

Appendix 2

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 **David Marshall**

(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			
The Longbar Unit 2 Braithwell Road Ravenfield			
Post town	Rotherham	Postcode	S65 4LH

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£6400

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	<input type="checkbox"/>	please complete section (B)

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d)	a charity		please complete section (B)
e)	the proprietor of an educational establishment		please complete section (B)
f)	a health service body		please complete section (B)
g)	a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales		please complete section (B)
ga)	a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England		please complete section (B)
h)	the chief officer of police of a police force in England and Wales		please complete section (B)

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

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

(A) individual applicants (fill in as applicable)

Mr <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname Marshall			First names David		
Date of birth 18/02/1962		I am 18 years old or over		Please tick yes <input checked="" type="checkbox"/>	
Nationality British					
Current residential address if different from premises address		6 Kingsley Drive Ravenfield			
Post town	Rotherham		Postcode	S65 4GY	
Daytime contact telephone number			07872476015		
E-mail address (optional)		davemarshall1@hotmail.co.uk			
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)

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Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
A	S	A P

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)

A cafe/coffee shop and Deli during the day-time, operating as a small wine bar in the evening with a small and intimate setting, with seating for 38 persons.

No outdoor area for consumption

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

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

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

Provision of regulated entertainment (please read guidance note 2)	Please tick all that apply
a) plays (if ticking yes, fill in box A)	
b) films (if ticking yes, fill in box B)	
c) indoor sporting events (if ticking yes, fill in box C)	
d) boxing or wrestling entertainment (if ticking yes, fill in box D)	
e) live music (if ticking yes, fill in box E)	
f) recorded music (if ticking yes, fill in box F)	
g) performances of dance (if ticking yes, fill in box G)	
h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)	

<u>Provision of late night refreshment</u> (if ticking yes, fill in box I)	X
<u>Supply of alcohol</u> (if ticking yes, fill in box J)	X

In all cases complete boxes K, L and M

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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	
				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					

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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	<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Mon	_____ _____	_____ _____	
Tue	_____ _____	_____ _____	
Wed	_____ _____	_____ _____	
Thur	_____ _____	_____ _____	
Fri	_____ _____	_____ _____	
Sat	_____ _____	_____ _____	
Sun	_____ _____	_____ _____	

Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list (please read guidance note 6)

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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	
Day	Start	Finish		Outdoors	
Mon				Both	
Tue					
Wed			<u>Please give further details here</u> (please read guidance note 4)		
Thur			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)		
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					

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E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors		
Day	Start	Finish		Outdoors		
Mon				<u>Please give further details here</u> (please read guidance note 4)		
Tue				<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)		
Wed			<u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)			
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 6)			
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 6)			
Sat			<u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)			
Sun			<u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)			

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F

Recorded music Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music 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 the playing of recorded music</u> (please read guidance note 5)		
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 6)		
Sat					
Sun					

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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	
Day	Start	Finish		Outdoors	
Mon				Both	
Tue					
Wed			<u>Please give further details here</u> (please read guidance note 4)		
Thur			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)		
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					

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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	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
Mon				Outdoors	
				Both	
Tue				Please give further details here (please read guidance note 4)	
Wed			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)		
Thur					
Fri					
Sat			Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list (please read guidance note 6)		
Sun					

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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	X
				Outdoors	
				Both	
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon					
Tue					
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 5)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list (please read guidance note 6) New Year's Eve between 23:00 and 01:30 on the day following		
Sat	23:00	23:30			
Sun					

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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 type="checkbox"/>
Day	Start	Finish			Both	x
Mon	12:00	22:30	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5) <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) New Year's Eve between 12:00 and 01:30 on the day following			
Tue	12:00	22:30				
Wed	12:00	22:30				
Thur	12:00	22:30				
Fri	12:00	22:30				
Sat	12:00	23:30				
Sun	12:00	17:30				

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	David Marshall
Date of birth	18/02/1962
Address <small>Note: Application for change of address of personal licence to the address below has been made</small>	
6 Kingsley Drive, Ravenfield, Rotherham	
Postcode	S65 4GY
Personal licence number (if known)	
RM0182	
Issuing licensing authority (if known)	
RMBC	

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Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 9).

