

Notice of Meeting

Licensing Sub-Committee

**Wednesday, 15th October 2014 at
2.00 pm**

**in Council Chamber Council Offices
Market Street Newbury**

Members Interests

Note: If you consider you may have an interest in any Application included on this agenda then please seek early advice from the appropriate officers.

Date of despatch of Agenda: Friday 3rd October 2014

FURTHER INFORMATION FOR MEMBERS OF THE PUBLIC

If you require further information about this Agenda, or to inspect any background documents mentioned in the reports, please contact Jo Watt / Jude Thomas - Tel: (01635) 519242/519083 - Email: jwatt@westberks.gov.uk / jathomas@westberks.gov.uk.

Further information and Minutes are also available on the Council's website at www.westberks.gov.uk

Domino's, 5 The Broadway, Newbury, RG14 1AS



Agenda - Licensing Sub-Committee to be held on Wednesday, 15 October 2014
(continued)

To: Councillors Peter Argyle (Chairman), Manohar Gopal and Andrew Rowles
Substitute: Councillor Sheila Ellison

Agenda

Part I

Page No.

- | | | |
|-----|---|--------|
| 1 | Declarations of Interest
To receive any declarations of interest from Members. | |
| 2 | Schedule of Licensing Applications | 1 - 2 |
| (1) | Application No. 14/01406/LQN - Domino's, 5 The Broadway, Newbury, RG14 1AS
Proposal: Variation of a premises licence
Location: Domino's, 5 The Broadway, Newbury, RG14 1AS
Applicant: Sigurd Wilberg | 3 - 74 |

Andy Day
Head of Strategic Support

If you require this information in a different format or translation, please contact Moira Fraser on telephone (01635) 519045.



West Berkshire
C O U N C I L

Agenda Item 2

Licensing Act 2003

APPLICATION NUMBER: 14/01406/LQN

Application for a variation to premises licence - Sigurd Wilberg

SITE: Domino's, 5 The Broadway, Newbury, RG14 1AS

Application No 14/1406/LQN

Plan

Objection 1 – Mr Ian Wootton, Public Health and Wellbeing
and Local Safeguarding Children's Board

Objection 2 – Newbury Town Council

Original application – 2006

Variation of licence - 2010

This page is intentionally left blank

Agenda Item 2(1)

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 **Team West Ltd**

(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 25100/T090W/PREL

Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description
--

5 The Broadway

Post town	Newbury	Postcode	RG14 1AS
-----------	---------	----------	----------

Telephone number at premises (if any)	01635 529529
---------------------------------------	--------------

Non-domestic rateable value of premises	£22.000
---	---------

Part 2 – Applicant details

Daytime contact telephone number		07899 841 561	
E-mail address (optional)		Sigurd@kanix.cc	
Current postal address if different from premises address		Sigurd Wilberg 40 Malmesbury Road	
Post town	Cricklade, Wiltshire	Postcode	SN6 6RP

Part 3 - Variation

Please tick as appropriate

Do you want the proposed variation to have effect as soon as possible? Yes

If not, from what date do you want the variation to take effect?

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

Do you want the proposed variation to have effect in relation to the introduction of the late night levy?
(Please see guidance note 1) No

Please describe briefly the nature of the proposed variation (Please see guidance note 2)

We are asking for permission to deliver beer and wine to our delivery customers. The alcohol will only be delivered together with food chosen from our menu and will not be sold over the counter.

To add the sale of alcohol for consumption off the premises, every day 10am –5am the following morning. Alcohol will only be sold to persons for home delivery.

