£190 CARH. REC: 6025 CS033C1265

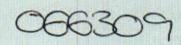
FORM 2

CUSTOMER SERVICE CENTRE 91 GRANBY STREET

27 OCT 2014

RECEIVED

Leicester City Council



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.

.l/We		NYSTIC SPICE	LTD				
uesi	ly for a cribed	t name(s) of applicant) premises licence under section Part 1 below (the premises at licensing authority in acco	s) and Nwe:	are mak	ing this applica	stion to we	
Part	1 – Pr	emises Details					
Post	al addr	ess of premises or, if none, ord	Inance surve	ey map i	eference or des	cription	
Comments		C LONDON ROAD					
Post	town	LEICESTER			Postcode	LEA	IED
Teler	phone r	number at premises (if any)					
					6888 E		
Non-	domest	tic rateable value of premises	£ 8,8	00			
Part :	2 - App	licant Details					
ricas	e state	whether you are applying for a			s ck as appropriat	te	
a)	an inc	dividual or individuals *			please comple		/A\
b)		son other than an individual *			please comple	ete section	(A)
				_			
		as a limited company			please comple		
	200	as a partnership			please comple	ete section	(B)
	III. a	as an unincorporated association	n or		nlease comple	to section	(D)

(A) INC Mr [Surnar I am 18	years old or over postal address if t from premises	Othe	r Title (for hple, Rev)	/es
(A) INC Mr [Surnar	statutory function or a function discharged by virtue of Her Majesty's DIVIDUAL APPLICANTS (fill in as applicable) Mrs	Othe	r Title (for hple, Rev)	/es
(A) INC Mr [Surnar	statutory function or a function discharged by virtue of Her Majesty's DIVIDUAL APPLICANTS (fill in as applicable) Mrs	Othe	N/A	
(A) INC	a function or a function discharged by virtue of Her Majesty's DIVIDUAL APPLICANTS (fill in as applicable) Mrs	Othe	N/A	
(A) INC	a function discharged by virtue of Her Majesty's DIVIDUAL APPLICANTS (fill in as applicable)		NIA	
I am m	statutory function or a function discharged by virtue of Her Majesty's	s prerogat	ive	
	statutory function or			
	naking the application pursuant to a			
premis	ocs for incertsable activities; of		res the use of the	LM
I am ca	arrying on or proposing to carry on a business w	hich invo	lves the use of the	N
	e tick yes			
* If you	u are applying as a person described in (a) or (b) please o	confirm:	
h)	the chief officer of police of a police force in England and Wales		please complete se	ection (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 s	ection (B)
g)	a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of a independent hospital in Wales	n 🗆	please complete s	The state of the s
f)	a health service body		please complete s	
e)	the proprietor of an educational establishment		please complete s	
	a charity		please complete s	The state of the s
d)	a recognised club		please complete	
c) d)	iv. other (for example a statutory corporation	n) 🔲	Diease complete	contine (D)

Mr 🗆	Mrs [Miss		Ms 🗆	Other Tit	N/A le (for	
Surname				First na	example	Rev)	
I am 18 yea	rs old or o	ver					
		· Ci				Plea	ase tick yes
Current post different fron address	al address n premises	s if					
Post town					Posto	ode	
Daytime con	tact telep	hone numb	er		Fost	ode	E Marie
-mail addre							
ease provide ease give a ther than a	de name a ny registr body cor	and register ered numbe porate), ple	ase give	ess of applica case of a par the name and	nt in full. I tnership o I address	Where a r other j of each	ppropriate oint ventur party conce
lease provide a pather than a lame my.	de name a iny registr body cor	and register ered numbe porate), ple	ase give	the name and	nt in full. I tnership o I address	Where a r other j of each	ppropriate oint ventur party conce
ddress 14	de name a iny registr body cor STIC S	and register ered numbe porate), ple PICE L	ase give	the name and	nt in full. I tnership o I address	Where a r other j of each	ppropriate oint ventur party conce
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Please provide as give a other than a lame My. ddress 14	de name a lany registra body cor STIC STIC STICES IT STI	re applicable for example,	ROA	the name and	address	of each	oint ventur party conce

