

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~~ LEE ROBERT MCCALL

(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 Unit 1, Britannia House, 75 High Street,			
Post town	SHEERNESS	Postcode	ME12 1TX

Telephone number at premises (if any)	01795 256568
Non-domestic rateable value of premises	£ 9,400

Part 2 - Applicant details

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

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

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)

<input checked="" type="radio"/> Mr	<input type="radio"/> Mrs	<input type="radio"/> Miss	<input type="radio"/> Ms	Other Title (for example, Rev)	
Surname			First names		
MCCALL			LEE ROBERT		
Date of birth		I am 18 years old or over		Please tick yes	
[REDACTED]				<input checked="" type="checkbox"/>	
Nationality					
British					
Current residential address if different from premises address		6 First Avenue,			
Post town		Postcode			
SHEERNESS		ME12 1YE			
Daytime contact telephone number		[REDACTED]			
E-mail address (optional)		[REDACTED]			
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service (please see note 15 for information)					

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Second individual applicant (if applicable)

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
Date of birth or over		I am 18 years old		Please tick yes	
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service: (please see note 15 for information)					

(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?

DD	MM	YYYY
15	08	2022

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)

The premises will be a fine dining restaurant with approx 20-30 covers. There will be a bar and seating area for diners to wait for their taxi's. See plan.

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 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)	<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 type="checkbox"/>

<u>Provision of late night refreshment</u> (if ticking yes, fill in box I)	<input checked="" type="checkbox"/>
<u>Supply of alcohol</u> (if ticking yes, fill in box J)	<input checked="" type="checkbox"/>

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	
Day	Start	Finis h		Outdoors	
Mon				<u>Please give further details here</u> (please read guidance note 4)	
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)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			<u>Please give further details here</u> (please read guidance note 4)		
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			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
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 6)
Fri			
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	
				Outdoors	
Day	Start	Finish		Both	
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	
Day	Start	Finis h		Outdoors	
				Both	<input checked="" type="checkbox"/>
Mon	19.00	22.00	Please give further details here (please read guidance note 4) Will only occur on the odd occasion and will likely be a harpist or Pianist.		
Tue	19.00	22.00			
Wed	19.00	22.00	State any seasonal variations for the performance of live music (please read guidance note 5)		
Thur	19.00	22.00			
Fri	19.00	22.00	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 6) Possibly New YEARS EVE + CHRISTMAS EVE 11am - 00.00.		
Sat	19.00	22.00			
Sun	11.00	22.00			

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 checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finis h	Please give further details here (please read guidance note 4) Background music only for diners.		
Mon	10.00	23.00			
Tue	10.00	23.00			
Wed	10.00	23.00	State any seasonal variations for the playing of recorded music (please read guidance note 5)		
Thur	10.00	23.00			
Fri	10.00	00.00	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)		
Sat	10.00	00.00			
Sun	10.00	22.00			
			New years Eve + Christmas Eve 11am - 00.00		

G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
Mon				Please give further details here (please read guidance note 4)	
Tue					
Wed			State any seasonal variations for the performance of dance (please read guidance note 5)		
Thur					
Fri			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 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	
Mon				Outdoors	
				Both	
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					

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 checked="" 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 the provision of late night refreshment</u> (please read guidance note 5)		
Thur					
Fri			<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)		
Sat					
Sun					

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 checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finis h	State any seasonal variations for the supply of alcohol (please read guidance note 5) Christmas Eve 10.00 - 00.00 New Years Eve 10.00 - 01.00		
Mon	10.00	23.00			
Tue	10.00	23.00			
Wed	10.00	23.00			
Thur	10.00	23.00			
Fri	10.00	00.00			
Sat	10.00	00.00			
Sun	10.00	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 6) NONE		

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	JOHN MALCOLM DURNALL
Date of birth	██████████
Address	████████████████████ ██████████ ██████
Postcode	██████ ██████
Personal licence number (if known)	OS / 02224 / LAPER
Issuing licensing authority (if known)	ROTHER 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 9).

~~None~~

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	Finis h	<p>CHRISTMAS EVE 10.00 - 00.00</p> <p>NEW YEARS EVE 10.00 - 01.00</p>
Mon	10.00	23.00	
Tue	10.00	23.00	
Wed	10.00	23.00	
Thur	10.00	23.00	
Fri	10.00	00.00	
Sat	10.00	00.00	
Sun	10.00	22.00	
			<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> <p>NONE</p>

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)

b) The prevention of crime and disorder

There shall be no admittance or re-admittance to the premises after 10pm except for patrons permitted to temporarily leave the premises to smoke.

