

108230

LICENSING SECTION  
RECEIVEDApplication for a premises licence to be granted  
under the Licensing Act 2003

28 AUG 2007

## PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

LEICESTER CITY COUNCIL

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 RANA SINGH SAHOTA  
(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			
BASIS BAR 148 NARBOROUGH RD			
Post town	LEICESTER	Postcode	LE3 0BT
Telephone number at premises (if any)			
Non-domestic rateable value of premises		£ 9700	

## Part 2 - Applicant details

- Please state whether you are applying for a premises licence as
- Please tick as appropriate
- |   |                             |
|---|-----------------------------|
| a) an individual or individuals * <input checked="" type="checkbox"/> | please complete section (A) |
| b) a person other than an individual *                                |                             |
| i as a limited company/limited liability partnership                  | please complete section (B) |
| ii as a partnership (other than limited liability)                    | 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) |

Con Ref  
1206/19000  
CHP

- 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 (by ticking yes to one box below):

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)

<input checked="" type="radio"/> Mr	<input type="radio"/> Mrs	<input type="radio"/> Miss	<input type="radio"/> Ms	Other Title (for example, Rev)	
Surname <b>SAHOTA</b>			First names <b>RANA SINGH</b>		
Date of birth					
Nationality					
Current address (including premises)					
Post town					
Daytime telephone number					
E-mail address (optional)					
SECONDARY CONTACT PERSON					
Mr					
Surname			First names		

<b>Date of birth</b>		I am 18 years old or over	
		Please tick yes	
<b>Nationality</b>			
Current postal address if different from premises address		N/A	
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.

Name
Address
N/A.
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD	MM	YYYY
	ASAP	

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)

BAR MORE PARTICULARLY SHOWN IN  
THE DETAILED PLANS SUBMITTED  
WITH THIS APPLICATION

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 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all 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

Plays Standard days and timings (please read guidance note 7)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
Mon				<u>Please give further details here</u> (please read guidance note 4)	Both
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Thur					
Fri			<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> (please read guidance note 6)		
Sat					
Sun					

n/A.

**B**

<b>Films</b> Standard days and timings (please read guidance note 7)			<b><u>Will the exhibition of films take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)		Indoors	
					Outdoors	
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 the exhibition of films</u></b> (please read guidance note 5)			
Wed						
Thur			<b><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></b> (please read guidance note 6)			
Fri						
Sat						
Sun						

n/A.

C

Indoor sporting events Standard days and timings (please read guidance note 7)			Please give further details (please read guidance note 4)
Day	Start	Finish	
Mon	11-00	23-00	DARTS.
Tue	11-00	23-00	
Wed	11-00	23-00	
Thur	11-00	23-00	
Fri	11-00	23-00	
Sat	11-00	23-00	
Sun	11-00	23-00	
			<p><b>State any seasonal variations for indoor sporting events</b> (please read guidance note 5)</p>
			<p><b>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</b> (please read guidance note 6)</p> <p>NEW YEARS EVE INTO</p> <p>NEW YEARS DAY</p> <p>- NO BREAK</p>



**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 7)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			<b><u>Please give further details here</u></b> (please read guidance note 4)		
Tue					
Wed			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 5)		
Thur					
Fri			<b><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></b> (please read guidance note 6)		
Sat					
Sun					

N/A.

**E**

<b>Live music</b> Standard days and timings (please read guidance note 7)			<b><u>Will the performance of live music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)		Indoors	
					Outdoors	
Day	Start	Finish	<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 live music</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 live music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 6)			
Sat						
Sun						

N/A.

**F**

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	11-00	23-00	<b>Please give further details here</b> (please read guidance note 4)	Both	<input type="checkbox"/>
Tue	11-00	23-00			
Wed	11-00	23-00	<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 5)		
Thur	11-00	23-00			
Fri	11-00	23-00	<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 6) NEW YEARS EVE INTO NEW YEARS DAY - NO BREAK.		
Sat	11-00	23-00			
Sun	11-00	23-00			

**G**

Performances of dance Standard days and timings (please read guidance note 7)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	
Day	Start	Finish	Indoors	
			Outdoors	
			Both	
Mon			<u>Please give further details here</u> (please read guidance note 4)	
Tue				
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)	
Thur				
Fri			<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> (please read guidance note 6)	
Sat				
Sun				

N/A.

