

APPENDIX 3

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 **MPK Garages 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 P0905 |
|---|

Part 1 – Premises Details

| | | | |
|--|--------|----------|---------|
| Postal address of premises or, if none, ordnance survey map reference or description Maltby Service Station Rotherham Road | | | |
| Post town | Maltby | Postcode | S66 8ND |

| | |
|---|---------|
| Telephone number at premises (if any) | |
| Non-domestic rateable value of premises | £18,500 |

Part 2 – Applicant details

| | | | |
|---|------------------------------|----------|---------|
| Daytime contact telephone number | | | |
| E-mail address (optional) | gill@licensingmatters.net | | |
| Current postal address if different from premises address | MPK House 318 Melton Road | | |
| Post town | Leicester | Postcode | LE4 7SL |

Part 3 - Variation

Please tick as appropriate

Do you want the proposed variation to have effect as soon as possible? Yes No

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

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

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

Please describe briefly the nature of the proposed variation

1. A change of the hours of opening & alcohol sales to 24 hours.
2. To add late night refreshment Mon to Sun 2300 to 0500.
3. Change of floorplan.
4. To remove all current conditions at Annex 2 and replace with more appropriate conditions.

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:

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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 see guidance note 3) | Please tick all that apply |
|---|-----------------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input 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 type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input 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"/> |

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

B

| | | | | | |
|--|-------|--------|--|----------|--------------------------|
| Films Standard days and timings (please read guidance note 8) | | | Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 4) | Indoors | <input type="checkbox"/> |
| | | | | Outdoors | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Day | Start | Finish | Please give further details here (please read guidance note 5) | | |
| Mon | | | | | |
| Tue | | | State any seasonal variations for the exhibition of films (please read guidance note 6) | | |
| 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 7) | | |
| Fri | | | | | |
| Sat | | | | | |
| Sun | | | | | |

C

| | | | |
|---|-------|--------|---|
| Indoor sporting events Standard days and timings (please read guidance note 8) | | | Please give further details (please read guidance note 5) |
| Day | Start | Finish | |
| Mon | | | State any seasonal variations for indoor sporting events (please read guidance note 6) |
| Tue | | | |
| Wed | | | 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 7) |
| Thur | | | |
| Fri | | | |
| Sat | | | |
| Sun | | | |

D

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|---|-------|--------|---|----------|--------------------------|
| Boxing or wrestling entertainments Standard days and timings (please read guidance note 8) | | | <u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 4) | 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 5) | | |
| Mon | | | | | |
| Tue | | | <u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 6) | | |
| 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 7) | | |
| Fri | | | | | |
| Sat | | | | | |
| Sun | | | | | |

E

| Live music Standard days and timings (please read guidance note 8) | | | Will the performance of live music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 4) | 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 5) | | |
| Tue | | | | | |
| Wed | | | <u>State any seasonal variations for the performance of live music</u> (please read guidance note 6) | | |
| Thur | | | | | |
| Fri | | | <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 7) | | |
| Sat | | | | | |
| Sun | | | | | |

F

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|---|-------|--------|--|----------|--------------------------|
| Recorded music Standard days and timings (please read guidance note 8) | | | Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 4) | Indoors | <input type="checkbox"/> |
| | | | | Outdoors | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Day | Start | Finish | Please give further details here (please read guidance note 5) | | |
| Mon | | | | | |
| Tue | | | State any seasonal variations for the playing of recorded music (please read guidance note 6) | | |
| Wed | | | | | |
| Thur | | | 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 7) | | |
| Fri | | | | | |
| Sat | | | | | |
| Sun | | | | | |

G

| Performances of dance Standard days and timings (please read guidance note 8) | | | <u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 4) | 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 5) | | |
| Mon | | | | | |
| | | | | | |
| Tue | | | | | |
| | | | | | |
| Wed | | | <u>State any seasonal variations for the performance of dance</u> (please read guidance note 6) | | |
| | | | | | |
| 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 7) | | |
| | | | | | |
| Sat | | | | | |
| | | | | | |
| Sun | | | | | |
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H

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|---|-------|--------|---|----------|--------------------------|
| <p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 8)</p> | | | <p>Please give a description of the type of entertainment you will be providing</p> | | |
| Day | Start | Finish | <p><u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 4)</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 5)</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 6)</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 7)</p> | | |
| Sun | | | | | |

