

# South Derbyshire

District Council

Appenoix 2.

Environmental Health Division Civic offices , Civic Way Swadlincote Derbyshire DE11 0AH 01283 595890/ 01283 595724

www.south-derbys.gov.uk

## Schedule 1 Article 2

		•
App th	olication for an existing licence to be co e Licensing Act 2003 and (Part B) appli simultaneo	ously
	PLEASE READ THE FOLLOWIN	G INSTRUCTIONS FIRST
comp	e completing this form please read the guidance n leting this form by hand, please write legibly in BLO ers are inside the boxes and written or typed in bla wish to keep a copy of the completed form for your	otes at the end of the form. If you are OCK CAPITALS. In all cases, ensure that your ick ink. Use additional sheets if necessary. You
desci	[ ce to a premises licence under Schedule 8 to the ribed in Part A1 below A1 – Premises Details	apply to convert an existing ne Licensing Act 2003 for the premises
Part	I address of premises or, if none, ordnance survey	map reference or description
Posta	Royal Oak urr main 5+,	1
	main St,	
	cauldwell	(
Post t	own	ost code
	Swad Lincote	DEIZ GRR.
	JULIUS COLOR OF	
Tele	phone number of premises (if any)	01283761486
Non-	domestic rateable value of premises	£110-60
Part Pleas	A2 — Applicant Details e state the capacity in which you are applying to c	onvert your existing licence
	•	e tick $$
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 r	egistered under Part 2 of t	he	please complete section (B)
Care Standards A	ct 2000 (c14) in respect of	fan	harase combiete section (8)
independent hosp	ital		
,	7		
h) the chief officer o			
	f police of a police force		please complete section (B)
in England and Wa	les		r saprete section (B)
		<del></del>	
(A) INDIVIDUAL APPLICAN	TS (fill in as applicable)		
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Mr Mrs	<i></i> ڪ	<del> </del>	·
1-112	Miss	Ms	Other title
Surname		First names	(for example, Rev)
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	<u> </u>	SUSAN	EN248ETH
	•		,
		•	Please tick 🗡
lam 18 years old or over			Yes
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Current postal	·		
address			
if different from	1		
premises address			-
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Post Town		Postcode	
Daysting			
Daytime contact telephone r	umber		
E-mail address			
(optional)			
SECOND INDIVIDUAL APPLICA	AREC DE ARROGARIAS		
ELEGINE WASTING AL AFFIIC	ATAT (IF APPLICABLE)		
<u></u>			
Mr Mrs	Miss	Ms 🗍	Otherstale
		ابا "،	Other title (for example, Rev)
Surname		rst names	(15) CALIMPLE, NEV)
	,		
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			Please tick Y
I am 18 years old or over			Yes
r mit to hear? ofg ot ohet			
C			
Current postal address		<del></del>	
if different from			1
premises address			1
Post Town		_	
	·	Postcode	
Daytime contact telephone num	ıber	_	
•	•		
E-mail address (optional)			
(Obcionar)			

### (B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint nature (other than a body corporate), please give the name and address of each party concerned.

Name	_
Address	· ·
·	
Registered number (where applicable)	
The state of the s	
Description of applicant (for example, partnership, company, unincorporate	d association etc.)
Telephone number (if any)	
E-mail address (optional)	

	If 5,000 or more people attend the premises at any one time, please state the number	<u></u>
Í	General description of premises (please read guidance note 1)	·
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Wh	at existing tiganists	Please tick 🗸 Yes
•••	at existing licensable activities are authorised by your existing licence(s)?	
Pro	vision of regulated entertainment	
a)	plays	
b)	films	
c)	indoor sporting events	, 🛚
d)	boxing or wrestling entertainment	
e)	live music	
f)	recorded music	
g)	performances of dance	
h)	anything of a similar description to that falling within (e), (f) or (g)	. [7
Provis	ion of entertainment facilities for:	
j)	making music	<u></u>
k)	dancing	
1)	entertainment of a similar description to that falling within (i) or (j)	
Provisi	on of late night refreshment	
Sale by	retail of alcohol	
	a) for consumption on the premises	
.,	b) for consumption off the premises	
rtease s	tate who you wish to be specified to be the premises supervisor under the new licence	
vame	TUZ CAS THE	
ddress.	ROYAL CAK MAIN ST CAULD WELL	
ersonal	Licence number, if known,	

State any limitations on the hours during which you are permitted by your licence(s) or any additional authorities to conduct licensable activities, including the sale of alcohol.

