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L190 AMD - Receipt 3084 CS037 CS269

FORM 2

Appendix A



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 THOMAS LYONS PUB COMPANY LIMITED

(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

Postal address of premises or, if none, ordnance survey map reference or description 16 Millstone Lane			
Post town	Leicester	Postcode	LE1 5JN
Telephone number at premises (if any)	NA		
Non-domestic rateable value of premises	£5000		

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)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

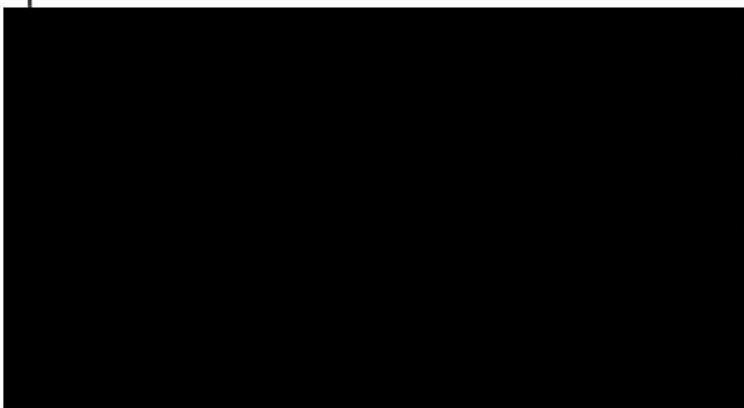
SECOND INDIVIDUAL APPLICANT (if applicable)

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

(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.

Name THOMAS LYONS PUB COMPANY LIMITED
Address 106 Hartopp Road Leciester LE2 1WF
Registered number (where applicable) 10033743
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company



Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
01	06	2016

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

DD	MM	YYYY

Please give a general description of the premises (please read guidance note 1)
 The premises will be a ground floor public house comprising:
 Public Drinking Area - 40.5 square metres, includes seating for around 50 people and a bar
 Male and Female Toilets - 15 square metres
 Staff Area - 8 square metres
 Cellar - 5.2 square metres
 Lobby 3.2 square metres

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

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)

X

In all cases complete boxes K, L and M

A

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

B

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

C

Indoor sporting events Standard days and timings (please read guidance note 6)			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 read guidance note 5)
Fri			
Sat			
Sun			

D

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

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	
			Indoors	<input checked="" type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) Live music may be performed and will always be unamplified. Amplification will never be used.	
Mon	10:00	23:00		
Tue	10:00	23:00	State any seasonal variations for the performance of live music (please read guidance note 4)	
Wed	10:00	23:00		
Thur	10:00	23:00	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 (please read guidance note 5)	
Fri	10:00	23:00		
Sat	10:00	23:00		
Sun	10:00	23:00		

F

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

G

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

H

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

1

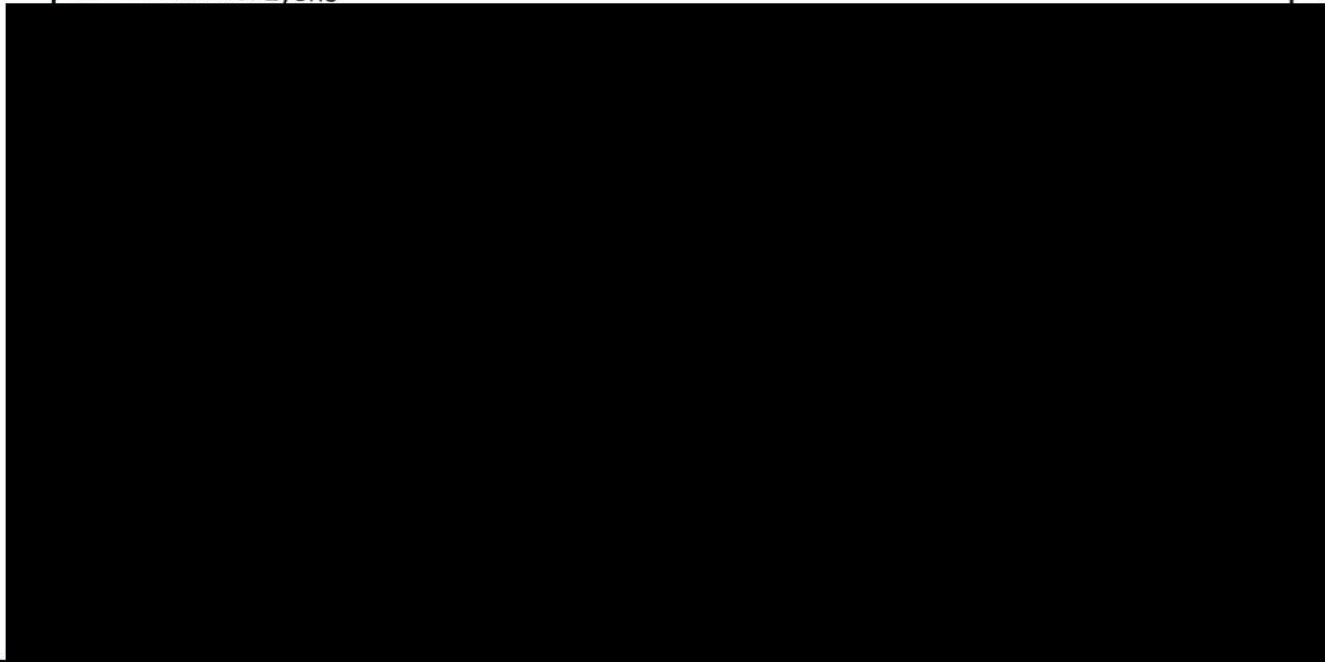
Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	
			Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>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

