

# Leicester Application for a premises licence Licensing Act 2003

For help contact

licensing@leicester.gov.uk

Telephone: +44 116 454 3040

\* required information

| Section 1 of 21                             |   |   |
|---|---|---|
| You can save the form at any                | time and resume it later. You do not need to be | logged in when you resume.  |
| System reference                            | Not Currently In Use                            | This is the unique reference for this application generated by the system.  |
| Your reference                              |   | You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.  |
| Are you an agent acting on be               | half of the applicant?                          | Put "no" if you are applying on your own<br>behalf or on behalf of a business you own or  |
| ● Yes ○ I                                   | NO  | work for.   |
|   |   |   |
| Applicant Details                           | 2   | _   |
| * First name                                | MANISHKUMAR MURUBHAI                            |   |
| * Family name                               | SONRAJ  |   |
| * E-mail                                    | GREENHILL.LICENCES@HOTMAIL.COM                  |   |
| Main telephone number                       |   | Include country code.   |
| Other telephone number                      |   |   |
|   | icant would prefer not to be contacted by telep | hone  |
| Is the applicant:                           |   |   |
| <ul> <li>Applying as a business</li> </ul>  | or organisation, including as a sole trader     | A sole trader is a business owned by one  |
| <ul> <li>Applying as an individu</li> </ul> | al  | person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby. |
|   |   |   |

| Continued from previous page                  | 1  |  |
|---|--|--|
| Address                                       |  |  |
| * Building number or name                     |  |  |
| * Street                                      |  |  |
| District                                      |  |  |
| * City or town                                |  |  |
| County or administrative as                   |  |  |
| * Postcode                                    |  |  |
| * Country                                     | United Kingdom                               |  |
|   |  |  |
| Agent Details                                 |  |  |
| * First name                                  | ANIL   |  |
| * Family name                                 | BHAWSAR                                      |  |
| * E-mail                                      | GREENHILL.LICENCES@HOTMAIL.COM               |  |
| Main telephone number                         | 07766003951                                  | Include country code.  |
| Other telephone number                        |  |  |
| ☐ Indicate here if you wou                    | ld prefer not to be contacted by telephone   |  |
| Are you:                                      |  |  |
| <ul> <li>An agent that is a busine</li> </ul> | ess or organisation, including a sole trader | A sole trader is a business owned by one person without any special legal structure. |
| A private individual activity                 | ng as an agent                               | person management species regarded actions.  |
| Your Address                                  |  | Address official correspondence should be  |
| * Building number or name                     | GREENHILL LICENCES                           | sent to.   |
| * Street                                      | 20 CRAIGHILL ROAD                            |  |
| District                                      |  |  |
| * City or town                                | LEICESTER                                    |  |
| County or administrative area                 |  |  |
| * Postcode                                    | LE23FB                                       |  |
| *Country                                      | United Kingdom                               |  |
|   |  |  |
| Section 2 of 21                               |  |  |
| PREMISES DETAILS                              |  |  |

| Continued from previous page                |   |               |
|---|---|---------------|
|   | ply for a premises licence under section 17 of the premises) and I/we are making this application the Licensing Act 2003. |               |
| Premises Address                            |   |               |
| Are you able to provide a posta             | al address, OS map reference or description of t  | the premises? |
| Address                                     | p reference C Description   |               |
| Postal Address Of Premises                  |   |               |
| Building number or name                     | C T SUPERMAKET  |               |
| Street                                      | 85 HINCKLEY ROAD  |               |
| District                                    |   |               |
| City or town                                | LEICESTER   |               |
| County or administrative area               |   |               |
| Postcode                                    | LE3 0TD   |               |
| Country                                     | United Kingdom  |               |
| Further Details                             |   |               |
| Telephone number                            |   |               |
| Non-domestic rateable value of premises (£) | 11,000  |               |

