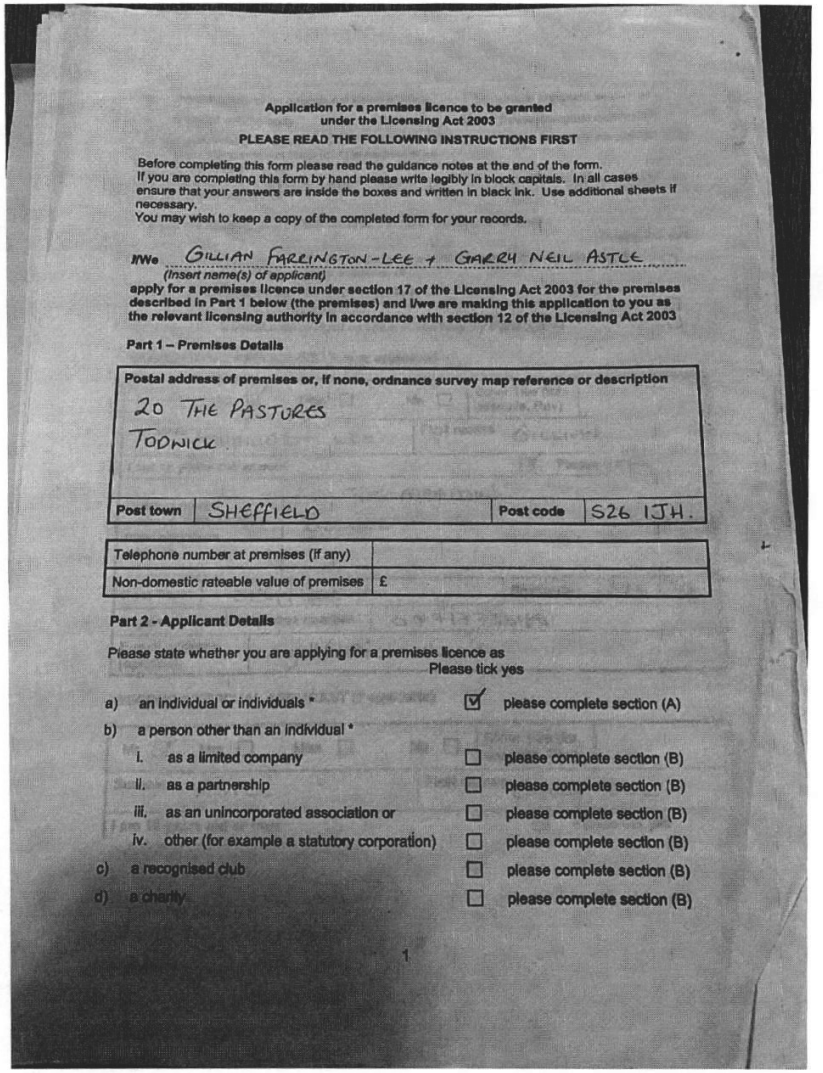
APPENDIX 2
APPLICATION FORM



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 GILLIAN FARINGTON-LEE & GARRY NEIL ASTLE
(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
20 THE PASTURES
TODWICK

Post town	SHEFFIELD	**Post code**	S26 1JH.

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

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)

1

Current postal address if different from premises address	[redacted] TODWICK
Post Town	SHEFFIELD
Daytime contact telephone numbe	[redacted]
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? Day 01 Month 10 Year 2020

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

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 ☐	Mrs ☑	Miss ☐	Ms ☐	Other Title (for example, Rev)	
Surname FARRINGTON-LEE			First names GILLIAN.		
I am 18 years old or over			☑ Please tick yes		
Current postal address if different from premises address	[redacted] TODWICK				
Post Town	SHEFFIELD		Postco[redacted]		
Daytime contact telephone number	[redacted]				
E-mail address (optional)	[redacted]				

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr ☑	Mrs ☐	Miss ☐	Ms ☐	Other Title (for example, Rev)	
Surname ASTLE			First names GARRY NEIL.		
I am 18 years old or over			☑ Please tick yes		

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 ☐
Day	Start	Finish		Outdoors ☐
				Both ☐
Mon			Please give further details here (please read guidance note 3)	
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				

Please give a general description of the premises (please read guidance note1)

The premises is currently an interior design shop with a hairdressers attached to the side. Previously it has been a village mini supermarket. It is situated on a main road near other shops and a takeaway. There are residential houses nearby and a car park to the front of the building. An enclosed garden is at the back with access.