# H

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	
Mon				Outdoors	
				Both	
Tue			<b><u>Please give further details here</u></b> (please read guidance note 4)		
Wed					
Thur			<b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 5)		
Fri					
Sat			<b><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></b> (please read guidance note 6)		
Sun					

n/A.



**I**

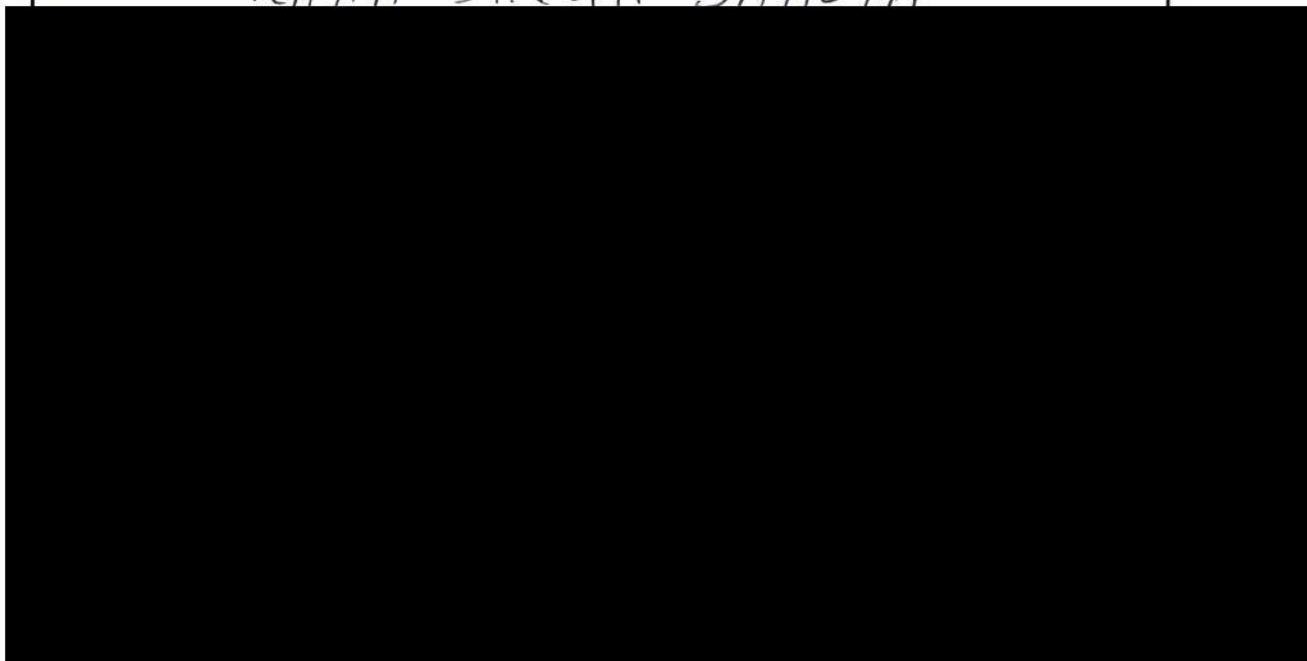
Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	11-00	23-00	<b>Please give further details here</b> (please read guidance note 4)	Both	<input type="checkbox"/>
Tue	11-00	23-00			
Wed	11-00	23-00	<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 5)		
Thur	11-00	23-00			
Fri	11-00	23-00	<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) NEW YEARS EVE INTO NEW YEARS DAY - NO BREAK		
Sat	11-00	23-00			
Sun	11-00	23-00			

**J**

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption - please tick (please read guidance note 8)	On the premises	
Day	Start	Finish		Off the premises	
Mon	11-00	23-00	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5)  <u>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</u> (please read guidance note 6)  NEW YEARS EVE INTO NEW YEARS DAY  - NO BREAK.	Both	<input checked="" type="checkbox"/>
Tue	11-00	23-00			
Wed	11-00	23-00			
Thur	11-00	23-00			
Fri	11-00	23-00			
Sat	11-00	23-00			
Sun	11-00	23-00			

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name	RANA SINGH SAHOTA.
------	--------------------



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).