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)		On the premises	<input type="checkbox"/>
					Off the premises	<input type="checkbox"/>
					Both	X
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)			
Mon	10:00	23:00				
Tue	10:00	23:00				
Wed	10:00	23:00				
Thur	10:00	23:00				
Fri	10:00	23:00				
Sat	10:00	23:00				
Sun	10:00	23:00				
			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 (please read guidance note 5)			

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

Name
Kieran Michael Lyons



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).

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	10:00	00:00	<p><u>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</u> (please read guidance note 5)</p>
Tue	10:00	00:00	
Wed	10:00	00:00	
Thur	10:00	00:00	
Fri	10:00	00:00	
Sat	10:00	00:00	
Sun	10:00	00:00	

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)

In order to promote all 4 licensing objectives together, an experienced publican will be appointed as the DPS and manager of the premises.

We will try to foster a relaxed, tolerant and welcoming atmosphere in the pub.

We will co-operate fully with the relevant authorities to ensure that the licensing objectives are met, and also believe it is in our own self interest and that of the wider public to promote the objectives.

b) The prevention of crime and disorder

Please see attached additional notes

c) Public safety

Please see attached additional notes

d) The prevention of public nuisance

Please see attached additional notes

e) The protection of children from harm

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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	6/5/16
Capacity	COMPANY DIRECTOR.

For joint applications, signature of 2nd applicant or 2nd 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)

Kieran Lyons

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.

Additional notes for Part3: Operating Schedule, section M

The prevention of crime and disorder

The following steps will be taken to prevent crime and disorder:

1. We will operate a zero tolerance policy on illegal drugs. Anyone found using or in possession of drugs will be asked to leave and reported to the police.
2. Door supervisors: during the first two weeks of opening we will carry out a risk assessment to determine if door supervisors are necessary for the premises and at what times. If it is found that door supervisors are necessary then they will be employed.
3. Counterfeit notes: UV scanners will be used to check all notes and any found to be counterfeit will be confiscated and reported to the police.
4. Although we would like to sell alcohol for consumption off the premises, this will never be sold to take away in an open container or with the intention that it is drunk on the street.
5. No irresponsible drinks promotions will take place.
6. CCTV will be used to monitor the premises internally and externally in real time. It will be recorded for 31 days at a minimum and available to the police whenever they request it. Someone trained in the use of CCTV will be on the premises or on call at all times during opening hours. Signage will be displayed.

Public Safety

1. Fire: The premises are not currently occupied or open for business. We are planning to refurbish it in line with our plans (see attached). Once this is complete, and before we open to the public, we will carry out a fire risk assessment and put control measures, training and a maintenance plan in place.
2. Health and Safety: The premises are not currently occupied or open for business. We are planning to refurbish it in line with our plans (see attached). Once this is complete, and before we open to the public, we will carry out risk assessments and put control measures and training in place for the following (plus anything else that is appropriate):
 - Accident Reporting
 - Manual Handling
 - Working at Heights
 - Cuts and Lacerations
 - COSSH
 - Electrical Safety
 - Slips, trips and falls
 - Violence at work
3. The D.P.S. is a trained first aider. He will not be present at all times at the premises but there will always be an appointed person who will take charge if an accident happens.
4. Drinking water will be provided to employees and the public upon request.