Normal Freezement Hover

a) General – all four licensing objectives (	(b.c.d.e)					
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	· ·					
b) The prevention of crime and disorder			<u> </u>	<del></del>	<del></del>	
one of thine and disorder		<u> </u>			·	
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- In I se	<del> </del>	<del></del>	<del></del>		<del></del>	<del>-</del>
c) Public safety						
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The prevention of public nuisance						
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ne protection of children from harm					<del></del>	
		·	<del></del>			

- I have made or enclosed payment of the fee
- I have enclosed my existing licence(s) or a certified copy of each licence
- I have enclosed a plan of the premises
- I have sent copies of this application to the chief officer of police (please read guidance note 3)
- I have enclosed the consent form completed by the proposed premises supervisor, if relevant
- I have enclosed the consent of the justices' licence holder to my application, if relevant
- 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 [AMOUNT], UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part A5 - Signatures (please read guidance note 4)	
Signature of applicant or applicant's solicitor or other duly authorised agent. (Ple 5). If signing on behalf of the applicant please state in what capacity.	ase read guidance note
Signature Saw.	······
Date 27.06.05.	
Capacity LICENS S. S. S.	
For joint applications signature of $2^{nd}$ applicant or $2^{nd}$ applicant's solicitor or oth (Please read guidance note 6). If signing on behalf of the applicant please state in	er authorised agent. What capacity.
Signature	
Date	
Capacity	***************************************
Contact name (where not previously given) and address for correspondence assapplication (please read guidance note 7)	sociated with this
Post town Post code	
Telephone number	
E-mail address (optional)	

IF YOU WISH TO APPLY SIMULTANEOUSLY FOR A VARIATION OF THE PREMISES LICENCE IF IT IS CONVERTED FROM YOUR EXISTING LICENCE(S) UNDER SECTION 34 OR 37 OF THE LICENSING ACT 2003, NOW COMPLETE PART B OF THIS FORM.

IF YOU DO NOT WISH TO APPLY SIMULTANEOUSLY FOR A VARIATION OF THE PREMISES LICENCE IF IT IS CONVERTED FROM YOUR EXISTING LICENCE(S), YOU SHOULD LEAVE PART B BLANK.

# PART B - Application to vary a premises licence under the Licensing Act 2003 | Insert name of applicant| | existing licence to be converted under the terms of Schedule 8 to the Licensing Act 2003 apply to vary it under section 34/section 37 of the Licensing Act 2003 (delete as applicable) for the premises described in Part A above. Part B1 - Variation Do you want the proposed variation to have effect from the second appointed day? If not do you want the variation to take effect from Day Month Year 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 Please describe briefly the nature of the proposed variation. (Please read guidance note 8)

# Part B2 - Operating Schedule

Please complete those parts of the operating schedule which would be subject to change if this application to vary were successful.

What licensable activities do you now intend to conduct on the premises and/or at what varied times do you intend to conduct them?

