



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.

I/We Nicholas Garnell Gourmet Coffee Bar + Kitchen Ltd  
(Insert name(s) of applicant)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

**Part 1 – Premises Details**

Gourmet Coffee Bar & Kitchen Leicester Railway Station London Road Leicester LE2 0QB		LICENSING SECTION <b>RECEIVED</b> 25 APR 2016 LEICESTER CITY COUNCIL	
<b>Post town</b>	Leicester	<b>Postcode</b>	LE2 0QB

Telephone number at premises (if any)	01978 660700 (head office)
Non-domestic rateable value of premises	N/A – Temporary Structure

**Part 2 - Applicant Details**

Please state whether you are applying for a premises licence as

Please tick as appropriate

- 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 registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales  please complete section (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 section (B)
- h) the chief officer of police of a police force in England and Wales  please complete section (B)

\* If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a statutory function or
- a function discharged by virtue of Her Majesty's prerogative

**(A) INDIVIDUAL APPLICANTS** (fill in as applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post town				Postcode	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post town				Postcode	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**(B) OTHER APPLICANTS**

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

<b>Name</b> Gourmet Coffee Bar & Kitchen Ltd
<b>Registered Address</b> Gourmet Coffee Bar & Kitchen Ltd Unit 5 Evolution House Lakeside Business Village St Davids Park Ewloe Flintshire CH5 3XP
<b>Registered number (where applicable)</b> 6222631
<b>Description of applicant (for example, partnership, company, unincorporated association etc.)</b> Limited company
<b>Telephone number (if any)</b> 01978 660700
<b>E-mail address (optional)</b> staceywilliams@gourmetcoffeebar.co.uk



### Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
1	4	05 2016

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

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please give a general description of the premises (please read guidance note 1)

Café within the Porte Cochere at Leicester Railway Station, measuring 135 square feet (public access: 42 square foot).  
 Primarily serving coffee, breakfasts, lunch options, wine & beers.  
 Exterior seating will be available to the right of the staff area (approx. 20 feet away)

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

N/A
-----

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick any that apply

- 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 6)			<b>Will the performance of a play take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	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 3)		
Mon					
Tue			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Wed					
Thur			<b>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</b> (please read guidance note 5)		
Fri					
Sat					
Sun					

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	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 3)		
Mon					
Tue					
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
Thur					
Fri			<b>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</b> (please read guidance note 5)		
Sat					
Sun					

C

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			<b><u>Please give further details</u></b> (please read guidance note 3)
Day	Start	Finish	
Mon			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 4)
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 5)
Thur			
Fri			
Sat			
Sun			



**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	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 3)		
Mon					
Tue					
Wed			<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 4)		
Thur					
Fri			<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 5)		
Sat					
Sun					

**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of live music take place indoors or outdoors or both – please tick</b> (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)			
Mon						
Tue						
Wed			<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)			
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 5)			
Sat						
Sun						

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b>Will the playing of recorded music take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 4)		
Thur					
Fri			<b>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</b> (please read guidance note 5)		
Sat					
Sun					

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of dance take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	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 3)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 4)		
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 5)		
Sat					
Sun					



# H

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<b>Will this entertainment take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b>Please give further details here</b> (please read guidance note 3)		
Wed					
Thur			<b>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</b> (please read guidance note 4)		
Fri					
Sat			<b>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</b> (please read guidance note 5)		
Sun					


I

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue			<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 4)		
Wed			<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 5)		
Thur					
Fri					
Sat					
Sun					

J

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4) N/A		
Mon	11.00	21.00			
Tue	11.00	21.00			
Wed	11.00	21.00			
Thur	11.00	21.00			
Fri	11.00	21.00			
Sat	11.00	21.00			
Sun	11.00	21.00	<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 5) N/A		

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

Name Nicholas Garnell
Address 
Personal licence number (if known) PA/SC030254
Issuing licensing authority (if known) Shropshire Council