| Secti                 | on 3 of 21   |   |  |  |
|-----------------------|--|---|--|--|
|                       | ICATION DETAILS  |   |  |  |
| - 100 300             | Married Street St. School of A.                          | ing for the premises licence?   |  |  |
| $\boxtimes$           | An individual or individu                                |   |  |  |
|                       | A limited company / limit                                |   |  |  |
|                       | A partnership (other than                                | n limited liability)  |  |  |
|                       | An unincorporated assoc                                  | ciation   |  |  |
|                       | Other (for example a stat                                | utory corporation)  |  |  |
|                       | A recognised club  |   |  |  |
|                       | A charity  |   |  |  |
|                       | The proprietor of an edu                                 | cational establishment  |  |  |
|                       | A health service body                                    |   |  |  |
|                       |  | ed under part 2 of the Care Standards Act<br>In independent hospital in Wales   |  |  |
|                       | Social Care Act 2008 in re                               | ed under Chapter 2 of Part 1 of the Health and espect of the carrying on of a regulated ing of that Part) in an independent hospital in |  |  |
|                       | The chief officer of police                              | of a police force in England and Wales  |  |  |
| Confirm The Following |  |   |  |  |
| $\boxtimes$           | I am carrying on or propo<br>the use of the premises for | osing to carry on a business which involves<br>or licensable activities   |  |  |
|                       | I am making the applicat                                 | ion pursuant to a statutory function  |  |  |
|                       | I am making the applicat<br>virtue of Her Majesty's pr   | ion pursuant to a function discharged by erogative  |  |  |
| Secti                 | on 4 of 21   |   |  |  |
| INDI                  | /IDUAL APPLICANT DET                                     | AILS  |  |  |
|                       | licant Name  |   |  |  |
| Is the                | e name the same as (or sin                               | nilar to) the details given in section one?   | If "Yes" is selected you can re-use the details from section one, or amend them as required. |  |
| • '                   | Yes  | ○ No  | Select "No" to enter a completely new set of details.  |  |
| First                 | name   | MANISHKUMAR MURUBHAI  |  |  |
| Fami                  | ly name  | SONRAJ  |  |  |
| Is the                | e applicant 18 years of age                              | e or older?   |  |  |
| <b>⊙</b> ′            | Yes  | C No  |  |  |
|                       |  |   |  |  |

| Continued from previous page  |   |  |
|---|---|--|
| Current Residential Address   |   |  |
|   | similar to) the address given in section one?     | If "Yes" is selected you can re-use the details  |
| <b>⊙</b> Yes  | ○ No  | from section one, or amend them as required. Select "No" to enter a completely new set of details. |
| Building number or name   |   |  |
| Street  |   |  |
| District  |   |  |
| City or town  |   |  |
| County or administrative area   |   |  |
| Postcode  |   |  |
| Country   |   |  |
| Applicant Contact Details   |   |  |
| Are the contact details the sar   | ne as (or similar to) those given in section one? | If "Yes" is selected you can re-use the details  |
| <b>⊙</b> Yes  | ○ No  | from section one, or amend them as required. Select "No" to enter a completely new set of details. |
| E-mail  |   |  |
| Telephone number  |   |  |
| Other telephone number  |   |  |
| * Date of birth   | du mm yyyy  |  |
| * Nationality   |   | Documents that demonstrate entitlement to work in the UK   |
| Right to work share code  |   | Right to work share code if not submitting scanned documents                                       |
|   | Add another applicant                             | <br>1  |
| Section 5 of 21   |   | •  |
| OPERATING SCHEDULE  |   |  |
| 2005 T 200 2 T 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2  |   |  |
| When do you want the premises licence to start?   | 11 / 11 / 2021<br>dd mm yyyy                      |  |
| If you wish the licence to be valid only for a limited period, when do you want it to end | dd mm yyyy  |  |
| Provide a general description   | of the premises                                   |  |

| Continued from previous page  |     |
|---|-----|
| For example the type of premises, its general situation and layout and any other information which could be relevant to licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off- supplies you must include a description of where the place will be and its proximity to the premises.         | the |
| THIS IS A REFURBISHED RETAIL PREMISES PROPOSING TO SELL FOOD TO GO ,BAKERY AND DELECATEASAN , GROCERY A<br>HOUSHOLD PRODUCTS . UNDERSTANDING THAT IT'S IN THE CIZ , THE APPLICANT WISHES TO USE UP TO 10% FLOOR<br>SPACE FOR ALCOHOL. SPIRITS TO BE BEHIND COUNTER. STANDARD BEERS ,AND CIDERS WITH ABV NOT MORE THAN 6.59<br>HOURS OF OPENING WILL BE 8AM TO 9PM.MONDAY TO SUNDAY. |     |
| If 5,000 or more people are expected to attend the premises at any one time, state the number expected to attend  |     |
| Section 6 of 21   |     |
| PROVISION OF PLAYS  |     |
| See guidance on regulated entertainment   |     |
| Will you be providing plays?  |     |
| ○ Yes   |     |
| Section 7 of 21   |     |
| PROVISION OF FILMS  |     |
| See guidance on regulated entertainment   |     |
| Will you be providing films?  |     |
| ○ Yes   |     |
| Section 8 of 21   |     |
| PROVISION OF INDOOR SPORTING EVENTS   |     |
| See guidance on regulated entertainment   |     |
| Will you be providing indoor sporting events?   |     |
| ○ Yes   |     |
| Section 9 of 21   |     |
| PROVISION OF BOXING OR WRESTLING ENTERTAINMENTS   |     |
| See guidance on regulated entertainment   |     |
| Will you be providing boxing or wrestling entertainments?   |     |
| ○ Yes   |     |
| Section 10 of 21  |     |
| PROVISION OF LIVE MUSIC   |     |
| See guidance on regulated entertainment   |     |
| Will you be providing live music?   |     |
| ○ Yes   |     |
| Section 11 of 21  |     |
| PROVISION OF RECORDED MUSIC   |     |
| See guidance on regulated entertainment   |     |