None

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	09:00	23:00	
Tue	09:00	23:00	
Wed	09:00	23:00	
Thur	09:00	23:00	
Fri	09:00	23:00	
Sat	09:00	00:00	
Sun	09:00	18:00	
<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>New Year's Eve between 09:00 and 02:00 on the day following</p>			

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M

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

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

1. **A Challenge 25 Policy shall be in operated. This Policy shall require that any person who appears to be under the age of 25 must provide ID prior to being served alcohol. Acceptable forms of ID are:**
 - a) a passport;
 - b) a UK photo driving licence; or
 - c) a military ID card.
2. **All refusals made under the Challenge 25 Policy shall be logged in a bound book. This log must show:**
 - a) date of refusal made;
 - b) member of staff who made the refusal; and
 - c) if refused, whether fake ID was seized.
3. **Signs shall be displayed inside the premises that advertise that the premises operates “Challenge 25”.**
4. **A bound incident book shall be maintained, in which the following shall be recorded:**
 - a) All incidents of crime and disorder occurring at the premises; and
 - b) Details of when the Police are called.
5. **The Challenge 25 log and the incident book shall be kept on the premises and shall be available for inspection upon request by the Police or an authorised officer of the Licensing Authority.**
6. **The DPS, or their nominated deputy, shall check the Challenge 25 log and the incident book at least once a week, and sign and date each check.**
7. **The DPS shall routinely attend meetings of the local Pubwatch.**
8. **The premises shall operate in accordance with the “ask Angela scheme” ; and notices to this effect shall be displayed.**
9. **The CCTV system installed at the premises, shall:**
 - a) be maintained fully at all times;
 - b) make and retain clear images; and
 - c) show an accurate date and time that the images were made.
 - d) be both internal and external.
10. **All CCTV images shall be retained for a period of not less than 31 days.**

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11. CCTV images shall be immediately made available for review upon request of the Police or an authorised officer of the Licensing Authority.
12. A copy of a CCTV image shall be provided within 24 hours upon request of the Police or an authorised officer of the Licensing Authority.
13. A record of each member of staff who is authorised to sell alcohol shall be kept on the premises. This record shall include the staff members full name, address, and date of birth.
14. There shall be a zero-drug tolerance policy in operation at the premises, which shall include the requirement that regular checks are carried out by management to prevent the use of drugs by patrons; and that such checks are recorded. A copy of the premises drugs policy, and associated records, shall kept at the premises and made available to the Police or an authorised officer of the Licensing Authority upon request.
15. No adult entertainment or services shall be provided at the premises.
16. Children must be accompanied by an adult(s) at all times.
17. Children will not be permitted on the premises after 21.00 hours.
18. There shall be no outdoor consumption of alcohol. Alcohol shall only be permitted to be taken off the premises in sealed containers.
19. All staff shall receive training on induction and year thereafter, on:
 - a) operation of 'Challenge 25';
 - b) types of acceptable ID;
 - c) method of recording refusals;
 - d) refusing sales of alcohol to persons who appear to be drunk;
 - e) preventing proxy sales;
 - f) incident recording and when to call the Police;
 - g) operation of the "ask Angela Scheme" ; and
 - h) how to review the CCTV system if requested.
20. Staff training shall be recorded, records shall be kept of the premises and shall, on request, be made available for inspection by the Police or an authorised officer of the Licensing Authority.

b) The prevention of crime and disorder

See Box a) Above

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c) Public safety

See Box a) Above

d) The prevention of public nuisance

See Box a) Above

e) The protection of children from harm

See Box a) Above

Checklist:

Please tick to indicate agreement

•	I have made or enclosed payment of the fee.	X
•	I have enclosed the plan of the premises.	X
•	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.	X
•	I understand that I must now advertise my application.	X
•	I understand that if I do not comply with the above requirements my application will be rejected.	X
•	[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).	X

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.