I

| Late night refreshment Standard days and timings (please read guidance note 8) | | | Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 4) | Indoors | <input type="checkbox"/> |
|---|-------|--------|--|----------|-------------------------------------|
| Day | Start | Finish | | Outdoors | <input checked="" type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Mon | 2300 | 0500 | Please give further details here (please read guidance note 5) | | |
| | | | | | |
| Tue | 2300 | 0500 | Please give further details here (please read guidance note 5) | | |
| | | | | | |
| Wed | 2300 | 0500 | State any seasonal variations for the provision of late night refreshment (please read guidance note 6) | | |
| | | | | | |
| Thur | 2300 | 0500 | State any seasonal variations for the provision of late night refreshment (please read guidance note 6) | | |
| | | | | | |
| Fri | 2300 | 0500 | 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 7) | | |
| | | | | | |
| Sat | 2300 | 0500 | | | |
| | | | | | |
| Sun | 2300 | 0500 | 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 7) | | |
| | | | | | |

J

| | | | | | |
|---|-------|--------|--|------------------|-------------------------------------|
| Supply of alcohol Standard days and timings (please read guidance note 8) | | | Will the supply of alcohol be for consumption – please tick (please read guidance note 9) | On the premises | <input type="checkbox"/> |
| | | | | Off the premises | <input checked="" type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Day | Start | Finish | State any seasonal variations for the supply of alcohol (please read guidance note 6) | | |
| Mon | 0000 | 2359 | | | |
| | | | | | |
| Tue | 0000 | 2359 | | | |
| | | | | | |
| Wed | 0000 | 2359 | | | |
| | | | | | |
| Thur | 0000 | 2359 | | | |
| | | | | | |
| Fri | 0000 | 2359 | | | |
| | | | | | |
| Sat | 0000 | 2359 | | | |
| | | | | | |
| Sun | 0000 | 2359 | | | |
| | | | | | |

K

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| <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 10).</p> <p>NONE</p> |
|--|

L

| | | | |
|---|-------|--------|---|
| Hours premises are open to the public Standard days and timings (please read guidance note 8) | | | State any seasonal variations (please read guidance note 6) |
| Day | Start | Finish | |
| Mon | 0000 | 2359 | |
| | | | |
| Tue | 0000 | 2359 | |
| | | | |
| Wed | 0000 | 2359 | |
| | | | |
| Thur | 0000 | 2359 | |
| | | | |
| Fri | 0000 | 2359 | |
| | | | |
| Sat | 0000 | 2359 | |
| | | | |
| Sun | 0000 | 2359 | |
| | | | |
| | | | 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 7) |

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.

YES see below

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.

iv 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 11)

Between the hours of 2300 and 0600 the store will be closed and customers will not be allowed access to the shop. All transactions will only take place via a hatch and night pay window which is covered directly by CCTV.

On first appointment, all staff employed at the premises will receive training on the Licensing Act 2003 including input on preventing underage sales, preventing sales of alcohol to people who are drunk and any other relevant matters. Training shall be regularly refreshed at no less than 6 monthly intervals. The training must be recorded (by way of either a paper or online system) and made available for inspection upon request of a Police Officer or an authorised officer of the licensing authority or (in the case of online training) within 48 hours.

b) The prevention of crime and disorder

A CCTV system will be in operation at the premises and recorded images shall be retained for a period of 31 days. CCTV images will be provided to the police and other responsible authorities as soon as practicable and in any case within 48 hours of a request for such images, subject of the provisions of the DPA.

c) Public safety

An incident register will be maintained at the premises and made available to the authorities on request.

All spirits will be located behind the counter

d) The prevention of public nuisance

A register of refusals of alcohol will be maintained at the premises. The register shall be examined on a regular basis by the duty manager/ DPS and the date and time of each examination will be endorsed in the register. The register will be made available for inspection by the Police and other responsible authority

e) The protection of children from harm

The premises will adopt a 'Challenge 25' policy. This means that if a customer purchasing alcohol appears to be under the age of 25, they will be asked for proof of their age, to prove that they are 18 years or older.

The only forms of identification that will be accepted at the premises are a passport, UK photo-card driving licences, military ID & cards bearing the 'PASS' hologram.

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee; or
- 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.
- 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, 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.