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:

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)
- 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)

X

In all cases complete boxes K, L and M

A

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 type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)					
Mon								
Tue								
Wed						<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Thur								
Fri						<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)		
Sat								
Sun								

B

Films Standard days and timings (please read guidance note 7)			<u>Will the exhibition of films 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 type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)					
Mon								
Tue								
Wed						<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)		
Thur								
Fri						<u>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</u> (please read guidance note 6)		
Sat								
Sun								

C

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

D

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

E

Live music Standard days and timings (please read guidance note 7)			Will the performance of live 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 type="checkbox"/>			
Day	Start	Finish	Please give further details here (please read guidance note 4)					
Mon								
Tue								
Wed						State any seasonal variations for the performance of live music (please read guidance note 5)		
Thur								
Fri						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)		
Sat								
Sun								

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 type="checkbox"/>			
Day	Start	Finish	Please give further details here (please read guidance note 4)					
Mon								
Tue								
Wed						State any seasonal variations for the playing of recorded music (please read guidance note 5)		
Thur								
Fri						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)		
Sat								
Sun								

G

Performances of dance Standard days and timings (please read guidance note 7)			<u>Will the performance of dance 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 type="checkbox"/>				
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)							
Mon										
Tue										
Wed							<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)			
Thur										
Fri							<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										
Sun										

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 4)		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5)		
Fri					
Sat			<u>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</u> (please read guidance note 6)		
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 7)			<u>Will the provision of late night refreshment 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 type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
Wed					
Thur					
Fri					
Sat					
Sun			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
			<u>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</u> (please read guidance note 6)		

J

Supply of alcohol Standard days and timings (please read guidance note 7)			<u>Will the supply of alcohol be for consumption – please tick</u> (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5)		
Mon	10.00	5.00			
Tue	10.00	5.00			
Wed	10.00	5.00			
Thur	10.00	5.00			
Fri	10.00	5.00			
Sat	10.00	5.00			
Sun	10.00	5.00			
			<u>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</u> (please read guidance note 6)		

K

<p>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).</p>
--

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variations</u> (please read guidance note 5) None
Day	Start	Finish	<u>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</u> (please read guidance note 6) Never
Mon	10.00	5.00	
Tue	10.00	5.00	
Wed	10.00	5.00	
Thur	10.00	5.00	
Fri	10.00	5.00	
Sat	10.00	5.00	
Sun	10.00	5.00	

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.

Please tick as appropriate

- I have enclosed the premises licence
- I have enclosed the relevant part of the premises licence

If you have not ticked one of these boxes, please fill in reasons for not including the licence or part of it below

Reasons why I have not enclosed the premises licence or relevant part of premises licence.

I have unfortunately lost the license.

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)

1. Alcohol will only be sold or supplied with menu based food for home delivery, **ONLY!**
2. All incidents which impact on any of the four licensing objectives shall be recorded in a register kept at the premises for this purpose. The names of the person recording the information and those members of staff who deal with any incident shall also be recorded. Where known, any offenders name shall also be recorded.
3. The Premises Licence Holder or Designated Premises Licence Holder shall ensure staffs receive training on a regular basis, every four months, in relation to the Four Licensing Objectives contained within the Licensing Act 2003 for those authorised to sell alcohol. Written proof of training shall be recorded and maintained.

b) The prevention of crime and disorder

Alcohol will only be delivered to a residential address that has been given by the person placing the order.

c) Public safety

A challenge 25 policy will be in operation if the delivery driver considers the recipient of the alcohol to be under 25. A recognised photographic identification shall be requested before the alcohol is handed over.

d) The prevention of public nuisance

Management shall ensure that late night noise maturing from the premises shall be kept to an acceptable level.

e) The protection of children from harm

- | |
|--|
| <ol style="list-style-type: none">1. A challenge 25 policy will be in operation if the delivery driver considers the recipient of the alcohol to be under 25. A recognised photographic identification shall be requested before the alcohol is handed over.2. Whenever alcohol is delivered to the purchaser, it shall only be delivered to a residential address or business address. The receiver of the alcohol must be able to prove to the person delivering the alcohol they are a resident or employee at the premises and must be inside the building or at the doorway of the business, house or flat.3. All persons delivering alcohol must be aged 18 or over. |
|--|

Checklist:

Please tick to indicate agreement

- | | |
|---|--------------------------|
| • I have made or enclosed payment of the fee; or | X |
| 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. | <input type="checkbox"/> |
| • I have sent copies of this application and the plan to responsible authorities and others where applicable. | <input type="checkbox"/> |
| • I understand that I must now advertise my application. | X |
| • I have enclosed the premises licence or relevant part of it or explanation. | X |
| • I understand that if I do not comply with the above requirements my application will be rejected. | X |