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 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

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			

B

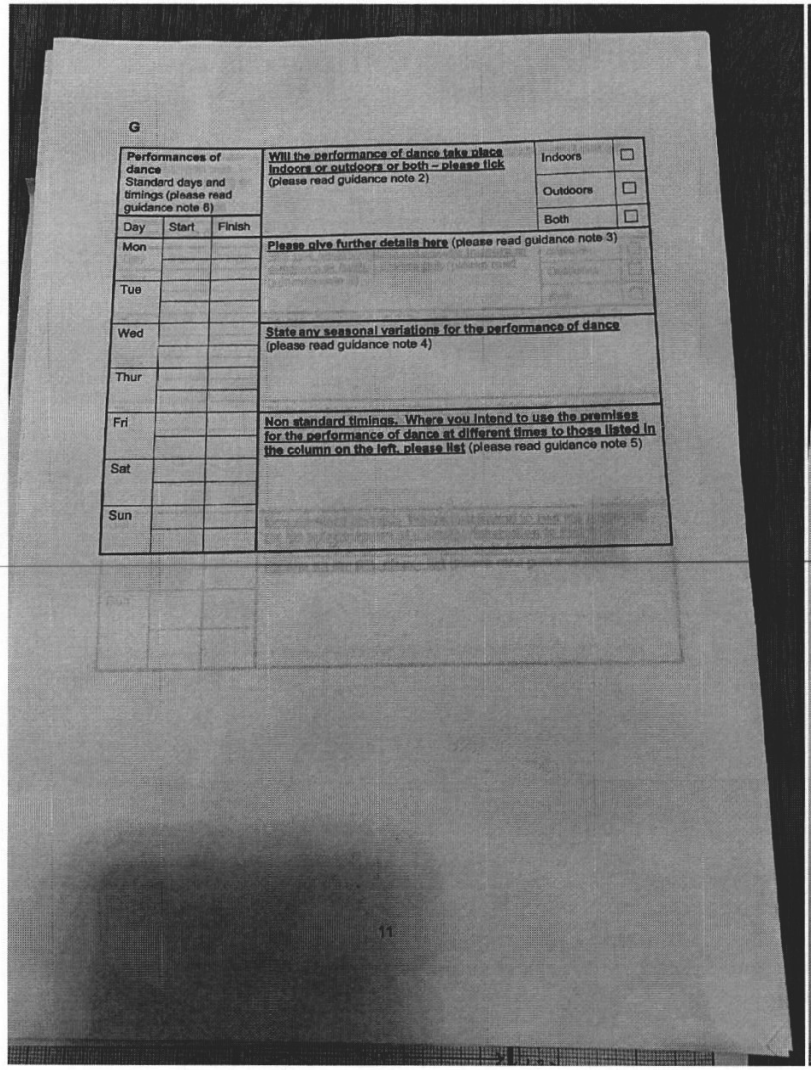
Films Standard days and timings (please read guidance note 6)			**Will the exhibition of films take place indoors or outdoors or both – please tick** (please read guidance note 2)		
				Indoors	☐
				Outdoors	☐
Day	Start	Finish		Both	☐
Mon			**Please give further details here** (please read guidance note 3)		
Tue					
Wed			**State any seasonal variations for the exhibition of films** (please read guidance note 4)		
Thur					
Fri			**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)		
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	☐
				Outdoors	☐
Day	Start	Finish		Both	☐
Mon			**Please give further details here** (please read guidance note 3)		
Tue					
Wed			**State any seasonal variations for the performance of live music** (please read guidance note 4)		
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 5)		
Sat					
Sun					