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Part 4 – Signatures (please read guidance note 11)

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

Declaration	<ul style="list-style-type: none"> [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15). The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, 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	David Marshall
Date	25/09/2024
Capacity	Applicant

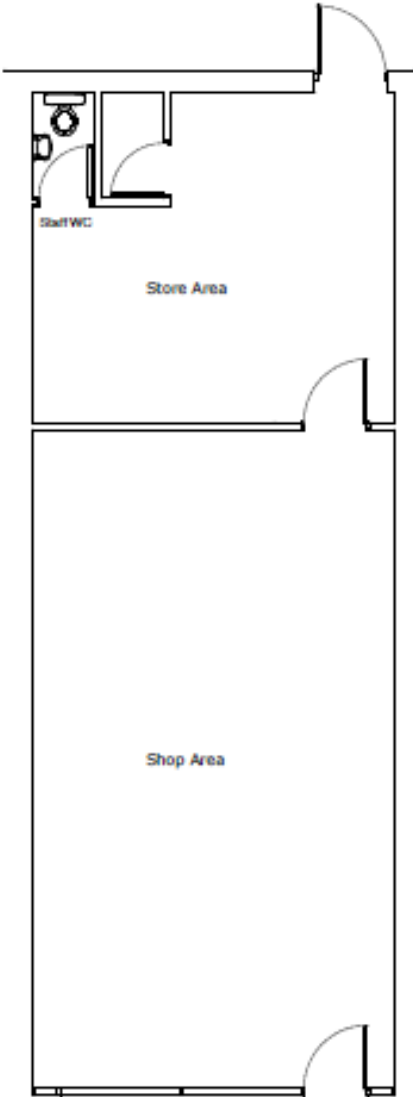
For joint applications, signature of 2nd applicant or 2nd applicant’s solicitor or other authorised agent (please read guidance note 13). **If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	
Capacity	

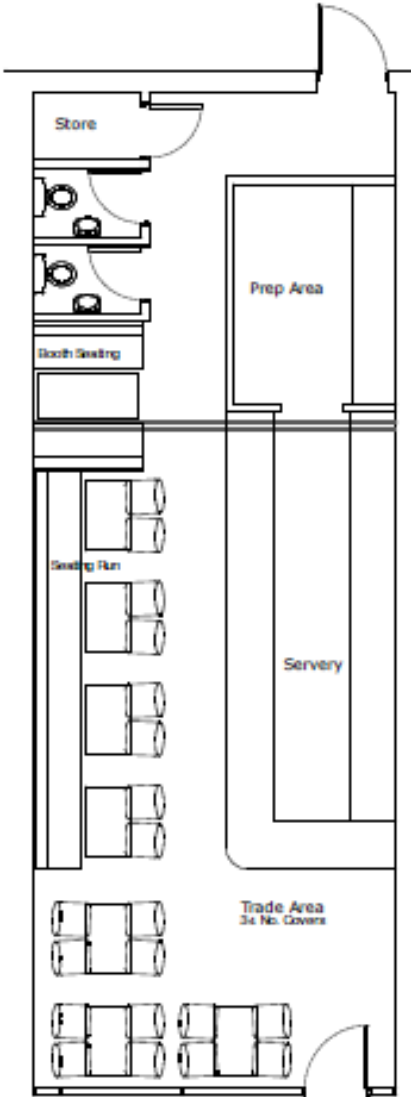
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)			
David Marshall			
6 Kingsley Drive, Ravenfield			
Post town	Rotherham	Postcode	S65 4GY
Telephone number (if any)	07872476015		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			
davemarshall1@hotmail.co.uk			

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Layout Plan



Existing Plan



Proposed Plan