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 8).  
 N/A

L

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variations</b> (please read guidance note 4) N/A
Day	Start	Finish	
Mon	5.30	21.00	
Tue	5.30	21.00	
Wed	5.30	21.00	
Thur	5.30	21.00	
Fri	5.30	21.00	
Sat	5.30	21.00	
Sun	5.30	21.00	



**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)**

- 1) The licence holder will ensure posters informing customers that the premises adheres to “Challenge 25” will be placed in prominent positions. Challenge 25 will be clearly advertised and adhered to on every transaction.
- 2) Remote access CCTV is installed and monitored from head office
- 3) All staff will receive full challenge 25 training by the designated premises supervisor and this training will be repeated a minimum of twice within a 12 month period
- 4) Managers/supervisors of premises to attend and fully participate in the City Centre Pub and Club Watch scheme

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

- 1) Remote access CCTV, monitored from head office, is installed and maintained in accordance with the Information Commissioners Codes Of Practice For CCTV. Recordings will be maintained at all times and images kept for 31 days. These images will be made available to Police Officers and Responsible Authorities within 48hours of a request being made.
- 2) A refusal book shall be kept detailing all refused sales of alcohol. The log will be kept for a minimum of 24 months, include the date and time of the refused sale and the name of the member of staff who refused the sale and be made available on request to Leicestershire Police and Responsible Authorities.
- 3) The licence holder will ensure all staff whether paid or unpaid will be trained in Responsible Alcohol Retailing and the relevant aspects of the Licensing Act 2003 before selling alcohol. This training will be documented and records maintained detailing the trainer and trainee and date of training. These records are to be kept for a minimum 24 months and made available to Leicestershire Police and Responsible Authorities on request. Training records shall be kept to record staff training and advice.
- 4) No drinks shall be served in glass containers at any time
- 5) We will give at least 7 days notification to the police licensing department supplying an operating plan of any changes in or of any new drinks offers and promotions in writing
- 6) The licence holder will ensure that customers do not have any access to alcohol until payment has been taken.
- 7) There will be no alcohol sales on those days when Leicester City Football Club are playing football matches on their home ground.
- 8) The licence holder will ensure that no beers, lagers, ciders or perrys are sold where the alcohol by volume (ABV) content exceeds 5.5%. All alcohol will be charged at premium rate.

**c) Public safety**

- 1) Our outlet will be fully secure and locked over night
- 2) A refusal book shall be kept detailing all refused sales of alcohol. The log will be kept for a minimum of 24 months, include the date and time of the refused sale and the name of the member of staff who refused the sale and be made available on request to Leicestershire Police and Responsible Authorities. Any customer seen to be intoxicated will be refused sale, this will then be recorded and kept on site for a minimum of 12 months
- 3) The outlet is within the station with East Midlands Trains security resources in place – significant staff present & CCTV

**d) The prevention of public nuisance**

- 1) Substantial food and non-intoxicating beverages, shall be available at all times and in all parts of the premises where alcohol is sold or supplied for consumption on the premises
- 2) All alcohol will be kept in a lockable chilled unit accessible only to staff.

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

- 1) A challenge 25 proof of age scheme, shall be operated at the premises where the only acceptable forms of identification shall bear their photograph, date of birth and a holographic mark. The licence holder will operate a "Challenge 25" policy and will only accept a passport, a photo card driving licence, a P.A.S.S. cards bearing a PASS hologram or identity cards issued by HM Forces if they contain the holders date of birth as a means of proof of age.
- 2) A refusal book shall be kept detailing all refused sales of alcohol. The log will be kept for a minimum of 24 months, include the date and time of the refused sale and the name of the member of staff who refused the sale and be made available on request to Leicestershire Police and Responsible Authorities. A log shall be kept detailing all refused sales of alcohol. The log will include the date and time of the refused sale and the name of the member of staff who refused the sale.
- 3) The licence holder will ensure all staff whether paid or unpaid will be trained in Responsible Alcohol Retailing and the relevant aspects of the Licensing Act 2003 before selling alcohol. This training will be documented and records maintained detailing the trainer and trainee and date of training. These records are to be kept for a minimum 24 months and made available to Leicestershire Police and Responsible Authorities on request. We will keep an up to date record, which will be available for inspection of staff training in respect of age related sales.
- 4) Notices shall be clearly displayed in the premises to emphasis to customers the prohibition on providing sales of alcohol to persons under the age of eighteen years.