D

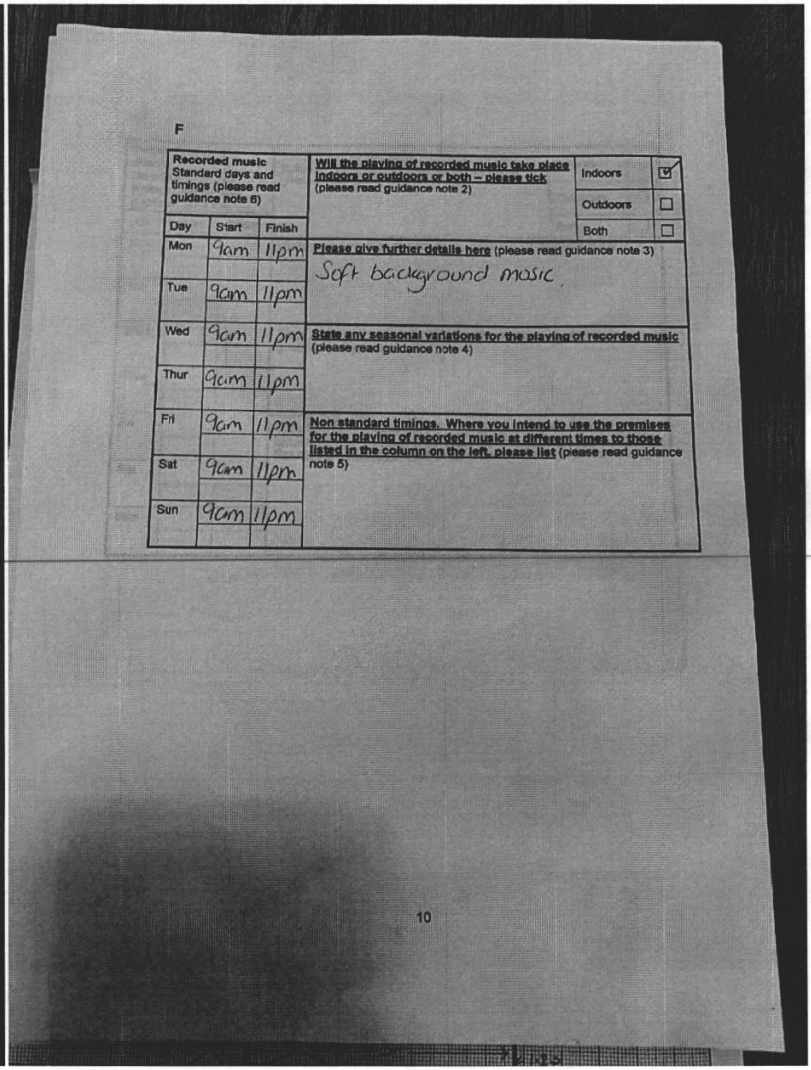
Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			**Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick** (please read guidance note 2)	Indoors	☐
				Outdoors	☐
Day	Start	Finish		Both	☐
Mon			**Please give further 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					



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	☐
				Outdoors	☐
				Both	☐
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for the performance of dance (please read guidance note 4)		
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 5)		
Sat					
Sun					

11



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	☑
				Outdoors	☐
				Both	☐
Day	Start	Finish			
Mon	9am	11pm	Please give further details here (please read guidance note 3) Soft background music.		
Tue	9am	11pm			
Wed	9am	11pm	State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur	9am	11pm			
Fri	9am	11pm	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	9am	11pm			
Sun	9am	11pm			