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	Sigurd Wilberg
Date	1.09.2014
Capacity	Franchisee

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)

Sigurd Wilberg
40 Malmesbury Road

Post town	Cricklade, Wiltshire	Post code	SN6 6RA
------------------	----------------------	------------------	---------

Telephone number (if any)	07899 841561
----------------------------------	--------------

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)
Sigurd@kanix.cc

Notes for Guidance

This application cannot be used to vary the licence so as to extend the period for which the licence has effect or to vary substantially the premises to which it relates. If you wish to make that type of change to the premises licence, you should make a new premises licence application under section 17 of the Licensing Act 2003.

1. You do not have to pay a fee if the only purpose of the variation for which you are applying is to avoid becoming liable to the late night levy.
2. 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.
3. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
4. For example state type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
5. For example (but not exclusively), where the activity will occur on additional days during the summer months.
6. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
7. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
8. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
9. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
10. Please list here steps you will take to promote all four licensing objectives together.
11. The application form must be signed.
12. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
13. Where there is more than one applicant, each of the applicants or their respective agents must sign the application form.

14. This is the address which we shall use to correspond with you about this application.

This page is intentionally left blank

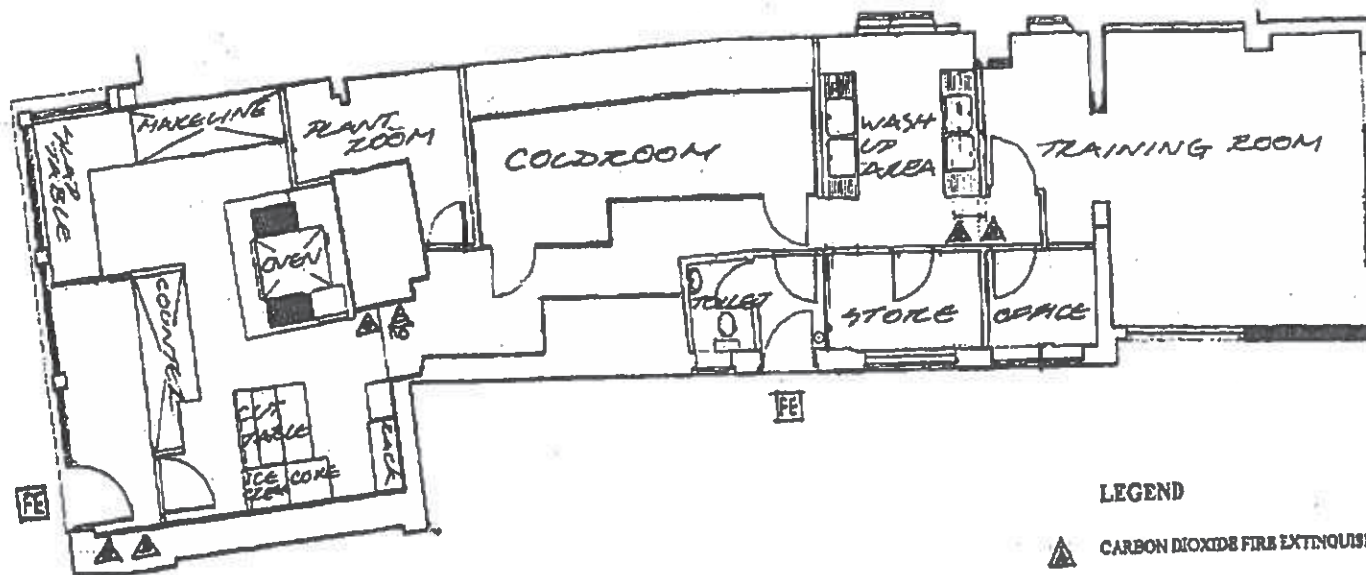
DOMINO'S PIZZA - UNIT 5 THE BROADWAY - NEWBURY - BERKSHIRE RG14 1AS

13 Nov 06 22:31





JOHN HOPWOOD

0208959931

P.1



LEGEND

-  CARBON DIOXIDE FIRE EXTINGUISHER
-  FOAM FIRE EXTINGUISHER
-  FIRE BLANKET
-  FIRE EXIT

DRAWN BY:

DELTA CONSTRUCTION SERVICE
25 CHISWICK STAITHE
LONDON W4 3TP
TEL/FAX: 0208 9959931

SCALE : 1:100

DATE : 11/11/2008

This page is intentionally left blank

From: Ian Wootton
Sent: 02 September 2014 16:25
To: Licensing; EHAdvice; 'Fire Authority'; Planapps; TS Information; 'TVP'
Cc: Sigurd@kanix.cc
Subject: RE: Application to vary a premises licence - Domino's Pizza

Good afternoon

As the representative for Public Health and Wellbeing and the Local Safeguarding Children Board (LSCB), I am objecting to the change variation on the following grounds:

- No evidence of how to prevent under age sales (Protection of Young People)
- No evidence of training to be provided to staff (Protection of Young People)
- No evidence of the type of transport used to deliver alcohol (Driver's and Public Safety)
- No evidence of responsible retailing i.e. what procedures would be in place should a delivery driver identify the purchaser(s) are already intoxicated to an unsafe level (Business Liability and Public Safety)
- The hours of sales to be reduced to 11.00 – 23.00 (Responsible Retailing)

Kind Regards

Ian

Ian Wootton
Commissioning Manager (Substance Misuse) West Berkshire
Joint Strategic Lead (Substance Misuse) Berkshire

Public Health and Wellbeing
West Berkshire Council
Market Street
Newbury
West Berkshire RG14 5LD

(01635) 503435 | Ext 3435 | 07879 242123 | iwootton@westberks.gov.uk | www.westberks.gov.uk

This page is intentionally left blank

From: Margaret Gore [mailto:committees@newbury.gov.uk]
Sent: 17 September 2014 09:43
To: Cheryl Lambert
Subject: RE: LA 03 - Application to vary a premises licence - Domino's Pizza - Newbury

Dear Cheryl

At this council's Planning & Highways Meeting of Monday 15 September 2014 Members resolved to make the following comments regarding this application:

PLANNING & HIGHWAYS COMMITTEE 15 SEPTEMBER 2014 (MINUTE 77)

77. SCHEDULE OF LICENSING APPLICATIONS

It was agreed that the following observation be submitted:

- **Premises Licence (Variation) – Domino's Pizza, 5 The Broadway, Newbury**

Applicant: Team West Ltd

Object for the following reasons:

- The prevention of crime and disorder
- Public safety
- The Prevention of public nuisance
- The protection of children from harm

Members were concerned at how this would be controlled. How would the staff know that the person ordering the alcohol was 18 and over?

Kind regards

Margaret Gore (Miss)
Senior Admin Officer
Newbury Town Council

Tel; 01635 35486
www.newbury.gov.uk

This page is intentionally left blank

2N 93832 £190 13/11/06.

RECEIVED

13 NOV 2006

PUBLIC PROTECTION

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 Team West Ltd T/A Domino's Pizza
(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 5 The Broadway, Newbury, Berks, RG14 1AS			
Post town	Newbury	Post code	RG14 1AS

Telephone number at premises (if any)	07717228979
Non-domestic rateable value of premises	£11,200.00

Part 2 - Applicant Details

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

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
 - i. as a limited company please complete section (B)
 - ii. as a partnership please complete section (B)
 - iii. as an unincorporated association or please complete section (B)
 - iv. other (for example a statutory corporation) please complete section (B)
- 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 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:

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
- 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		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post Town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if 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		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	

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 Team West LTD Domino's Pizza
Address 10 Ducks Meadow Marlborough Wiltshire SN8 4DE
Registered number (where applicable) 02894323
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company
Telephone number (if any) 07717228979
E-mail address (optional) Teamwestoffice@btinternet.com

Part 3 Operating Schedule

When do you want the premises licence to start?