	(please se	e section 1 of th	e Licensing Act 2003 and Schedule 1 to the Licensing Act 2003)	Please <u>tick 🗸</u>
	Provision	of regulated en	tertainment	Yes
		olays (if ticking ye		<u></u>    =
	,	films (if ticking ye		
		, T	vents (if ticking yes, fill in box €)	
	d)	poxing or wrestlin	ng entertainment (if ticking yes, fill in box D)	
	e)	ive music (if ticki	ng yes, fill in box E)	
	f)	recorded music (i	f ticking yes, fill in box F)	
		performances of	dance (if ticking yes, fill in box G)	
		anything of a sim	ilar description to that falling within (e), (f) or (g)	
		(if ticking yes, fill	in box H)	
	Provision	of entertainme	nt facilities:	_
	į)	making music (if	ticking yes, fill in box I)	. 🚨
,			gyes, fill in box J)	<u>.</u>
	k)	entertainment of	a similar description to that falling within (i) or (j)	ل البا
,		(if ticking yes, fill		
			freshment (if ticking yes, fill in box L)	<u> </u>
			if ticking yes, fill in box M)	
A	Please	complete Part B.	Santhus form.	
A		complete Part B.	4	Indoors
Plays	i ard days ar	nd timings	Will the performance of a play take place indoors or	Indoors Outdoors
Plays Standa (pleas	i ard days ar e read guic	nd timings lance note 8)	Will the performance of a play take place indoors or	
Plays Standa (pleas Day	i ard days ar	nd timings	Will the performance of a play take place indoors or outdoors or both – please tick [   (please read guidance note 9).	Outdoors  Both
Plays Standa (pleas	i ard days ar e read guic	nd timings lance note 8)	Will the performance of a play take place indoors or	Outdoors  Both
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Films Standard days and timings (please read guidance note 8)		timings ce note 8)	Will the exhibition of films take place indoors or outdoors or both − please tick [✔](please read guidance note 9).	Indoors	
Day	Start	Finish		Outdoors	
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Wed		min s de appella p imperiale a conse	State any seasonal variations for the exhibition of films (plea	se read guidance note 11	
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Standar (please	r <b>sporting</b> d days and r read guidan	iminac	Please give further details (please read guidance note 10)
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			State any seasonal variations for indoor sporting events (please read guidance note 11
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Boying	or wres	tling	Will the boxing or wrestling entertainment take place	Indoors
Boxing or wrestling entertainment Standard days and timings			indoors or outdoors or both – please tick [ (please read guidance note 9).	Outdoors
(please	read guidar	nce note 8)		Both
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F_:			Non standard timings. Where you intend to use the prem	ises for boxing or wrestling
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Live music Standard days and timings (please read guidance note 8)			Will the performance of live music take place indoors or outdoors or both – please tick [✔](please read guidance note	Indoors
		timings ice note 8)	9).	Outdoors
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Sun				

Reco	rded music	-	Will the playing of recorded music take place indoors or outdoors or both - please tick Let /	·	
(please	Standard days and timings (please read guidance note 8)		outdoors or both – please tick [/] (please read guidance note 9).	Indoors	
Day	Start	Finish	note 9).	Outdoors	,
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Performances of dance Standard days and timings (please read guidance note 8)		timinas	Will the performance of dance take place indoors or outdoors or both – please tick [ ] (please read guidance note 9).	Indoors
Day	Start	Finish	indice s).	Outdoors
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Wed		The straight Straight I thought Harold a guinname	State any seasonal variations for the performance of dance 11)	(please read guidance not
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Anyth	ing of a similar	Please give a description of the type of entertainment you will be providing		
decor	ption to that falling			
UCSCII	(e), (f) or (g)			
Within	rd days and timings	N/W		
Standar	read guidance note 8)			
		Will this entertainment take place indoors or outdoors	Indoors	
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Standard days and timings (please read guidance note 8)  Will the facilities for making music be indoors or outdoors or both — please give further details here (please read guidance note 10)  Tue  State any seasonal variations for the provision of facilities for making music (please read guidance note 10)  Thur  Non standard timings. Where you intend to use the premises for provision of facilities for making music (please facilities for making music (please guidance note 11)  Non standard timings. Where you intend to use the premises for provision of facilities for making music (please list (please list (please read guidance note 12)  Will the facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please list (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music please list (please read guidance note 12)  Ovision of facilities for making music please read guidance note 10)  Ovision of facilities for making music please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making music (please read guidance note 12)  Ovision of facilities for making	maki	sion of fa ng music		or Please give a description of the facilities for making music	Vou will be arous	din-
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Standa	ly of alcoho	iminge	Will the supply of alcohol be for consumption	On the premises
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IN ALL CASES PLEASE COMPLETE BOXES N, O, P and Q below