10

I

Provision of facilities for making music Standard days and timings (please read guidance note 6)			Please give a description of the facilities for making music you will be providing
			Will the facilities for making music be indoors or outdoors or both – please tick (please read guidance note 2) Indoors ☐ Outdoors ☐ Both ☐
Day	Start	Finish	
Mon			Please give further details here (please read guidance note 3)
Tue			
Wed			State any seasonal variations for the provision of facilities for making music (please read guidance note 4)
Thur			
Fri			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 (please read guidance note 5)
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
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2) Indoors ☐ Outdoors ☐ Both ☐
Mon			
Tue			Please give further details here (please read guidance note 3)
Wed			
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)
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 5)
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 ☐ Outdoors ☐ Both ☐
Day	Start	Finish	Please give a description of the facilities for dancing you will be providing	
Mon			Please give further details here (please read guidance note 3)	
Tue				
Wed			State any seasonal variations for providing dancing facilities (please read guidance note 4)	
Thur				
Fri			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 (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)			Please give a description of the type of entertainment facility you will be providing	
Day	Start	Finish	Will the entertainment facility be indoors or outdoors or both – please tick (please read guidance note 2)	Indoors ☐ Outdoors ☐ Both ☐
Mon			Please give further details here (please read guidance note 3)	
Tue				
Wed			State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within I or J (please read guidance note 4)	
Thur				
Fri			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 (please read guidance note 5)	
Sat				
Sun				

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	☑
				Off the premises	☐
				Both	☐
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	12pm	11pm	New years eve until 1am		
Tue	12pm	11pm			
Wed	12pm	11pm			
Thur	12pm	11pm	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	12pm	11pm			
Sat	12pm	11pm			
Sun	12pm	11pm			

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

Name	GILLIAN FARRINGTON-LEE
Address	[redacted] TODWICK SHEFFIELD
Postcode	[redacted]
Personal Licence number (if known)	RM3346
Issuing licensing authority (if known)	RMBC

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	☐
				Outdoors	☐
				Both	☐
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue					
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
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 5)		
Sat					
Sun					

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)

The licensee or persons authorised will be running to the management policies and procedures that will be in place. These policies and procedures will adhere to all four licensing objectives and regulations.

b) The prevention of crime and disorder

- Colour CCTV inside and out of premises
- Safe capacity limits.
- Door Supervisors Authorised by SIA if needed.
- Incident register maintained at all times.
- Refusals log/register maintained at all times.
- No irresponsible drinks promotions that may lead to excessive consumption.
- Specified drinking up times / Free water supplied.

c) Public safety

- All access points and emergency exits shall be kept free of obstruction
- Capacity levels will never be exceeded.
- Appropriate fire safety procedures in place and policies followed.
- All appliances regularly checked.
- Bottles and glasses and rubbish will be removed from public areas on a frequent basis.

d) The prevention of public nuisance

- Licence holder or persons authorised by licencee will ensure they or staff regularly patrol the premesis to ensure orderly conduct of patrons.
- Clear notices asking patrons to leave quietly and respect neighbours. Licence holder or persons authorised will also monitor patrons leaving to ensure it happens.
- No drinks or glasses will be permitted to leave the premesis.

e) The protection of children from harm

- Proof of age policy enforced.
- Challange 21/25 adhered to for any individual who appears to be under the age of 21/25.
- No admission of children after 9pm and always accompanied by an adult - signs will be displayed.