NONE

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	11-00	23-00	
Tue	11-00	23-00	
Wed	11-00	23-00	
Thur	11-00	23-00	<p><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)</p> <p>CHRISTMAS EVE            NEW YEARS EVE            BANK HOLIDAYS</p>
Fri	11-00	23-00	
Sat	11-00	23-00	
Sun	11-00	23-00	

**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 10)**

THE APPLICANT HAS A NUMBER OF YEARS EXPERIENCE IN RUNNING A SIMILAR BAR HE WILL BE ON SITE TO SUPERVISE

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

See(a) THE BAR WILL OPERATE ON AGE VERIFICATION POLICY

**c) Public safety**

See(a) THE APPLICANT IS AWARE OF HIS RESPONSIBILITIES FOR THE SAFETY OF THE GENERAL PUBLIC AS WELL AS THAT OF HIS CUSTOMERS

**d) The prevention of public nuisance**

See(a) CUSTOMER WILL NORMALLY BE INSIDE THE BAR THEY WILL BE DIRECTED TO LEAVE THE PREMISES IN AN ORDERLY MANNER SO AS NOT TO CAUSE INCONVENIENCE TO RESIDENTS.

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



**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. ✓
- [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15). ✓

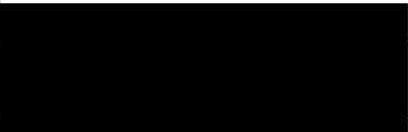
**IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.**

**IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.**

**Part 4 – Signatures** (please read guidance note 11)

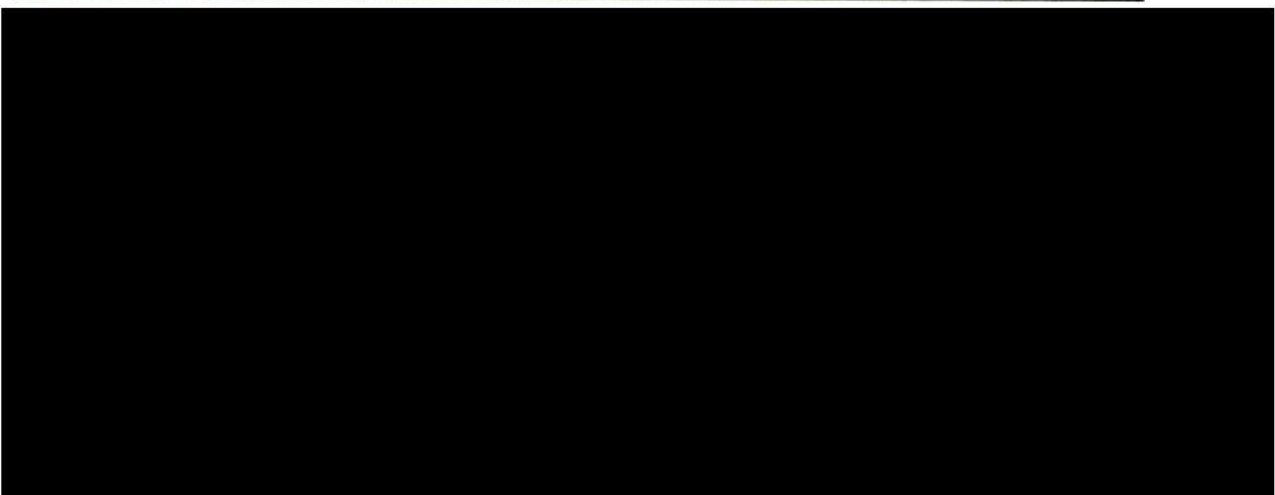
**Signature of applicant or applicant's solicitor or other duly authorised agent** (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**



<b>Declaration</b>	<ul style="list-style-type: none"> <li>• [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15).</li> <li>• The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15)</li> </ul>
Signature	
Date	25-8-18
Capacity	

**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 13). If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	
Capacity	