**Checklist:**

**Please tick to indicate agreement**

- I have made or enclosed payment of the fee.
- I have enclosed the plan of the premises.




- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.
- I understand that I must now advertise my application.
- I understand that if I do not comply with the above requirements my application will be rejected.

**IT IS AN OFFENCE, LIABLE ON 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 4 – Signatures** (please read guidance note 10)

**Signature of applicant or applicant's solicitor or other duly authorised agent** (see guidance note 11). **If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	21/04/16
Capacity	managing director

**For joint applications, signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent** (please read guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance 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) staceywilliams@gourmetcoffeebar.co.uk			

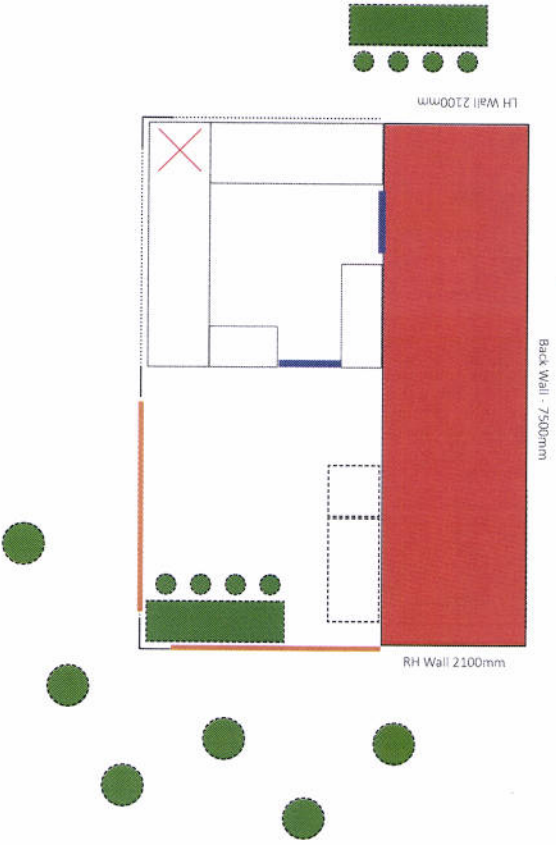
**Notes for Guidance**

1. 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).
  3. 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.
  5. 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.
  11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
  12. 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.



Drawing Scale 1:100



- Services Key**
- Kitchen Area
  - X Man Hole Cover
  - Proposed Seating Plan
  - Staff Access Point
  - Public Access Point

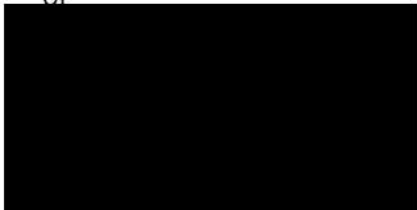


**Consent of individual to being specified as premises supervisor**

Nicholas Garnell

I .....  
*[full name of prospective premises supervisor]*

of



.....  
*[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

A premises license

.....  
*[type of application]*

by

Gourmet Coffee Bar & Kitchen Ltd

.....  
*[name of applicant]*

relating to a premises licence N/A  
.....  
*[number of existing licence, if any]*

for

Gourmet Coffee Bar & Kitchen Ltd  
Leicester Railway Station  
Leicester  
LE2 0QB

.....  
*[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

Gourmet Coffee Bar & Kitchen Ltd

-----  
*[name of applicant]*

concerning the supply of alcohol at

Gourmet Coffee Bar & Kitchen Ltd  
Leicester Railway Station  
Leicester  
LE2 0QB