Day	Month	Year
1	1	12 2006

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

Day	Month	Year

Please give a general description of the premises (please read guidance note1)
The premises is a Dominos Pizza home delivery store. The vast majority of pizzas are home delivered. The rest are collected for consumption off the premises

The store is situated on a busy main road. The nearest residential accommodation is over 500 meters away.

The layout comprises a kitchen, shop counter, office and a small waiting area for pizza collection by the public. Please see plan for further details. There are no sit down eating facilities as food is sold for consumption off the premises.

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

0

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

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

Provision of regulated entertainment

Please tick yes

- 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:

- 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	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue			State any seasonal variations for performing plays (please read guidance note 4)		
Wed					
Thur			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 (please read guidance note 5)		
Fri					
Sat					
Sun					

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	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue			State any seasonal variations for the exhibition of films (please read guidance note 4)		
Wed					
Thur			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 5)		
Fri					
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Wed			
Thur			<u>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</u> (please read guidance note 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)		
Thur					
Fri			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 5)		
Sat					
Sun					

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

F

Recorded music Standard days and timings (please read guidance note 6)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue					
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)		
Thur					
Fri			<u>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</u> (please read guidance note 5)		
Sat					
Sun					

G

Performances 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 type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue			State any seasonal variations for the performance of dance (please read guidance note 4)		
Wed					
Thur			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 (please read guidance note 5)		
Fri					
Sat					
Sun					

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)</p>			<p><u>Please give a description of the type of entertainment you will be providing</u></p>		
Day	Start	Finish	<p><u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><u>Please give further details here</u> (please read guidance note 3)</p>		
Wed					
Thur			<p><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)</p>		
Fri					
Sat			<p><u>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</u> (please read guidance note 5)</p>		
Sun					

I

Provision of facilities for making music Standard days and timings (please read guidance note 6)			<u>Please give a description of the facilities for making music you will be providing</u>	
			<u>Will the facilities for making music be indoors or outdoors or both – please tick</u> (please read guidance note 2)	
Day	Start	Finish	Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)	
Tue				
Wed			<u>State any seasonal variations for the provision of facilities for making music</u> (please read guidance note 4)	
Thur				
Fri			<u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u> (please read guidance note 5)	
Sat				
Sun				

J

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick (see guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
			<u>Please give a description of the facilities for dancing you will be providing</u>		
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for providing dancing facilities</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

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)			<u>Please give a description of the type of entertainment facility you will be providing</u>		
Day	Start	Finish	<u>Will the entertainment facility be indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 3)		
Wed					
Thur			<u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u> (please read guidance note 4)		
Fri					
Sat			<u>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</u> (please read guidance note 5)		
Sun					

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	23.00	01.00	<u>Please give further details here</u> (please read guidance note 3) Not Applicable		
Tue	23.00	01.00			
Wed	23.00	01.00	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4) Not Applicable		
Thur	23.00	01.00			
Fri	23.00	01.30	<u>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</u> (please read guidance note 5) Not Applicable		
Sat	23.00	01.30			
Sun	23.00	01.00			

M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises	<input type="checkbox"/>			
				Off the premises	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)					
Mon								
Tue								
Wed								
Thur						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 5)		
Fri								
Sat								
Sun								

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

Name	
Address	
Postcode	
Personal Licence number (if known)	
Issuing licensing authority (if known)	

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)

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	11.00	01.00	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 5) Not Applicable
Tue	11.00	01.00	
Wed	11.00	01.00	
Thur	11.00	01.00	
Fri	11.00	01.30	
Sat	11.00	01.30	
Sun	11.00	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)

With the exception of staff still undergoing training, all staff will be trained in those aspects of their job relating to the prevention of crime and disorder, the prevention of public nuisance, and will be aware of those aspects of the Health and Safety at Work etc. Act 1974 which relate to their role within the business

b) The prevention of crime and disorder

We will not employ any staff unless they have been properly trained in those aspects of their job which may have an impact on crime and disorder. The only exception will be for staff still undergoing training, providing that they are closely supervised when serving customers

c) Public safety

The public Safety side of our business is governed by the Health and Safety at Work etc. Act 1974 and in general we will not be doing anything extra to satisfy the requirements of the Licensing act 2003. We will take care not to leave dangerous items such as dinner knives and glass containers within the reach of customers at night, when some of them may have consumed alcohol elsewhere before entering the premises

d) The prevention of public nuisance

The sale of heated food on our premises does not cause any noise problem in itself.