| Continued from previous                       | page         |                  |                   |            |  |
|---|--------------|------------------|-------------------|------------|--|
| Will you be providing re                      | corded m     | usic?            |                   |            |  |
| ○ Yes   | •            | No               |                   |            |  |
| Section 12 of 21                              |              |                  |                   |            |  |
| PROVISION OF PERFOR                           | RMANCES      | OF DANCE         |                   |            |  |
| See guidance on regula                        | ted entert   | ainment          |                   |            |  |
| Will you be providing p                       | erformanc    | es of dance?     |                   |            |  |
| ○ Yes   | •            | No               |                   |            |  |
| Section 13 of 21                              |              |                  |                   |            |  |
| PROVISION OF ANYTH DANCE                      | ING OF A     | SIMILAR DESC     | RIPTION TO LIVE   | MUSIC, REG | CORDED MUSIC OR PERFORMANCES OF  |
| See guidance on regula                        | ted entert   | ainment          |                   |            |  |
| Will you be providing a performances of dance |              | milar to live mu | sic, recorded mus | sic or     |  |
| ○ Yes   | •            | No               |                   |            |  |
| Section 14 of 21                              |              |                  |                   |            |  |
| LATE NIGHT REFRESH                            | MENT         |                  |                   |            |  |
| Will you be providing la                      | ite night re | efreshment?      |                   |            |  |
| ○ Yes   | •            | No               |                   |            |  |
| Section 15 of 21                              |              |                  |                   |            |  |
| SUPPLY OF ALCOHOL                             |              |                  |                   |            |  |
| Will you be selling or su                     | pplying al   | cohol?           |                   |            |  |
| <ul><li>Yes</li></ul>                         | 0            | No               |                   |            |  |
| Standard Days And Ti                          | mings        |                  |                   |            |  |
| MONDAY  |              |                  |                   |            | 230 130 131 142 5.4650   |
|   | Start 08     | 900              | End               | 21:00      | Give timings in 24 hour clock.<br>(e.g., 16:00) and only give details for the days |
|   |              |                  |                   | 21100      | of the week when you intend the premises   |
|   | Start        |                  | End               |            | to be used for the activity.   |
| TUESDAY                                       | ·            |                  |                   |            |  |
|   | Start 08     | :00              | End               | 21:00      |  |
|   | Start        |                  | End               |            |  |
| WEDNESDAY                                     |              |                  |                   |            |  |
|   | Start 08     | :00              | End               | 21:00      |  |
|   | =            |                  |                   |            |  |
|   | Start        |                  | End               |            |  |
| THURSDAY                                      |              |                  |                   |            |  |
|   | Start 08     | :00              | End               | 21:00      |  |
|   | Start        |                  | End               |            |  |

