

MAC'S CAFÉ
Bath Road

Phone: 01189 710549
Mobile: 07796 905341



27 October 2012

Dear Sir/Madam

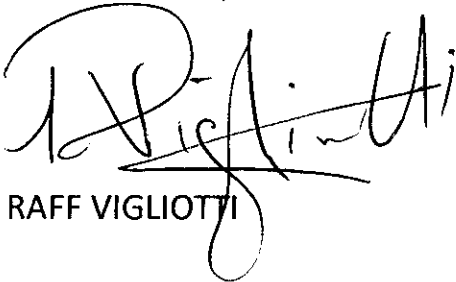
PREMISES LICENSE APPLICATION

Please find enclosed:-

- The premises licence application
- My consent to be DPS
- Age Recognition Policy and Training Records
- Copy of plan marked in red where licensed area is
- Copy of advert of Newbury Weekly News

Trusting this meets with your approval.

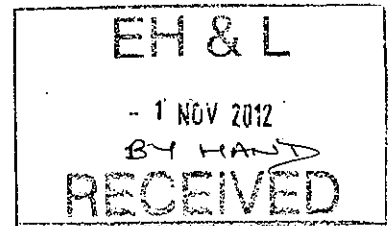
Yours faithfully



RAFF VIGLIOTTI

[West Berkshire District Council.]

R/N15395
£100
1-11-11



**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 **RAFFAELE VIGLIOTTI**

(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 MAC'S CAFÉ BATH ROAD PADWORTH READING			
Post town	READING	Postcode	RG7 5HR

Telephone number at premises (if any)	01189712372 / 07796905341
Non-domestic rateable value of premises	£NOT RATED (FEE £100)

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- 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 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:

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 checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname VIGLIOTTI			First names RAFFAELE		
I am 18 years old or over			✓ Please tick yes		
Current postal address if different from premises address		THE HEDGES BATH ROAD PADWORTH READING			
Post town	READING		Postcode	RG7 5QS	
Daytime contact telephone number			07796905341		
E-mail address (optional)		Raff.vigliotti@hotmail.co.uk			

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
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

01	12	2012						

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)
 Mac's café is a very historic Truck Stop & Café opened in 1930 . Situated on the A4, 3 miles from the M4. It offers all road users a place to stop for Overnight parking , Food & Drink , TV , Socialising & Showers In recent years with road closures & increased competition is necessary to significantly enhance the offering to attract new & retain existing customers .
 This is intended by opening later into the evening (11pm latest) & offering a more substantial menu (sample attached) enhanced by selling alcoholic beverages within the Café & for Off Sales . In addition the introduction of low key music using Classical Jukebox , Small live groups , & Themed music events .
 The use of the site for specific classic car/motorcycle & truck events will continue on a more frequent basis.

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

N/A

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 any that apply |
|---|-------------------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input checked="" type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input checked="" type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input checked="" type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input checked="" type="checkbox"/> |

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 M

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"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)	Both	<input type="checkbox"/>
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur					
Fri			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)		
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 checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) Many vintage & classic vehicle clubs support Macs café & often show classic film footage to their members. This will be occasional but often unplanned.		
Mon	09.00	23.00			
Tue	09.00	23.00	State any seasonal variations for the exhibition of films (please read guidance note 4)		
Wed	09.00	23.00			
Thur	09.00	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 5)		
Fri	09.00	23.00			
Sat	09.00	23.00			
Sun	09.00	22.00			

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			State any seasonal variations for indoor sporting events (please read guidance note 4)
Wed			
Thur			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 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"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
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 checked="" type="checkbox"/>
Day	Start	Finish			
Mon	12.00		Please give further details here (please read guidance note 3) Many vintage & classic vehicle clubs support Macs café , this often involves low key live entertainers , this is an activity we would look to expand . We also hold frequent (max 20 p.a.) events for Charity & local Clubs which may require live music, this is only during the day 11am to 5pm , Music generally will be contained within the Café area and finished by 11pm.,		
		23.00			
Tue	12.00				
		23.00			
Wed	12.00		State any seasonal variations for the performance of live music (please read guidance note 4) NEW YEARS EVE TO 1am NEW YEARS DAY		
		23.00			
Thur	12.00				
		23.00			
Fri	12.00		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)		
		23.00			
Sat	12.00				
		23.00			
Sun	12.00				
		23.00			