Part 3 Operating Schedule

	When do you want the premises licence to start? DD MM (5) 3 (1) [1]	YYYY
	If you wish the licence to be valid only for a limited period, when do DD MM you want it to end?	YYYY
F	Please give a general description of the premises (please read guidance note 1)	
	RESTAURANT WITH A CAPACITY OF 90 PE	ofte.
	5,000 or more people are expected to attend the premises at any ne time, please state the number expected to attend. Nat licensable activities do you intend to carry on from the premises?	
(PI	lease see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the L	icensing
	ovision of regulated entertainment Please tick apply	any that
a)	plays (if ticking yes, fill in box A) NA	
b)	films (if ticking yes, fill in box B) \sim A	
c)	indoor sporting events (if ticking yes, fill in box C)	
d)	boxing or wrestling entertainment (if ticking yes, fill in box D) NA	
e)	live music (if ticking yes, fill in box E)	
f)	recorded music (if ticking yes, fill in box F) N A	
g)	performances of dance (if ticking yes, fill in box G) NA	
h)	anything of a similar description to that falling within (e), (f) or (g) NIA ·	

Provision of late night refreshment (if ticking yes, fill in box I)	1110	
Supply of alcohol (if ticking yes, fill in box J)	NIV.	
In all cases complete boxes K, L and M		Ø

Please give further details here (please read guidance noted) State any seasonal variations for performing plays (please guidance noted)	ote 3)
Please give further details here (please read guidance no	ote 3)
State any seasonal variations for performing plays (plea guidance note 4)	se read
Non standard timings. Where you intend to use the prentice of plays at different times to those lists	ises for
gordnin on the left, please list (please read guidance note to)
	Non standard timings. Where you intend to use the prem the performance of plays at different times to those listed column on the left, please list (please read guidance note 5

В

timing	ard days s (please nce note (read	Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	0
Day	Start	Finish	-	Outdoors	
Mon			Please give further details here (please read gui	Both	
Tue					
Wed			State any seasonal variations for the exhibition read guidance note 4)	of films (plea	se
Thur					
Fri			Non standard timings. Where you intend to use the exhibition of films at different times to those column on the left, please list (please read	the premises	for
at			column on the left, please list (please read guidan	ce note 5)	
un	Dept. 1				
un	CONTRACTOR DESCRIPTION	CONTRACTOR IN THE			

timing	ard days s (please noe note (read	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 to those listed in the
Fri			column on the left, please list (please read guidance note 5)
Sat			
un			

Stand timing	ng or wre tainments ard days s (please nce note 6	s and read	Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	
Day	Start	Finish	Outdoors	
Mon	e leggi		Please give further details here (please read guidance note	
Tue				
Wed	A REIGHER II		State any second will be	
			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)	
Thur			entertainment (please read guidance note 4)	
Thur Fri			Non standard timings. Where you intend to use the premise	es for
		The second secon	(picase read guidance note 4)	es for ence

Stand	music lard days is (please nce note (read	Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guid	Both	
Tue					
			State any seasonal variations for the performance (please read guidance note 4)	ce of live mu	sic
Thur			Non standard timings. Where you intend to use the performance of live music at different to use the performance of live music at dits and the performance of live music at different to use the live	the premises	for
Thur Fri				the premises	for

Stand	dard days gs (please nce note (and read	Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon		1	Please give further details here (please read gui	Both	10
Wed			State any seasonal variations for the playing of (please read guidance note 4)	recorded mu	sic
Thur					
Fri			Non standard timings. Where you intend to use the playing of recorded music at different times the column on the left.	the premises	for
Fri			Non standard timings. Where you intend to use the playing of recorded music at different times the column on the left, please list (please read gui	the premises to those lister idance note 5)	for d in

and guidance note 2)	
Outdoors	
Both	
easonal variations for the performance of dance guidance note 4)	
od timings. Where you intend to use the premises	for
re tert, prease list (please read guidance note 5)	
	ad guidance note 2) Outdoors