| Continued from previous page                                     |   |                      |  |
|--|---|----------------------|--|
| FRIDAY   |   |                      |  |
| Start  | 08:00                                   | End 21:00            |  |
| Start  |   | End                  |  |
| SATURDAY   |   |                      |  |
| Start  | 08:00                                   | End 21:00            |  |
| Start  |   | End                  |  |
| SUNDAY   |   |                      |  |
| Start  | 08:00                                   | End 21:00            |  |
| Start  |   | End                  |  |
| Will the sale of alcohol be for co                               | onsumption:                             |                      | If the sale of alcohol is for consumption on<br>the premises select on, if the sale of alcohol |
| On the premises  | <ul><li>Off the premises</li></ul>      | Both                 | is for consumption away from the premises  |
|  |   |                      | select off. If the sale of alcohol is for consumption on the premises and away                 |
|  |   |                      | from the premises select both.   |
| State any seasonal variations                                    |   |                      |  |
| For example (but not exclusive                                   | ly) where the activity will occ         | ur on additional da  | ays during the summer months.  |
|  |   |                      |  |
|  |   |                      |  |
|  |   |                      |  |
| Non-standard timings. Where t<br>column on the left, list below  | he premises will be used for t          | he supply of alcoh   | ol at different times from those listed in the   |
|  | lv), where you wish the activit         | tv to ao on lonaer   | on a particular day e.g. Christmas Eve.  |
|  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ., 10 90 011 1011921 |  |
|  |   |                      |  |
|  |   |                      |  |
|  |   |                      |  |
| State the name and details of the licence as premises supervisor | he individual whom you wish             | to specify on the    |  |
| Name   |   |                      |  |
| First name   | MANISHKUMAR MURUBHAI                    |                      |  |
| Family name  | SONRAJ                                  |                      |  |
| Date of birth  | dd mm yyyy                              |                      |  |

| Continued from previous page   |               |                  |        |              |  |
|--|---------------|------------------|--------|--------------|--|
| Enter the contact's address  |               |                  |        |              |  |
| Building number or name  |               |                  |        |              |  |
| Street   |               |                  |        |              |  |
| District   |               |                  |        |              |  |
| City or town   |               |                  |        |              |  |
| County or administrative area  |               |                  |        |              |  |
| Postcode   |               |                  |        |              |  |
| Country  |               |                  |        |              |  |
| Personal Licence number (if known)   | 21/0325/LA    | NPERS            |        |              |  |
| Issuing licensing authority (if known)   | BLABY DIST    | RICT COUNCIL     |        |              |  |
| PROPOSED DESIGNATED PRE  | MISES SUPE    | RVISOR CONSE     | VΤ     |              |  |
| How will the consent form of t be supplied to the authority?  Clear to the process of the proces | posed desig   |                  |        |              |  |
| <ul> <li>As an attachment to this</li> </ul>   | application   |                  |        |              |  |
| Reference number for consent form (if known)   |               |                  |        |              | If the consent form is already submitted, ask<br>the proposed designated premises<br>supervisor for its 'system reference' or 'your<br>reference'. |
| Section 16 of 21   |               |                  |        |              |  |
| ADULT ENTERTAINMENT  |               |                  |        |              |  |
| Highlight any adult entertainn premises that may give rise to  |               |                  |        | ntertainmer  | nt or matters ancillary to the use of the  |
| rise to concern in respect of ch<br>(but not exclusively) nudity or  | ildren, regar | dless of whether | you in | tend childre | y to the use of the premises which may give<br>n to have access to the premises, for example<br>gambling machines etc.                             |
| NONE   |               |                  |        |              |  |
| Section 17 of 21   |               |                  |        |              |  |
| HOURS PREMISES ARE OPEN  | TO THE PUB    | ILIC             |        |              |  |
| Standard Days And Timings  |               |                  |        |              |  |
| MONDAY   |               |                  |        |              | Give timings in 24 hour clock.   |
| Start  | 08:00         |                  | End    | 21:00        | (e.g., 16:00) and only give details for the days of the week when you intend the premises  |
| Start  |               |                  | End    |              | to be used for the activity.   |

| Continued from previous    | page                                  |   |
|----------------------------|---------------------------------------|---|
| TUESDAY                    |                                       |   |
|                            | Start 08:00                           | End 21:00   |
|                            | Start                                 | End   |
| WEDNESDAY                  |                                       |   |
|                            | Start 08:00                           | End 21:00   |
|                            | Start                                 | End   |
| THURSDAY                   |                                       |   |
|                            | Start 08:00                           | End 21:00   |
|                            | Start                                 | End   |
| FRIDAY                     |                                       |   |
|                            | Start 08:00                           | End 21:00   |
|                            | Start                                 | End   |
| SATURDAY                   |                                       |   |
|                            | Start 08:00                           | End 21:00   |
|                            | Start                                 | End   |
| SUNDAY                     |                                       |   |
|                            | Start 08:00                           | End 21:00   |
|                            | Start                                 | End   |
| State any seasonal varia   | ations                                |   |
|                            |                                       | cur on additional days during the summer months.                |
|                            |                                       |   |
|                            |                                       |   |
|                            |                                       |   |
| Non standard timings       | Where you intend to use the premis    | es to be open to the members and guests at different times from |
|                            | mn on the left, list below            | es to be open to the members and guests at different times from |
| For example (but not e     | xclusively), where you wish the activ | rity to go on longer on a particular day e.g. Christmas Eve.    |
|                            |                                       |   |
|                            |                                       |   |
|                            |                                       |   |
| Section 18 of 21           |                                       |   |
| Describe the stops you     |                                       | licensing objectives  |
|                            | intend to take to promote the four    | licensing objectives:   |
| a) General – all four lice | ensing objectives (b,c,d,e)           |   |