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

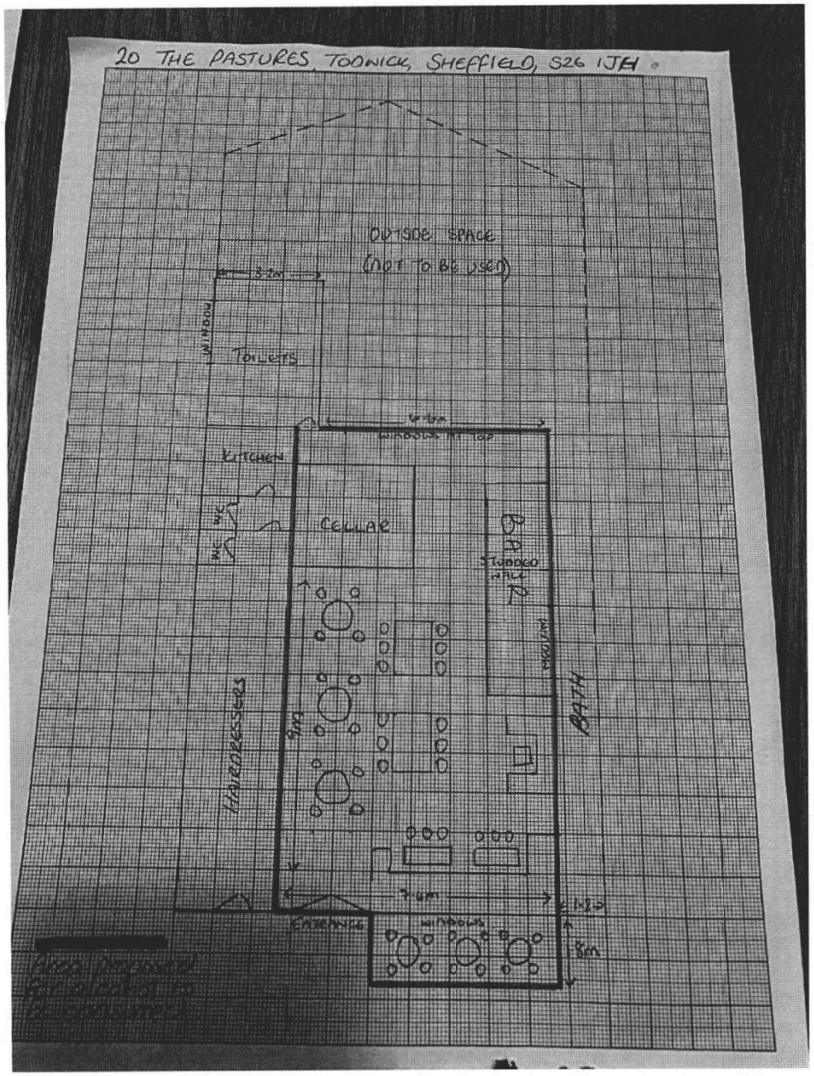
Hours premises are open to the public Standard days and timings (please read guidance note 6)

Day	Start	Finish
Mon	9am	11:30pm
Tue	9am	11:30pm
Wed	9am	11:30pm
Thur	9am	11:30pm
Fri	9am	11:30pm
Sat	9am	11:30pm
Sun	9am	11:30pm

State any seasonal variations (please read guidance note 4)

New Years eve until 1:30am.

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)



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	[redacted]
Date	07/10/20.
Capacity	DIRECTOR.

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	[redacted]
Date	07/10/20.
Capacity	DIRECTOR.

Contact name (where not previously given) and postal 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)

and any premises licence to be granted or varied in respect of this application made by

GILLIAN FARRINGTON-LEE + GARRY NEIL ASTLE
[name of applicant]

concerning the supply of alcohol at

20 THE PASTURES
TODWICK
SHEFFIELD
S26 1JH

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

RM 3346
[insert personal licence number, if any]

Personal licence issuing authority

ROTHERHAM METROPOLITAN BOROUGH COUNCIL
[insert name and address and telephone number of personal licence issuing authority, if any]

Signed [redacted]

Name (please print) GILLIAN FARRINGTON-LEE

Date 07/10/20

2

Consent of individual to being specified as premises supervisor

I GILLIAN FARRINGTON-LEE
[full name of prospective premises supervisor]

of [redacted]

[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

20 THE PASTURES
[type of application]

by

GILLIAN FARRINGTON-LEE + GARRY NEIL ASTLE
[name of applicant]

relating to a premises licence
[number of existing licence, if any]

for 20 THE PASTURES
TODWICK
SHEFFIELD
S26 1JH

[name and address of premises to which the application relates]

1