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 14)

NM

Hours premises are open to the public  Standard days and timings (please read guidance note 8)  Day Start Finish  Mon II and I am  Wed I an I am  Non standard timings. Where you intend to use the premises to be open to at different times from those listed in the column on the left, please list (present times)  Fin II am I am  Sat II am I am  Sun II am I am  State any seasonal variation (please read guidance note 12)	
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### Part B3 - Premises Supervisor

Full name of proposed designated premises supervisor				
Suran Elizabeth	Grew coeke			
Address of proposed designated premises supervisor	No.			
Royal Oak Inn Main Street				
· Main Street				
Couldwell. DEI	L BRR.			
Personal licence number of proposed designated premises suppersonal licence, if applicable	pervisor, if any, and issuing authority of the			

	1
<ul> <li>I enclose the consent form completed by the proposed premises supervisor</li> <li>I will give a copy of Part B3 of this application to the chief officer of police (section 37 of the Licensing Act 2003)</li> <li>I have sent copies of this application to vary (except Part B3) to responsible authorities and others where applicable (section 34 of the Licensing Act 2003)</li> <li>I understand that I must now advertise my application to vary (section 37 of the Licensing Act 2003)</li> <li>I understand that if I do not comply with the above requirements my application will be rejected</li> </ul>	
Part B5 - Signatures (please read guidance note 16)	
Signature of applicant (the proposed current premises licence holder) or applicant's solicitor or or duly authorised agent. (See guidance note 17) If signing on behalf of the applicant please state in capacity.  Signature	what
Date 11 07, 05	**********
Capacity  Where the premises licence is jointly held signature of 2 <sup>nd</sup> applicant (the proposed current premises)	es
licence holder) or 2 <sup>nd</sup> applicant's solicitor or other authorised agent. (please read guidance note 18) signing on behalf of the applicant please state in what capacity.	) <b>l</b> f
Signature	
Date	*******
Capacity	
	*******
Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 19)	
Post town Post code	-

Please tick Y

### Notes for Guidance

### PART A

- Describe the premises. For example the type of premises, its general situation and layout and any other information which would be relevant to the licensing objectives. Where your application includes offsupplies of alcohol and provide a place for consumption of these off-supplies you must include a description of where the place is and its proximity to the premises.
- Where the conditions to which your existing licence(s) is granted do not relate solely to any one of the four licensing objectives, please describe such conditions in the general box.
- 3. The law requires you to send a mandatory copy of this application to the chief officer of police for that area at the same time as sending to the relevant licensing authority.
- 4. The application form must be signed.

An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.

Where there is more than one applicant, both applicants or their respective agents must sign the application form.

This is the address we shall use to correspond with you about this application.

### PART B

This application cannot be used to vary the licence to vary substantially the premises to which it relates. If you wish to make that type of change to the premises licence you should make a new premises licence application under section 17 of the Licensing Act.

Please give timings in 24 hour clock and only give details for days of the week when you intend the premises to be used for the activity.

Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.

10. Please state 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.

11. For example (but not exclusively), where the activity will occur on additional days during the summer.

12. For example (but not exclusively), where you wish the activity to go on longer on a particular day i.e. Christmas Eve.

13. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.

14. Please give information about anything to occur at the premises or ancilliary to the use of the premises which may give rise to concern in respect of children, for example (but not exclusively) nudity or seminudity, films for restricted age groups, the presence of gambling machines.