| Continued from previous page   |
|--|
| List here steps you will take to promote all four licensing objectives together.   |
| THIS IS A CIZ APPLICATION. THE APPLICANT HAS TAKEN THIS INTO ACCOUNT. THIS WILL BE RUN AS A FAMILY BUSINESS. AFTER MEETING WITH LOCAL POLICE LICENSING OFFICER, A PROPOSAL WAS SENT TO COVER THE LICENSING OBJECTIVES. THIS WILL BE ATTACHED SEPERATE.LY.  |
| b) The prevention of crime and disorder  |
| THE EMPHASIS IS TO HAVE SAFETY FOR CUSTOMERS AND STAFF. CCTV WILL COVER MINIMUM OF 31 DAYS. PLACED ALL THROUGHOUR THE STORE. THERE WILL 2 DOORS FOR SECURITY, FOR THE ENTRANCE. POSTERS WILL BE VISIBLE AT THE ENTRANCE AND IN THE ALCOHOL DISPLAYED AREA. TO SELL NORMAL STANDARD BEERS AND CIDER STRENGTH NO MORE THAN 6.5%. SHORTER OPENING HOURS, THAN OTHER STORES IN THE AREAAPPLY ING FOR 8AM TO 9PM  c) Public safety PLEASE SEE ATTACHED DOCUMENT |
| d) The prevention of public nuisance   |
| PLEASE SEE ATTACHED DOCUMEN  |
| e) The protection of children from harm  |
| PLEASE SEE ATTACHED DOCUMENT.  |

Section 19 of 21

NOTES ON DEMONSTRATING ENTITLEMENT TO WORK IN THE UK

REFUSALS BOOK TO KEPT AND UPDATED ,TRAINING FOR STAFF RECORDED.

ALL PHOTO IDS WILL BE CHECKED . NAMELY PASSPORT , DRIVING LICENCE AND CITIZEN CARD. holographic ID

### Entitlement to work/immigration status for individual applicants and applications from partnerships which are not limited liability partnerships:

A licence may not be held by an individual or an individual in a partnership who is resident in the UK who:

- does not have the right to live and work in the UK; or
- is subject to a condition preventing him or her from doing work relating to the carrying on of a licensable activity.

Any premises licence issued in respect of an application made on or after 6 April 2017 will become invalid if the holder ceases to be entitled to work in the UK.

Applicants must demonstrate that they have an entitlement to work in the UK and are not subject to a condition preventing them from doing work relating to the carrying on of a licensable activity. They do this in one of two ways: 1) by providing with this application copies or scanned copies of the documents listed below (which do not need to be certified), or 2) by providing their 'share code' to enable the licensing authority to carry out a check using the Home Office online right to work checking service (see below).

#### Documents which demonstrate entitlement to work in the UK

- An expired or current passport showing the holder, or a person named in the passport as the child of the holder, is A British citizen or a citizen of the UK and Colonies having the right of abode in the UK [please see note below about which sections of the passport to copy].
- An expired or current passport or national identity card showing the holder, or a person named in the passport as the child of the holder, is a national of a European Economic Area country or Switzerland.
- A Registration Certificate or document certifying permanent residence issued by the Home Office to a national
  of a European Economic Area country or Switzerland.
- A Permanent Residence Card issued by the Home Office to the family member of a national of a European Economic Area country or Switzerland.
- A **current** Biometric Immigration Document (Biometric Residence Permit) issued by the Home Office to the holder indicating that the person named is allowed to stay indefinitely in the UK, or has no time limit on their stay in the UK.
- A current passport endorsed to show that the holder is exempt from immigration control, is allowed to stay
  indefinitely in the UK, has the right of abode in the UK, or has no time limit on their stay in the UK.
- A current Immigration Status Document issued by the Home Office to the holder with an endorsement
  indicating that the named person is allowed to stay indefinitely in the UK or has no time limit on their stay in
  the UK, when produced in combination with an official document giving the person's permanent National
  Insurance number and their name issued by a Government agency or a previous employer.
- A birth or adoption certificate issued in the UK, when produced in combination with an official document giving the person's permanent National Insurance number and their name issued by a Government agency or a previous employer.
- A birth or adoption certificate issued in the Channel Islands, the Isle of Man or Ireland when produced in
  combination with an official document giving the person's permanent National Insurance number and their
  name issued by a Government agency or a previous employer.
- A certificate of registration or naturalisation as a British citizen, when produced in combination with an
  official document giving the person's permanent National Insurance number and their name issued by a
  Government agency or a previous employer.