We will make sure that our customer door does not bang shut, and that any alert used to signal that the door has been left open does not create a noise problem for neighbours.

Where customers persist in hanging around outside in groups, we will advise them that elderly people in particular often feel intimidated by this. If it is safe to do so, we will advise them politely to disperse

e) The protection of children from harm

The sale of heated food has no direct relevance to protecting children from harm and we will discharge our responsibilities under the Licensing Act simply by being good citizens.


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 responsible authorities and others 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	13/11/06
Capacity	Company Manager

For joint applications signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent. (please read guidance note 12). If signing on behalf of the applicant please state in what capacity.

Signature	
Date	
Capacity	

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

Kelvin Price
Domino's Pizza
C/O 38 Ferndale Road
Swindon
Wiltshire
SN2 1EX

Post town	Swindon	Post code	SN2 1EX
------------------	---------	------------------	---------

Telephone number (if any)	07717228979
----------------------------------	-------------

If you would prefer us to correspond with you by e-mail your e-mail address (optional)
Kelvin@dominospizza.cc

Notes for Guidance

1. 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.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

This page is intentionally left blank

R/N 124356

£190.00

10/3/2010

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 Team West Ltd T/A Domino's Pizza

(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 017405
--

Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description 5 The Broadway, Newbury, Berks, RG14 1AS			
Post town	Newbury	Post code	RG14 1AS

Telephone number at premises (if any)	01635 529529
Non-domestic rateable value of premises	£11200

Part 2 – Applicant details

Daytime contact telephone number	07717228979		
E-mail address (optional)	Teamwestoffice@btinternet.com		
Current postal address if different from premises address	Team West LTD 38 Ferndale Road		
Post Town	Swindon	Postcode	SN2 1EX

Part 3 - Variation

Please tick yes

Do you want the proposed variation to have effect as soon as possible?

If not do you want the variation to take effect from

Day		Month		Year	

Please describe briefly the nature of the proposed variation (Please see guidance note 1)
To extend the terminal hour by 4 hours to 5am Sunday to Thursday and by 3.5 hours to 5am Friday and Saturday

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

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 yes

- 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:

- 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)

Sale by retail 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)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 4)		
Thur					
Fri			<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 5)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)		
Thur					
Fri			<u>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</u> (please read guidance note 5)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Tue			
Wed			
Thur			<u>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</u> (please read guidance note 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Wed					
Thur			<u>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</u> (please read guidance note 5)		
Fri					
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 4)		
Wed					
Thur			<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 5)		
Fri					
Sat					
Sun					

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	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur					
Fri			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 5)		
Sat					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 6)			Indoors <input type="checkbox"/>
Day	Start	Finish	
			Outdoors <input type="checkbox"/>
			Both <input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)
Tue			
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)
Thur			
Fri			<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 5)
Sat			
Sun			

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)</p>			<p><u>Please give a description of the type of entertainment you will be providing</u></p>		
Day	Start	Finish	<p><u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><u>Please give further details here</u> (please read guidance note 3)</p>		
Wed					
Thur			<p><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)</p>		
Fri					
Sat			<p><u>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</u> (please read guidance note 5)</p>		
Sun					

Provision of facilities for making music Standard days and timings (please read guidance note 6)			<u>Please give a description of the facilities for making music you will be providing</u>	
			<u>Will the facilities for making music be indoors or outdoors or both – please tick</u> (please read guidance note 2)	
Day	Start	Finish	Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)	
Tue			<u>State any seasonal variations for the provision of facilities for making music</u> (please read guidance note 4)	
Wed			<u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u> (please read guidance note 5)	
Thur				
Fri				
Sat				
Sun				