This premises must only operate as a restaurant in which,
1. customers are seated at a table, 2. which provides substantial table meal that are served using non disposable cutlery.

See
Attached
Sheet
1.

c) Public safety

Bottle Bins will be kept secure and away from public areas.

Every 10 minutes all empty drinking vessels, bottles or containers will be collected + cleared away.

d) The prevention of public nuisance

When live music or recorded music takes place inside the premises all doors and windows will be kept shut. Entrance + Exit doors will be fitted with self-closing mechanism that will enable these doors to automatically close once persons enter or leave the premises.

See
Attached
Sheet
2.

e) The protection of children from harm

A Challenge 21/25 proof of Age Scheme shall be operated at the premises.
 No promotional material for alcoholic products will be displayed so that it is visible from the street.

See
 Attached
 Sheet
 3.

Checklist:

Please tick to indicate agreement

<input type="checkbox"/>	I have made or enclosed payment of the fee.	✓
<input type="checkbox"/>	I have enclosed the plan of the premises.	✓
<input type="checkbox"/>	I have sent copies of this application and the plan to responsible authorities and others where applicable.	✓
<input type="checkbox"/>	I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.	✓
<input type="checkbox"/>	I understand that I must now advertise my application.	✓
<input type="checkbox"/>	I understand that if I do not comply with the above requirements my application will be rejected.	
<input type="checkbox"/>	[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 or my share code issued by the Home Office online right to work checking service (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
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	<p>the UK (please read guidance note 15).</p> <ul style="list-style-type: none"> 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, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)
Signature	
Date	08/07/2022
Capacity	Director.

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	
Capacity	

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

Attached Sheet 1

3. which do not provide any takeaway service of food or drink for immediate consumption.
4. Alcohol must not be sold, supplied or consumed on the premises otherwise than to persons who are partaking of a table meal and is ancillary to the table meal.
5. The supply of Alcohol is by way of waiter or waitress only.
6. There shall be no sales of Alcohol for consumption off the premises.
7. Spirits will be displayed behind the counter / bar.
8. CCTV will be provided in the form of a recordable system, capable of providing pictures of evidential quality in all lighting conditions particularly facial recognition.
9. All staff shall be trained in recognising signs of drunkenness, how to refuse service, and the premises duty of care. Documented records of completed training shall be kept for each member of staff. Training shall regularly be refreshed at no greater than 6 monthly intervals. Training records shall be made available for inspection upon request by a police officer or an authorised officer of the Authority.
10. The premises shall display prominent signage indicating that it is an offence to sell Alcohol to anyone who is drunk.
11. An incident log shall be kept at the premises, and made available on request to a police officer, police licensing officer or council authorised licensing officer. It must be completed within 24 hours of the incident and will record the following:
 1. All crimes reported to the venue
 2. All ejections of patrons.
 3. Any complaints received concerning crime + disorder.
 4. Any incidents of disorder.
 5. All seizures of drugs or offensive weapons.
 6. Any faults with C.C.T.V. system
 7. Any refusal of the sale of Alcohol.
 8. Any visits by a relevant Authority

Attached Sheet 2.

Notices + Signage - Noise

1. Notices shall be prominently displayed at all exits requesting Patrons to respect the needs of local residents and businesses and to leave the Area quietly.
2. Notices shall be displayed at any area used for Smoking requesting patrons to respect the needs of local residents and use the Area quietly.
3. Prominent Signage indicating the permitted hours for sale of Alcohol shall be displayed so as to be visible before entering the Premises, where Alcohol is on public display and at the point of Sale.
4. Any outside Area's must not be used by customers after 9pm ~~unless~~ for Smoking, except.
 1. All tables and chairs shall be in the outside Area and shall be rendered unusable by 10pm each day.
 2. patrons permitted to temporarily leave and then re-enter the Premises, e.g. to smoke shall not be permitted to take drinks or glass containers with them.

Taxis

1. The premises licence holder will provide a taxi phone service and internal wait area for customers.

Attached Sheet 3.

1. The premises licence holder or designated premises Supervisor must keep a refusal book. Staff to be trained to complete a refusal book / record immediately after the refusal but no later than the end of their shift. The register must be kept on the premises and will detail:

a) Day, date, time of refusal.

b) Item refused

c) Name or description of person refused sale.

d) reason for refusal.

e) each entry is to be checked and signed by the DPS / Licencee no later than 1 week after the entry has been made.

The register must be made available for police, police licencing officer, and authorised officers from Swale Borough Council on demand either electronically or hard copy.