- A current passport endorsed to show that the holder is allowed to stay in the UK and is currently allowed to
  work and is not subject to a condition preventing the holder from doing work relating to the carrying on of a
  licensable activity.
- A current Biometric Immigration Document (Biometric Residence Permit) issued by the Home Office to the
  holder which indicates that the named person can currently stay in the UK and is allowed to work relation to
  the carrying on of a licensable activity.
- A current Residence Card issued by the Home Office to a person who is not a national of a European Economic
  Area state or Switzerland but who is a family member of such a national or who has derivative rights or
  residence.
- A current Immigration Status Document containing a photograph issued by the Home Office to the holder
  with an endorsement indicating that the named person may stay in the UK, and is allowed to work and is not
  subject to a condition preventing the holder from doing work relating to the carrying on of a licensable activity
  when produced in combination with an official document giving the person's permanent National Insurance
  number and their name issued by a Government agency or a previous employer.
- A Certificate of Application, less than 6 months old, issued by the Home Office under regulation 18(3) or 20(2) of the Immigration (European Economic Area) Regulations 2016, to a person who is not a national of a European Economic Area state or Switzerland but who is a family member of such a national or who has derivative rights of residence.
- Reasonable evidence that the person has an outstanding application to vary their permission to be in the UK
  with the Home Office such as the Home Office acknowledgement letter or proof of postage evidence, or
  reasonable evidence that the person has an appeal or administrative review pending on an immigration
  decision, such as an appeal or administrative review reference number.
- Reasonable evidence that a person who is not a national of a European Economic Area state or Switzerland but
  who is a family member of such a national or who has derivative rights of residence in exercising treaty rights in
  the UK including:-
  - evidence of the applicant's own identity such as a passport,
  - evidence of their relationship with the European Economic Area family member e.g. a marriage certificate, civil partnership certificate or birth certificate, and
  - evidence that the European Economic Area national has a right of permanent residence in the UK or is one
    of the following if they have been in the UK for more than 3 months:
    - (i) working e.g. employment contract, wage slips, letter from the employer,
  - (ii) self-employed e.g. contracts, invoices, or audited accounts with a bank,
  - (iii) studying e.g. letter from the school, college or university and evidence of sufficient funds; or
  - (iv) self-sufficient e.g. bank statements.

Family members of European Economic Area nationals who are studying or financially independent must also provide evidence that the European Economic Area national and any family members hold comprehensive sickness insurance in the UK. This can include a private medical insurance policy, an EHIC card or an S1, S2 or S3 form.

**Original documents must not be sent to licensing authorities.** If the document copied is a passport, a copy of the following pages should be provided:-

- (i) any page containing the holder's personal details including nationality;
- (ii) any page containing the holder's photograph;
- (iii) any page containing the holder's signature;
- (iv) any page containing the date of expiry; and
- (v) any page containing information indicating the holder has permission to enter or remain in the UK and is permitted to work.

If the document is not a passport, a copy of the whole document should be provided.

Your right to work will be checked as part of your licensing application and this could involve us checking your immigration status with the Home Office. We may otherwise share information with the Home Office. Your licence application will not be determined until you have complied with this guidance.

#### Home Office online right to work checking service

As an alternative to providing a copy of the documents listed above, applicants may demonstrate their right to work by allowing the licensing authority to carry out a check with the Home Office online right to work checking service.

To demonstrate their right to work via the Home Office online right to work checking service, applicants should include in this application their 9-digit share code (provided to them upon accessing the service at <a href="https://www.gov.uk/prove-right-to-work">https://www.gov.uk/prove-right-to-work</a>) which, along with the applicant's date of birth (provided within this application), will allow the licensing authority to carry out the check.

In order to establish the applicant's right to work, the check will need to indicate that the applicant is allowed to work in the United Kingdom and is not subject to a condition preventing them from doing work relating to the carrying on of a licensable activity.

An online check will not be possible in all circumstances because not all applicants will have an immigration status that can be checked online. The Home Office online right to work checking service sets out what information and/or documentation applicants will need in order to access the service. Applicants who are unable to obtain a share code from the service should submit copy documents as set out above.