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)		that (e), (f) or and	Please give a description of the type of entertain providing	ment you will	be
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both - place tild		
Mon		FA AR	outdoors or both - please tick (please read guidance note 2)	Indoors	
			gardance note 2)	Outdoors	10
Tue	Maria Na		Please give furth	Both	In
			Please give further details here (please read gui	dance note 3)	lien.
Thur			State any spacenal wait it		
Thur			State any seasonal variations for entertainment description to that falling within (e), (f) or (g) (pl guidance note 4)	of a similar ease read	
			State any seasonal variations for entertainment description to that falling within (e), (f) or (g) (pl guidance note 4)	of a similar ease read	gulle
Thur Fri			guidance note 4)	ease read	
-ri		I t	State any seasonal variations for entertainment description to that falling within (e), (f) or (g) (pl guidance note 4) Non standard timings. Where you intend to use the entertainment of a similar description to that e), (f) or (g) at different times to those listed in the left, please list (please read guidance note 5)	ease read	for

Late night refreshment Standard days and timings (please read guidance note 6)		read	Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	0
Mon			Please give further details here (please read gu	Both	0
Tue			State any seasonal variations for the provision refreshment (please read guidance note 4)		
Thur			refreshment (please read guidance note 4)	or late night	
ri			Non standard timings. Where you intend to use the provision of late night refreshment at differe those listed in the column on the left place. If	the premises	for
at		9	those listed in the column on the left, please list guidance note 5)	(please read	
un					

Star	oply of all	c and	Will the supply of alcohol be for consumption On the	
mittil	ngs (pleas lance note	been as	please tick (please read guidance note 7) On the premises	N.
Day	Start	Finish	Off the premises	
Mon	12.0	0 24.00	State any seasonal variations for the supply of alcohol (ple read guidance note 4)	
Tue	12.00	2400		ase
		V September		
Wed	12.00	24.00		
Wed		2400	Non standard timings. Where you intend to use the premise	es for
Thur		2400	Non standard timings. Where you intend to use the premise the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 5) CHRISTMAS FUE - 12:00 Te 2:000	
Thur Fri	12.00	2400	Non standard timings. Where you intend to use the premise the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 5) CHRISTMAS FUE - 12.00 To 3.00 A (NEXT OF	·m

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

Name	BELALUR	RAHIMA		
Address		- military	BELALUR	RAHM
Postcode				
	cence number (if known)	44139	8	
ssuing lice	nsing authority (if known)	LONDON	BOROUFIT O	
			pokontit o	F BRENT

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).

L

Stan	rs premis n to the production dard days gs (please ance note	ublic and read	State any seasonal variations (please read guidance note 4
Day	Start	Finish	
Mon	12:00	24:00	
Tue	12:00	24:00	
Wed	12:00	24:00	
Thur	12:00	24:00	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)
ri	12:00	24:00	CHRISTMASEUE - 12:00 - 02:00 NEWYEARSEUE - 12:00 - 02:00
Sat	12:00	£4.00	10 12 12 12 10 - 02:00
un	12:00	24:00	

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 9)

STROWE MANAGEMENT CONTROLS AND EFFECTIVE TRAINING OF ALL STAFF SO THAT THEY ARE ALDREE OF THE PREMISEL LICENCE

a) NO SETUNT OF ALCOHOL UNDER ACE PEOPE.

b) NO DRUGK AND DISCREELE BEHAVIOR ON THE PREMISE

C) NO CIDENT AND ANTI-SOMAL BEHAVIOUR

a) NO AND HARM TO CHILDREN .

b) The prevention of crime and disorder

CCTV SASTEM INSTALLED TO MONITOR ENTRANCES, EXITS AND OTHER PARTS OF THE PREMISES IN CROSE TO ABORESS THE PREVENTED OF CRIME OBJECTIVE

- NOT SELLINE OF ALCOHOL TO DROVE OR INTOXICATED COSTOMERS .

c) Public safety

-INTERNAL AND EXITERIAL LIGHTING TIXEN TO PROMOTE THE PUBLIC SAFETY OBJECTUE !

