

069157

# APPENDIX B

FORM 12



Leicester  
City Council

## Application to vary a premises licence under the Licensing Act 2003

### PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

I/we ABDUL CARATELLA

*(Insert name(s) of applicant)*

being the premises licence holder, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number

LE1PRM1416

### Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description

HARNEYS  
43 BELVOIR STREET.

Post town

LEICESTER

Postcode

LE1 6SL

Telephone number at premises (if any)

Non-domestic rateable value of premises

£ 20,750

**Part 2 – Applicant details**

Daytime contact telephone number	
E-mail address (optional)	
Current postal address if different from premises address	
Post town	
Postcode	

**Part 3 - Variation**

Please tick as appropriate

Do you want the proposed variation to have effect as soon as possible?  Yes  No

If not, from what date do you want the variation to take effect?

DD	MM	YYYY
┆	┆	┆┆┆┆
┆	┆	┆┆┆┆

Do you want the proposed variation to have effect in relation to the introduction of the late night levy?  No  Yes (Please see guidance note 1)

Please describe briefly the nature of the proposed variation (Please see guidance note 2)

REMOVE FROM ANNEX 3 THE CONDITION  
WHICH READS AS FOLLOWS:

The premises will be licensed  
primarily as a restaurant with  
on sales only.

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:

N/A

**Part 4 Operating Schedule**

Please complete those parts of the Operating Schedule below which would be subject to change if this application to vary is successful.

**Please tick all that apply**

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

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

**A**

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

**B**

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

**C**

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 7)			<b><u>Please give further details</u></b> (please read guidance note 4)
Day	Start	Finish	
Mon			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 5)
Tue			
Wed			<b><u>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</u></b> (please read guidance note 6)
Thur			
Fri			
Sat			
Sun			

**D**

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)		Day	Start	Finish
<b>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</b> (please read guidance note 3) <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both	Mon			
	Tue			
	Wed			
	Thur			
	Fri			
	Sat			
	Sun			
<b>Please give further details here</b> (please read guidance note 4)				
<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 5)				
<b>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 6)				



**E**

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

**F**

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

**G**

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

**H**

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)		Day	Start	Finish
		Mon		
Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)		Indoors	<input type="checkbox"/>	
		Outdoors	<input type="checkbox"/>	
Both <input type="checkbox"/>		Tue		
		Wed		
Please give further details here (please read guidance note 4)		Thu		
		Fri		
State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)		Sat		
		Sun		
Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list (please read guidance note 6)				
Please give a description of the type of entertainment you will be providing				

**I**

<b>Late night refreshment</b> Standard days and timings (please read guidance note 7)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 4)		
Mon					
Tue					
Wed			<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 5)		
Thur					
Fri			<b>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</b> (please read guidance note 6)		
Sat					
Sun					

**J**

Supply of alcohol Standard days and timings (please read guidance note 7)		Day	
		Start	Finish
<p><b>Will the supply of alcohol be for consumption =</b>                      please tick (please read guidance note 8)</p> <p>On the premises <input type="checkbox"/></p> <p>Off the premises <input type="checkbox"/></p> <p>Both <input type="checkbox"/></p>	Mon		
	Tue		
	Wed		
	Thu		
	Fri		
	Sat		
	Sun		
<p><b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)</p>			
<p><b>Non-standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list</b> (please read guidance note 6)</p>			

**K**

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

**L**

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 7)			<b>State any seasonal variations</b> (please read guidance note 5)
Day	Start	Finish	
Mon			<b>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</b> (please read guidance note 6)
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

Please identify those conditions currently imposed on the licence which you believe could be removed as a consequence of the proposed variation you are seeking.

REMOVE FROM ANNEX 3 THE  
 CONDITION WHICH READS AS FOLLOWS:  
 The premises will be licenced  
 primarily as a restaurant  
 with on sales only.

Please tick as appropriate

Reasons why I have not enclosed the premises licence or relevant part of premises licence.

If you have not ticked one of these boxes, please fill in reasons for not including the licence or part of it below

- I have enclosed the premises licence
  - I have enclosed the relevant part of the premises licence
-



**M**

Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

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

**b) The prevention of crime and disorder**

**c) Public safety**

**d) The prevention of public nuisance**

**e) The protection of children from harm**

**Checklist:**


Please tick to indicate agreement

- I have made or enclosed payment of the fee; or
- I have not made or enclosed payment of the fee because this application has been made in relation to the introduction of the late night levy.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I understand that I must now advertise my application.
- I have enclosed the premises licence or relevant part of it or explanation.
- I understand that if I do not comply with the above requirements my application will be rejected.

**IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION.**

**Part 5 – Signatures** (please read guidance note 11)

**Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent** (please read guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	30-1-2015
Capacity	OWNER

**Where the premises licence is jointly held, signature of 2nd applicant (the current premises licence holder) or 2nd applicant's solicitor or other authorised agent** (please read guidance note 13). **If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	
Capacity	

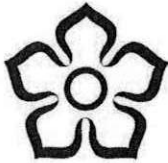
**Contact name (where not previously given) and address for correspondence associated with this application** (please read guidance note 14)

Post town		Post code	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

Licensing Act 2003

# Premises Licence

# LEIPRM1416



Leicester  
City Council

Licensing Authority Office  
Leicester City Council  
New Walk Centre  
Welford Place  
LEICESTER  
LE1 6ZG

ANNEXES continued ...

### Annex 3 - Conditions attached after a hearing by the Licensing Authority

The premises will be licensed primarily as a restaurant with on sales only.

The licence holder will ensure that CCTV is installed following advice from the Leicestershire Constabulary and maintained in accordance with the Information Commissioners CCTV Code of Practice.

The licence holder will ensure a "Challenge 21" policy requiring the production of "proof of age" for any sale that takes place where there is any suspicion that the customer is under 21. Such proof may include a pass conforming to the PASS accreditation system, photo driving licence, student cards and passports.

The licence holder will ensure that there will be adequate security alarms



NOTICE OF APPLICATION FOR A (~~NEW~~) (VARIATION OF EXISTING) (PREMISES LICENCE / ~~CLUB PREMISES CERTIFICATE~~)\*

Name of (applicant / ~~club~~):

ABDUL CARATELLA

Postal address of (premises / ~~club premises~~):

HARVEYS  
43 BELVOIR STREET  
LEICESTER  
LE1 6SL

Details of Application:

REMOVE FROM ANNEX 3  
THE CONDITION WHICH  
READS AS FOLLOWS:  
THE PREMISES WILL BE LICENCED  
PRIMARILY AS A RESTAURANT  
WITH ON SALES ONLY.

- The Licensing Register can be inspected at any time by visiting [www.leicester.gov.uk/licensing](http://www.leicester.gov.uk/licensing) . During office hours arrangements may be made for the register to be viewed at the Customer Services Department, Leicester City Council, New Walk Centre, Welford Place, Leicester, LE1 6ZG.
- Any representation relating to this application must be made in writing to the Licensing Authority by (insert the date that is 29 days from the date the application is received by the Licensing Authority).  
03 March 2015