-----  
*[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

PA/SC030254

-----  
*[insert personal licence number, if any]*

Personal licence issuing authority

Shropshire Council

-----  
*[insert name and address and telephone number of personal licence issuing authority, if any]*

Signed



Name (please print)

Nicholas Garnell

Date

20<sup>th</sup> April 2016

David Oldershaw

Area Station Manager

Leicester Station



Leicester City Council Licensing Dept

15<sup>th</sup> September 2015

To Whom it May Concern

## **Re. Alcohol License for Gourmet Kitchen, Leicester Train Station**

I write to ask you to reconsider your decision to not grant the above an alcohol license.

Within the footprint of the station there are already establishments that sell alcohol, There is also the Parcel Yard pub merely 30 feet away that also sells alcohol not to mention the 2 supermarkets very close by.

I would ask that you visit the site to see what an improvement to the station the new outlet has had, how it is very different from the current offering and how the area is well managed by the tenants and the BTP (whose office is 30 yards away) and that being able to offer alcoholic drinks will further add to the service provision of the outlet.

Yours sincerely



David Oldershaw  
Area Station Manager  
Disciplinary Hearing Officer



Following an unsuccessful application last year we have revisited all points raised and would now like the opportunity to re apply.

We have been trading at Leicester railway station for eight months and are confident that extending our range to include wines & beers wont add to the issues within the cumulative impact zone. Our alcohol offering consists of bottled local ales, ciders and lagers along with a selection of hand-selected wines. Due to the nature of the location these are priced at a premium rate and very rarely bought in any quantity to take away.

We consulted extensively with all of the local stakeholders to ensure that we had understood and addressed all of the potential issues and concerns. In particular following the representation from Leicestershire police we made contact with PC Jonathan Webb and have amended our application to match their conditions.

We have also taken on board the representation from Patrick Kitterick and have ensured that all of our beers and ciders are under 5.5%abv.

From our experience of serving alcohol at other similar locations we are confident that we can operate a license without causing any problems for the area.

Please find the attached letter from David Oldershaw regarding our application.

Yours faithfully,



Nicholas Garnell  
*Managing director & DPS*

LICENSING SECTION  
**RECEIVED**

25 APR 2016

LEICESTER CITY COUNCIL



**GOURMET**  
Coffee Bar & Kitchen

Tel: 01978 664249  
Website: [www.gourmetcoffeebar.co.uk](http://www.gourmetcoffeebar.co.uk)  
Email: [info@gourmetcoffeebar.co.uk](mailto:info@gourmetcoffeebar.co.uk)  
Twitter: @gourmetcbandk

Gourmet Coffee Bar & Kitchen  
Ground Floor, Mainetti House  
Bedwell Road  
Wrexham  
LL13 0TS

## NOTICE OF APPLICATION FOR A NEW PREMISES LICENCE

Name of applicant:
GOURMET COFFEE BAR & KITCHEN LTD
Postal address of premises:
LEICESTER RAILWAY STATION LONDON ROAD LEICESTER LE2 0QB
Details of Application:
ALCOHOL SALES – ON & OFF THE PREMISES  MONDAY TO SUNDAY 11.00 – 21.00
<ul style="list-style-type: none"><li>• The Licensing Register can be inspected at any time by visiting <a href="http://www.leicester.gov.uk/licensing">www.leicester.gov.uk/licensing</a> . During office hours arrangements may be made for the register to be viewed at the Customer Services Centre, 91 Granby Street, Leicester, LE1 6FB.</li><li>• Any representation relating to this application must be made in writing to the Licensing Authority by <b>23 May 2016</b>.</li><li>• It is an offence knowingly or recklessly to make a false statement in connection with an application. The maximum fine on summary conviction for this offence is £5,000.</li></ul>

**HELPFUL INFORMATION** (NB These notes do not form part of the notice and do not need to be displayed)

\* delete if not applicable