#### Section 20 of 21

NOTES ON REGULATED ENTERTAINMENT

In terms of specific regulated entertainments please note that:

- Plays: no licence is required for performances between 08:00 and 23.00 on any day, provided that the audience
  does not exceed 500.
- Films: no licence is required for 'not-for-profit' film exhibition held in community premises between 08.00 and 23.00 on any day provided that the audience does not exceed 500 and the organiser (a) gets consent to the screening from a person who is responsible for the premises; and (b) ensures that each such screening abides by age classification ratings.
- Indoor sporting events: no licence is required for performances between 08.00 and 23.00 on any day, provided that the audience does not exceed 1000.
- Boxing or Wrestling Entertainment: no licence is required for a contest, exhibition or display of Greco-Roman
  wrestling, or freestyle wrestling between 08.00 and 23.00 on any day, provided that the audience does not
  exceed 1000. Combined fighting sports defined as a contest, exhibition or display which combines boxing or
  wrestling with one or more martial arts are licensable as a boxing or wrestling entertainment rather than an
  indoor sporting event.
- Live music: no licence permission is required for:
  - o a performance of unamplified live music between 08.00 and 23.00 on any day, on any premises.
  - o a performance of amplified live music between 08.00 and 23.00 on any day on premises authorised to sell alcohol for consumption on those premises, provided that the audience does not exceed 500.
  - o a performance of amplified live music between 08.00 and 23.00 on any day, in a workplace that is not licensed to sell alcohol on those premises, provided that the audience does not exceed 500.
  - o a performance of amplified live music between 08.00 and 23.00 on any day, in a church hall, village hall, community hall, or other similar community premises, that is not licensed by a premises licence to sell alcohol, provided that (a) the audience does not exceed 500, and (b) the organiser gets consent for the performance from a person who is responsible for the premises.
  - o a performance of amplified live music between 08.00 and 23.00 on any day, at the non-residential premises of (i) a local authority, or (ii) a school, or (iii) a hospital, provided that (a) the audience does not exceed 500, and (b) the organiser gets consent for the performance on the relevant premises from: (i) the local authority concerned, or (ii) the school or (iii) the health care provider for the hospital.
- Recorded Music: no licence permission is required for:
  - o any playing of recorded music between 08.00 and 23.00 on any day on premises authorised to sell alcohol for consumption on those premises, provided that the audience does not exceed 500.
  - o any playing of recorded music between 08.00 and 23.00 on any day, in a church hall, village hall, community hall, or other similar community premises, that is not licensed by a premises licence to sell alcohol, provided that (a) the audience does not exceed 500, and (b) the organiser gets consent for the performance from a person who is responsible for the premises.
  - o any playing of recorded music between 08.00 and 23.00 on any day, at the non-residential premises of (i) a local authority, or (ii) a school, or (iii) a hospital, provided that (a) the audience does not exceed 500, and (b) the organiser gets consent for the performance on the relevant premises from: (i) the local authority concerned, or (ii) the school proprietor or (iii) the health care provider for the hospital.

- Dance: no licence is required for performances between 08.00 and 23.00 on any day, provided that the
  audience does not exceed 500. However, a performance which amounts to adult entertainment remains
  licensable.
- Cross activity exemptions: no licence is required between 08.00 and 23.00 on any day, with no limit on audience size for:
  - o any entertainment taking place on the premises of the local authority where the entertainment is provided by or on behalf of the local authority;
  - o any entertainment taking place on the hospital premises of the health care provider where the entertainment is provided by or on behalf of the health care provider;
  - o any entertainment taking place on the premises of the school where the entertainment is provided by or on behalf of the school proprietor; and
  - o any entertainment (excluding films and a boxing or wrestling entertainment) taking place at a travelling circus, provided that (a) it takes place within a moveable structure that accommodates the audience, and (b) that the travelling circus has not been located on the same site for more than 28 consecutive days.