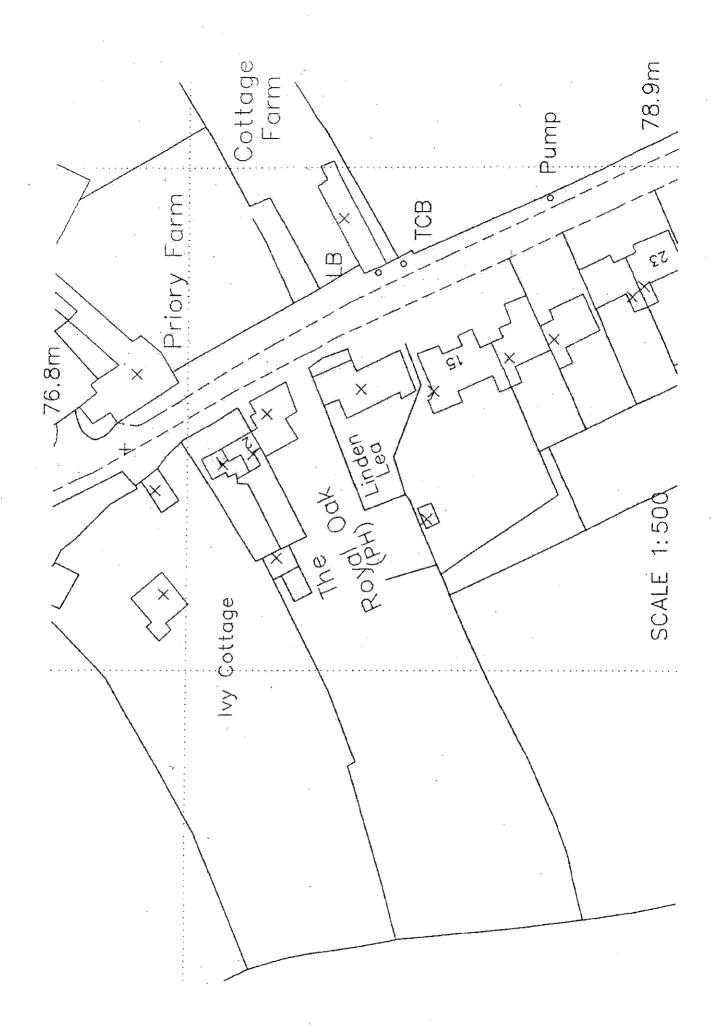
15. Please list here steps you will take to promote all four licensing objectives together.

16. The application form must be signed.

17. A applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.

18. Where there is more than one applicant, both applicants or their respective agents must sign the application form.

19. This is the address which we shall use to correspond with you about this application.



**Declaration Form** 

This form is to confirm that you will or will not require any form of permanent licence under the Licensing Act 2003

# Please complete using block capitals

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Please return form to Licensing Section South Derbyshire District Council, Civic Offices Civic Way Swadlincote DE11 0AH in the envelope provided

Royal Oak Main Street Caldwell Swadlincote Derbys DE12 6RR

# Dear sir or Madam

Enclosed herewith is the application form for the transfer of my licence as a (Grand Fathers Rights) with variations.

Attached is other relevant documents with site plan of the Public house

Yours Sincerely

Sison Jucan

er May



# South Derbyshire

# District Council

Schedule 2 Article 2

Form of cons	ent given by the persor be the premises	whom the applicant wishes to supervisor
1 ALISON	JUL VEARNOOMBE	hereby consent to
being named as	the premises supervisor in	a new licence granted under
paragraph 4 of S	Schedule 8 to the Licensing	Act 2003 to 2
AUSON JX		
		existing justices' licence held by the
· ·		as consented to the application being
made by the ap	plicant 3 for 4	рн
LOYAL CAK	- MAIN STREET, CA	ALDINEUL SHADUNCOTE
DERBUSHIR	E DEIZ LER	if that application is successful.
		·
Signed	Misancerte	
Dated		



¹ Insert first names and surname of prospective premises supervisor
² insert full name of applicant
³ delete as applicable
¹ insert name and address of existing licensed premises

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