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 checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) Macs café is often host and meeting point to Motorcycle & Car tours often early in the day. We would like to offer a classical Jukebox/Music System Many vintage & classic vehicle clubs support Macs café. We also hold frequent (max 20 p.a.) events for Charity & local Clubs outside which may require music. Music generally will be contained within the Café area and finished by 11pm State any seasonal variations for the playing of recorded music (please read guidance note 4) NEW YEARS EVE TO 1am NEW YEARS DAY 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)		
Mon	07.00	23.00			
Tue	07.00	23.00			
Wed	07.00	23.00			
Thur	07.00	23.00			
Fri	07.00	23.00			
Sat	07.00	23.00			
Sun	08.00	22.00			

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance 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 dance</u> (please read guidance note 4)		
Wed					
Thur			<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)		
Fri					
Sat					
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing Facilities for Dancing alongside the provision of Music		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon	16.00	23.00		Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Tue	16.00	23.00	Please give further details here (please read guidance note 3) Ancillary to the Live & Recorded music we would like to provide facilities for Dancing . This would generally be inside the building.		
Wed	16.00	23.00			
Thur	16.00	23.00	State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4) NEW YEARS EVE TO 1am NEW YEARS DAY		
Fri	16.00	23.00			
Sat	16.00	23.00	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 5)		
Sun	16.00	22.00			

I

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 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 provision of late night refreshment</u> (please read guidance note 4)		
Wed					
Thur			<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)		
Fri					
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)	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 4) NEW YEARS EVE TO 1am NEW YEARS DAY					
Mon	11.00	23.00						
Tue	11.00	23.00						
Wed	11.00	23.00						
Thur	11.00	23.00						
Fri	11.00	23.00						
Sat	11.00	23.00						
Sun	12.00	22.00						
						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 5)		

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

Name RAFFAELE VIGLIOTTI	
Address THE HEDGES BATH ROAD PADWORTH READING	
Postcode	RG7 5QS
Personal licence number (if known) TBC	
Issuing licensing authority (if known) WEST BERKSHIRE DISTRICT COUNCIL	

K

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).

L

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) New years eve to 1.30am new years day
Day	Start	Finish	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)
Mon	07.00		
		23.30	
Tue	07.00		
		23.30	
Wed	07.00		
		23.30	
Thur	07.00		
		23.30	
Fri	07.00		
		23.30	
Sat	07.00		
		23.30	
Sun	07.00		
		22.30	

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 9)

Mac's café is a very historic Truck Stop & Café opened in 1930 . Situated on the A4, 3 miles from the M4. It offers all road users a place to stop for Overnight parking , Food & Drink , TV , Socialising & Showers
The use of the site for specific classic car/motorcycle & truck events will continue on a more frequent basis. The intention of this application is to offer our customers a more attractive experience and stay in line with other similar style businesses. The Drinks offering will include a range of Alcohol Free & Soft Drinks.
The retention of the Historical side of the business is critical

b) The prevention of crime and disorder

All Alcohol will be sold in a responsible manner , The staff will be trained fully to avoid excessive supply.

c) Public safety

Additional fencing will be provided for events that are likely to overspill onto the parking area .
Stewards will be arranged to ensure this occurs . In addition plastic glasses will be used.
Clear entry & exit routes will be marked to avoid potential collisions .

d) The prevention of public nuisance

The business will be closed by 11pm every evening , no trucks arrive for parking after 10pm.
All events held in the car park will be strictly policed by stewards to avoid excessive vehicle noise.

e) The protection of children from harm

The style of the business does not encourage children unless part of a Family group.
 There will no alcohol consumed by any under 18's
 We will introduce a strict "Age Recognition Policy" Copy attached for your info.
 All staff will be fully trained and recorded , training records attached

Checklist:

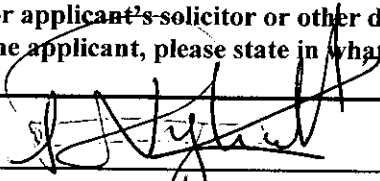
Please tick to indicate agreement

- 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.

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 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	24/10/12
Capacity	Owner

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

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 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'.
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 or 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, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.