ALL PARTS OF THE PREMISES AND ALL FITTINGS AND APPARANS THERETO, DODE FASTENINGS, AND NOTICES LIGHTING, HEATING, ELECTRICAL, AIR CONDITION, STATERY ACCOMODATION LAILL BE MAINTAINES AT ALL TIMES IN GOID CONDITION

d) The prevention of public nuisance

- DELIVERIER OF GOODS NECESSARY FOR THE OPERATION OF THE BUSINESS WILL BE CHERIED OUT AT SUCH A TIME OR IN SUCH A MANNER AS TO PREVENT NUISANCE AND PERVECT NULLANCE AND DISTORDING TO NEARBY RESIDENTS.

e) The protection of children from harm

WELL TRAINED STAFF ABOUT REQUIREMENT FOR PERSONS' IDENTIFICATION , ASE ECTABALLAMONT .

		2/1
Checklist:		
. I house m	Please tick to indicate agree	CONTRACT.
	ade or enclosed payment of the fee. aclosed the plan of the premises.	N
• I have se	ent copies of this application and the plan to responsible authorities and here applicable.	
	iclosed the consent form completed by the individual I wish to be designated supervisor, if applicable.	V
 I underst 	and that I must now advertise my application.	V
 I underst rejected. 	and that if I do not comply with the above requirements my application will be	
LEVEL 5 ON 2003, TO MAR	ENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT (E A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION THE SECTION OF THE CONTROL OF THE C	
LEVEL 5 ON 2003, TO MAR Part 4 – Signa Signature of a note 11). If signature	THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT (E A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION OF THE STATEMENT OF	
LEVEL 5 ON 2003, TO MAR Part 4 – Signa Signature of a note 11). If signature	THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT KE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION atures (please read guidance note 10) applicant or applicant's solicitor or other duly authorised agent (see guidance)	
LEVEL 5 ON 2003, TO MAR Part 4 – Signa Signature of a	THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT (E A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION OF THE CONNECTION OF T	
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Contact name (where not previously gwith this application (please read guid	given) and postal address for correspondence associated lance note 13)
Post town	Postcode
Telephone number (if any)	
If you would prefer us to correspond	with you by e-mail, your e-mail address (optional)

Notes for Guidance

 Describe the premises, for example the type of premises, its general situation and layout and any other information which could be relevant to the 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.

2. Where taking place in a building or other structure please tick as appropriate (indoors

may include a tent).

 For example the 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.

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

the summer months.

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

6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the

week when you intend the premises to be used for the activity.

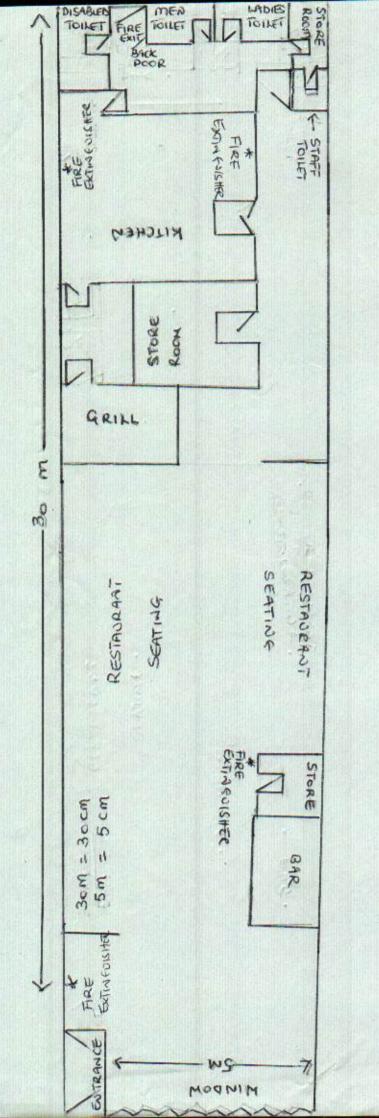
- 7. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
- 8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.