Part 5 – Signatures (please read guidance note 12)

Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (please read guidance note 13). **If signing on behalf of the applicant, please state in what capacity.**

| | |
|-----------|------------------|
| Signature | G. Sherratt |
| Date | 27/10/20 |
| Capacity | Authorised agent |

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 14). **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 15)

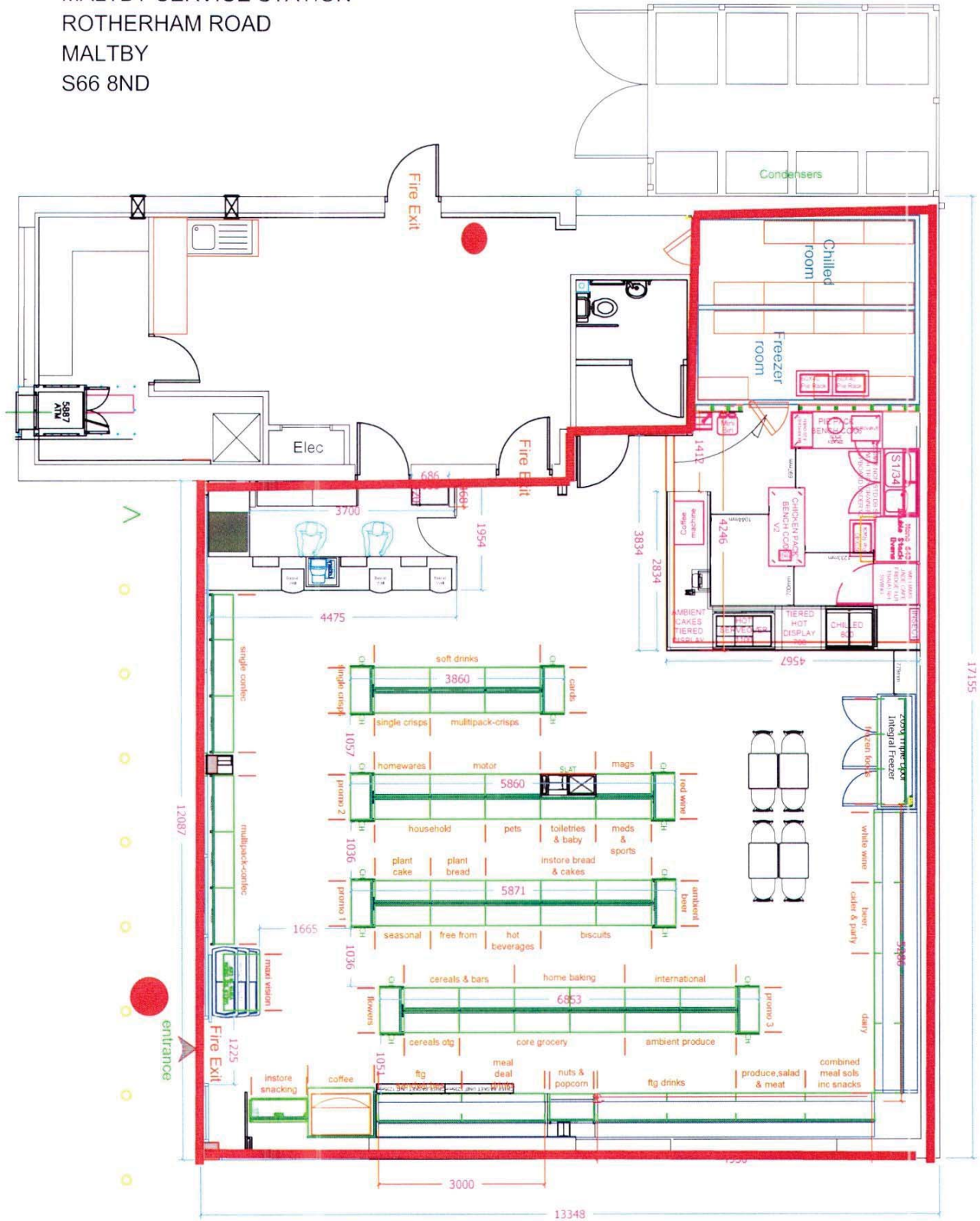
Licensing Matters Ltd
54 Fairfield Drive

| | | | |
|------------------|------------------|------------------|----------------|
| Post town | Clitheroe | Post code | BB7 2PE |
|------------------|------------------|------------------|----------------|

| | |
|----------------------------------|-------------------|
| Telephone number (if any) | [REDACTED] |
|----------------------------------|-------------------|

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)
gill@licensingmatters.net

MALTBY SERVICE STATION
 ROTHERHAM ROAD
 MALTBY
 S66 8ND



= LICENSED AREA

● = EXTINGUISHER

MPK

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