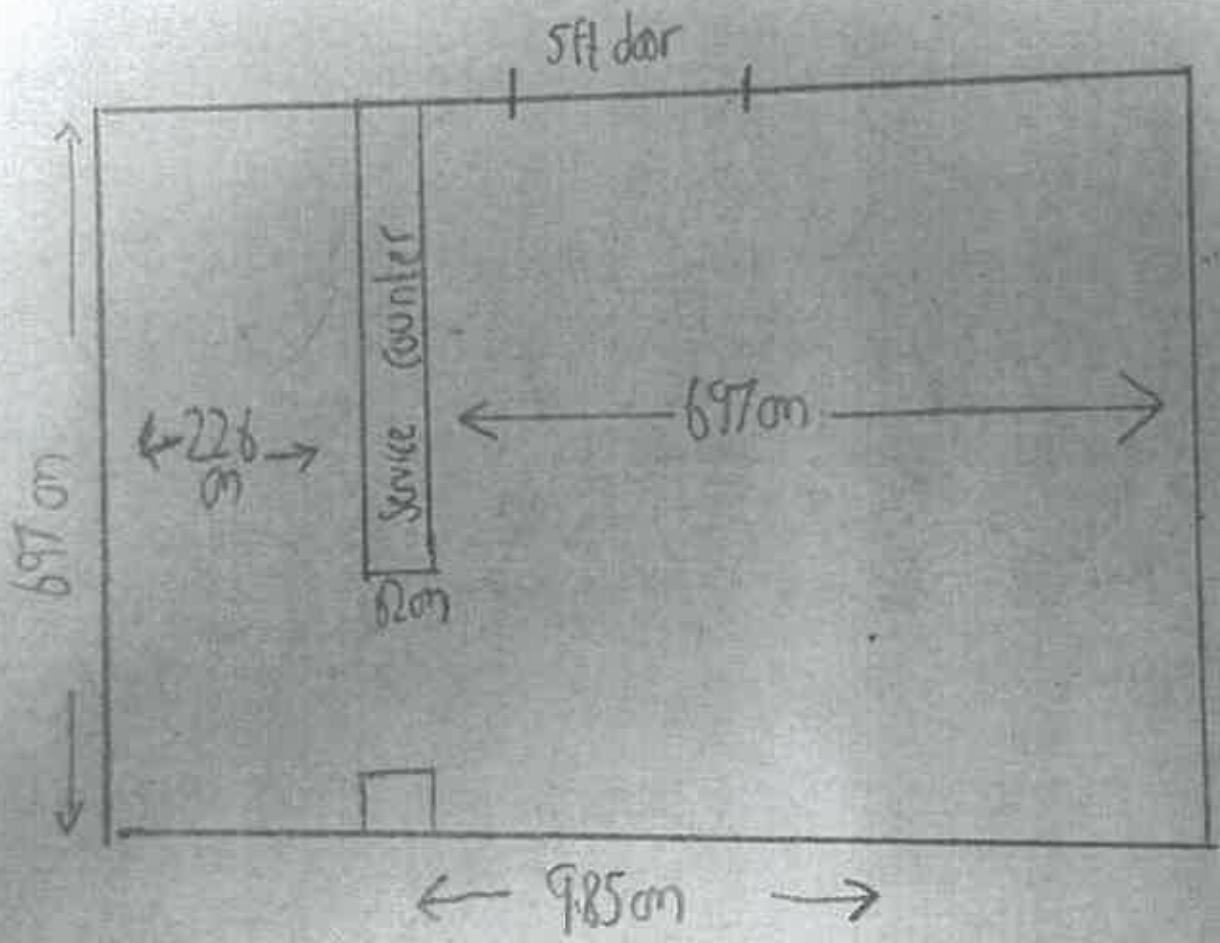


1. BOUNDARY 40m x 20 m
2. 3 DOORS abtc ACCESS + EGRESS.
3. ~~CONSUMPTION~~ CONSUMPTION OF ALCOHOL AREA.
4. NO FIXED STRUCTURES / NO STAGE / NO STEPS
5. NO TOILETS, BUT AVAILABLE IN ADJACENT BUILDING (STABLE BLOCK)
6. ~~FIRE~~ FIRE SAFETY EQUIPMENT.
7.  KITCHEN AREA

42.

A37

Scale 10:1 Pot blodyn



42- Pot Blodyn