J

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick (see guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
			Please give a description of the facilities for dancing you will be providing			
Day	Start	Finish	Please give further details here (please read guidance note 3)			
Mon						
Tue						
Wed						
Thur						
Fri						
Sat						
Sun						
			State any seasonal variations for providing dancing facilities (please read guidance note 4)			
			Non standard timings. Where you intend to use the premises for the provision of facilities for dancing at different times to those listed in the column on the left, please list (please read guidance note 5)			

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)			<u>Please give a description of the type of entertainment facility you will be providing</u>		
Day	Start	Finish	<u>Will the entertainment facility be indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 3)		
Wed					
Thur			<u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u> (please read guidance note 4)		
Fri					
Sat			<u>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</u> (please read guidance note 5)		
Sun					

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	Please give further details here (please read guidance note 3) Not Applicable.					
Mon	23:00	05:00						
Tue	23:00	05:00	State any seasonal variations for the provision of late night refreshment (please read guidance note 4) Not Applicable					
Wed	23:00	05:00				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 5) Not Applicable		
Thur	23:00	05:00						
Fri	23:00	05:00						
Sat	23:00	05:00						
Sun	23:00	05:00						

M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon					
Tue					
Wed					
Thur					
Fri					
Sat					
			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 5)		
Sun					

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)

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) Not Applicable
Day	Start	Finish	
Mon	11:00	05:00	
Tue	11:00	05:00	
Wed	11:00	05:00	
Thur	11:00	05:00	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 5) Not Applicable
Fri	11:00	05:00	
Sat	11:00	05:00	
Sun	11:00	05:00	

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

Please tick yes

- I have enclosed the premises licence
- I have enclosed the relevant part of the premises licence

If you have not ticked one of these boxes please fill in reasons for not including the licence, or part of it, below

Reasons why I have failed to enclose the premises licence or relevant part of premises licence
I have not enclosed the license as I removed it from the premise yesterday to submit with this application and now cannot find it at all

P 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,e) (please read guidance note 9)

With the exception of staff still undergoing training, all staff will be trained in those aspects of their job relating to the prevention of crime and disorder, the prevention of public nuisance, and will be aware of those aspects of the Health and Safety at Work etc. Act 1974 which relate to their role within the business

b) The prevention of crime and disorder

We will not employ any staff unless they have been properly trained in those aspects of their job which may have an impact on crime and disorder. The only exception will be for staff still undergoing training, providing that they are closely supervised when serving customers

c) Public safety

The public Safety side of our business is governed by the Health and Safety at Work etc. Act 1974 and in general we will not be doing anything extra to satisfy the requirements of the Licensing act 2003. We will take care not to leave dangerous items such as dinner knives and glass containers within the reach of customers at night, when some of them may have consumed alcohol elsewhere before entering the premises

d) The prevention of public nuisance

The sale of heated food on our premises does not cause any noise problem in itself. We will make sure that our customer door does not bang shut, and that any alert used to signal that the door has been left open does not create a noise problem for neighbours.

Where customers persist in hanging around outside in groups, we will advise them that elderly people in particular often feel intimidated by this. If it is safe to do so, we will advise them politely to disperse

e) The protection of children from harm

The sale of heated food has no direct relevance to protecting children from harm and we will discharge our responsibilities under the Licensing Act simply by being good citizens.


Please tick yes

- I have made or enclosed payment of the fee
- 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 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 5 – Signatures (please read guidance note 10)

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

Signature	
Date	10 March 2010
Capacity	Company Manager

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 12). **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 13)

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)			

Notes for Guidance

This application cannot be used to vary the licence so as to extend the period for which the licence has effect or to vary substantially the premises to which it relates. If you wish to make that type of change to the premises licence you should make a new premises licence application under section 17 of the Licensing Act 2003.

1. 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.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example state type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

This page is intentionally left blank