The Prevention of Public Nuisance

1. Noise impact assessment.

Likely sources of noise to be generated from the premises include: noise from patrons using the premises, unamplified live music, and noise from patrons leaving the premises. There will be no amplified or recorded music and plant noise from a cooler and air con unit will be negligible and so is not included in this assessment.

Noise from patrons using the premises and unamplified will be emitted from the public drinking area as shown on the plan attached. There is a single exit to the premises for patrons to leave by.

There are two adjoining flats at numbers 14 and 18, both of which are located on the first floor. The premises are on the ground floor. There are no other residences within a significant distance of the premises.

There are no premises, such as fast food outlets, within a significant distance of the premises that may encourage street activity when customers leave the premises.

Millstone Lane does have some residential flats; however most customers, when leaving the premises, are more likely to head further into town towards Horsefair Street. The reasons for this are:

- a. This is where public transport is located
- b. There are more premises, open later than we are, that customers may wish to visit
- c. There are fast food outlets that customers may wish to visit

2. Noise management strategy

Sound proofing contained within a false ceiling will be put in above the public drinking area in order to protect the adjoining flats from noise generated by patrons using the premises and unamplified live music.

Notices will be displayed at the exit encouraging patrons to leave quietly and CCTV monitoring the outside street area will discourage rowdy behaviour.

The protection of children from harm

The supply of alcohol for consumption on the premises is the primary purpose of the service provided at the premises. It is therefore appropriate that children under 16 be accompanied by an adult. In addition, children will not be permitted on the premises after 9pm in the evening.

The Challenge 21 scheme will be in operation, following police guidelines.



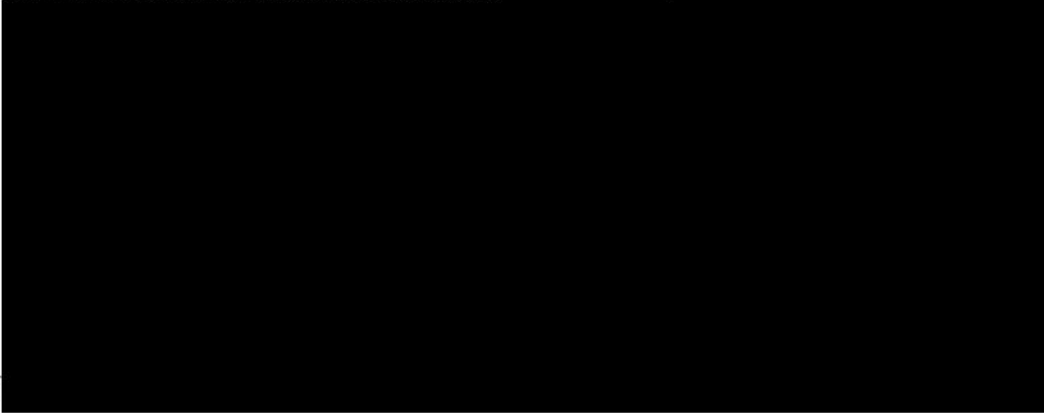
Leicester
City Council

Consent of individual to being specified as premises supervisor

I KIERAN MICHAEL LYONS

[full name of prospective premises supervisor]

of



[home]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

PREMISES LICENCE

[type of application]

by

THOMAS LYONS PUB COMPANY LIMITED

[name of applicant]

relating to a premises licence

[number of existing licence, if any]

for

16 MILLSTONE LANE
LEICESTER
LE1 5JN

[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

THOMAS LYONS PUB COMPANY LIMITED
[name of applicant]

concerning the supply of alcohol at

16 MILLSTONE LANE
LEICESTER
LE1 5JN

[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

LE1PRS2858

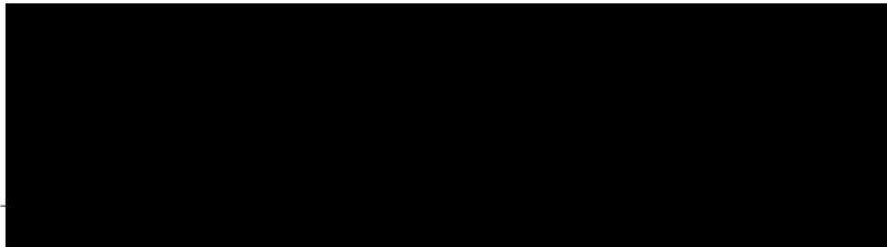
[insert personal licence number, if any]

Personal licence issuing authority

LEICESTER CITY COUNCIL

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

Signed



Name (please print)

KIERAN LYONS

Date

6/5/16