#### Section 21 of 21

#### **PAYMENT DETAILS**

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card. Fees are dependent on the business rate band of the premises. Further information is provided at the link below: https://www.leicester.gov.uk/business/licences-and-permits/entertainment-food-and-drink-licensing/alcohol-entertainment-and-late-night-refreshment/policy-and-guidance/

\* Fee amount (£) 190.00

#### DECLARATION

[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, if appropriate (please see note 15)

Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

| * Full name | ANIL BHAWSAR    |  |
|-------------|-----------------|--|
| * Capacity  | LICENSING AGENT |  |
| * Date      | 13 / 10 / 2021  |  |
|             | dd mm yyyy      |  |

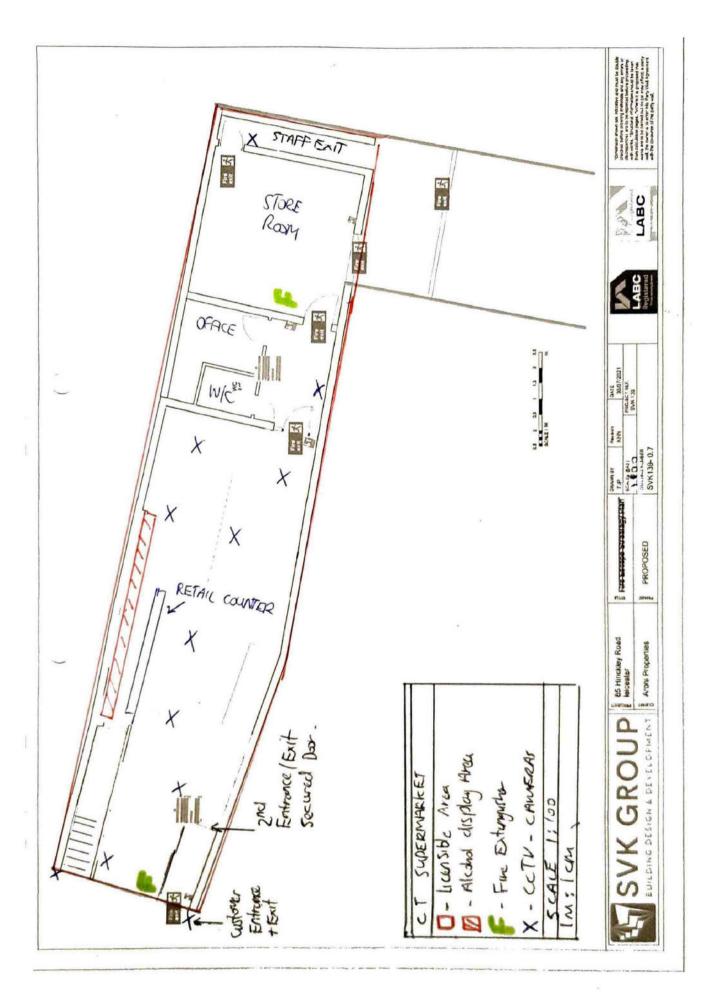
Add another signatory

Once you're finished you need to do the following:

- 1. Save this form to your computer by clicking file/save as...
- 2. Go back to <a href="https://www.gov.uk/apply-for-a-licence/premises-licence/leicester/apply-1">https://www.gov.uk/apply-for-a-licence/premises-licence/leicester/apply-1</a> to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

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| IT IS AN OFFENCE LIABLE TO SUMMARY CONVICTION TO A FINE OF ANY AMOUNT UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION |  |                                       |                                 |                     |                                       |                                 |                                     |                                  |                             |                     |                         |                                    |            |                                  |  |
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| Fee paid   |  |                                       |                                 |                     |                                       |                                 |                                     |                                  |                             |                     |                         |                                    |            |                                  |  |
| Payment provider reference   |  |                                       |                                 |                     |                                       |                                 |                                     |                                  |                             |                     |                         |                                    |            |                                  |  |
| ELMS Payment Reference   |  |                                       |                                 |                     |                                       |                                 |                                     |                                  |                             |                     |                         |                                    |            |                                  |  |
| Payment status   |  |                                       |                                 |                     |                                       |                                 |                                     |                                  |                             |                     |                         |                                    |            |                                  |  |
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| Date and time submitted  |  |                                       |                                 |                     |                                       |                                 |                                     |                                  |                             |                     |                         |                                    |            |                                  |  |
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## Consent of individual to being specified as premises supervisor 1 MANISHEUMAR MURUBHAI [full name of prospective premises supervisor] [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 .....[type of application] relating to a premises licence $\sim$ (A).....[number of existing licence, if any] HINCKLEY ROAD [name and address of premises to which the application relates] and any premises licence to be granted or varied in respect of this application made by MANISH KUMAR MURUBHAI SON RAJ [name of applicant] [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 ...... [insert personal licence number, if any] BLABY DISTRICT COUNCIL Personal licence issuing authority ...... [insert name and address and telephone number of personal licence issuing authority, if

MANISHRUMAR MURUBHHI SONRAJ name (please print)

any