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

10. 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, each of the applicant or their respective agent must sign the application form.

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



PLANO SPICE



Consent of individual to being specified as premises supervisor

Interest of prospective premises supervisor Interest confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for A PREMISES LICENCE Type of application by INCENCE PRESIDENCE Interest Consend the consent to be specified as the designated premises supervisor in relation to the application for A PREMISES LICENCE Type of application supervisor of existing licence, if any) for mysers specified as the designated premises from the application relates of the consense of premises to which the application relates of the consense of premises to which the application relates of the consense of the c	1 BELANCE	2AHm
Inome 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 A PREMISES LICENCE [type of application] by BELALUR RATHM [iname of applicant] relating to a premises licence [number of existing licence, if any] for mysmc Spice Resindent I 46 C LONDON ROAD LEICENTE LER 1EB	[full name of prospective	e premises supervisor]
Inome 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 A PREMISES LICENCE [type of application] by BELALUR RATHM [iname of applicant] relating to a premises licence [number of existing licence, if any] for mysmc Spice Resindent I 46 C LONDON ROAD LEICENTE LER 1EB	of	
hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for A PREMISES HICENCE Itype of application; by BELALUR RAMM [name of applicant] relating to a premises licence [number of existing licence, if any] for mysmc Spice Resmisent 146 C LONDON ROAD LECENTE LER 1EB		
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A PREMISES LICENCE [type of application] by BELALUR RAMM [name of applicant] relating to a premises licence [number of existing licence, if any] for mysmc spice regionent 146 c London ROAD LEICESITE LER 1EB	hereby confirm to	emises supervisor]
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by BELALUR 2Athm [name of applicant] relating to a premises licence [number of existing licence, if any] for mysmc spice resimblant 146 c London ROAG LECESITE LEQ 1EB		application for
Iname of applicant) relating to a premises licence [number of existing licence, if any] for mysmc spice restainent 146 c fordon road Leiceste Lea 166	A PREMILES LIC	ENCE
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relating to a premises licence [number of existing licence, if any] for mysmc spice resimpent 146 c London ROAD Leicesite Lea 166	n	
relating to a premises licence [number of existing licence, if any] for mysmc spice restaneant 146 c London 2040 Leicesite Lea 166	[name of applicant]	m
for myshc spice restaneant 146 c London ROAD LEICESTE LEA 1EB		
for myshc spice restaneant 146 c London ROAD LEICESTE LEA 1EB	relating to a premises licence	
TOT MYSTIC SPICE RESTANDANT 146 C LONDON ROAD LEICESTE LEA 1EB		
LEICECTE LEA 1EB	for mucho con-	
LEA 1EB	MAZIC SPICE	RECIPIENT
Lea 168	1460 FONDON	2040
	LEICECTE	
name and address of premises to which the application relates]	LEA 1EB	
marile and address of premises to which the application relates]	name and 11	
	riante and address of premises to wi	nich the application relates]

and any premises I	icence to be granted or varied in respect of this application made
BECALUR R	Athm .
concerning the supp	y of alcohol at
mysne spi	CE RESIDUENT
146 C , Lon	DON POAN
LEICELITE	
LED 1GA	
[name and address of pren	nises to which application relates]
I also confirm that I ar licence, details of which	
Personal licence number	er en
441398	
[insert personal licence numb	er, if any]
Personal licence issuing	authority
LONDON BO	seasen of annia
[insert name and address and	telephone number of personal licence issuing authority, if any]
	personal neerice issuing authority, if any]
Signed	
Name (please print)	BELALUR RAHIM.
Date	20.10.2014