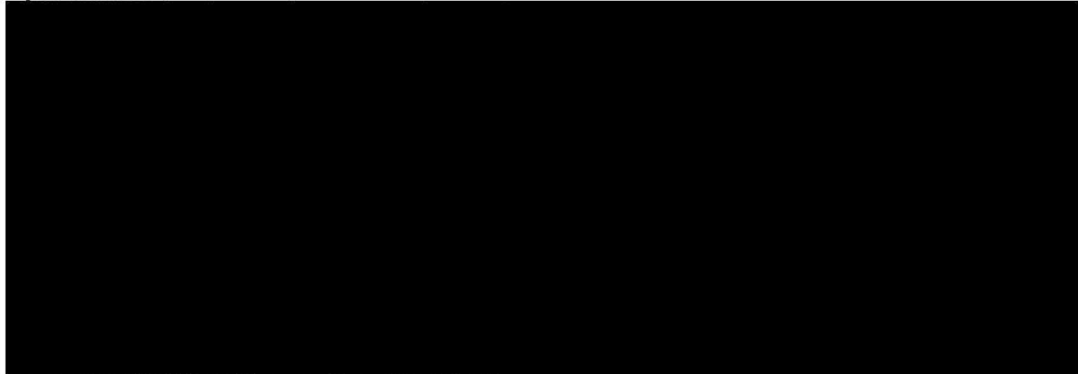


Any personal data that you provide will be processed in accordance with current data protection laws. It will be used by Leicester City Council and our partners to deliver and improve services and fulfil our legal duties. We will not disclose any personal information to anyone else unless required or allowed to do so by law. Read more about how we use personal data in our Privacy Notice on our website [www.leicester.gov.uk](http://www.leicester.gov.uk)

Consent of individual to being specified as premises supervisor

I MR. RANA SINGH SAHOTA.  
[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

LICENSABLE ACTIVITIES BAR.  
[type of application]

by

MR. RANA SINGH SAHOTA.  
[name of applicant]

relating to a premises licence \_\_\_\_\_  
[number of existing licence, if any]

for

OASIS BAR.  
148 NARBOROUGH RD  
LEICESTER LE3 0BT

\_\_\_\_\_  
[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

MR. RANA SINGH SAHOTA.  
[name of applicant]

concerning the supply of alcohol at

OASIS BAR  
148 NARBOROUGH RD  
LEICESTER LE3 0BT.

[name and address of premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

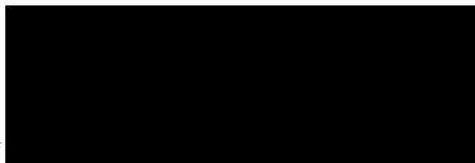
Personal licence number

LEIPRS 0541  
[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



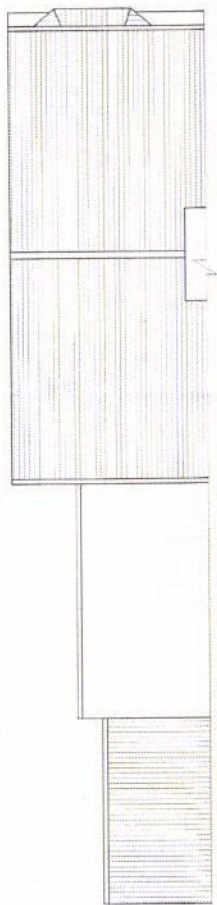
Name (please print)

RANA SINGH SAHOTA

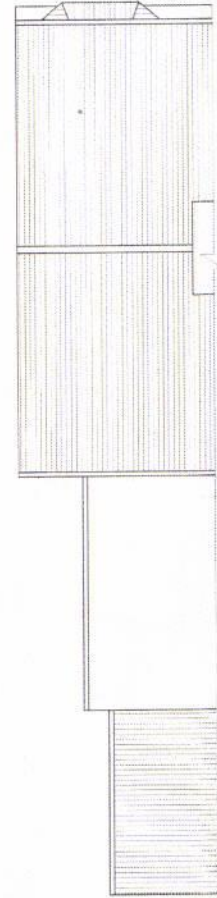
Date

25-8-18

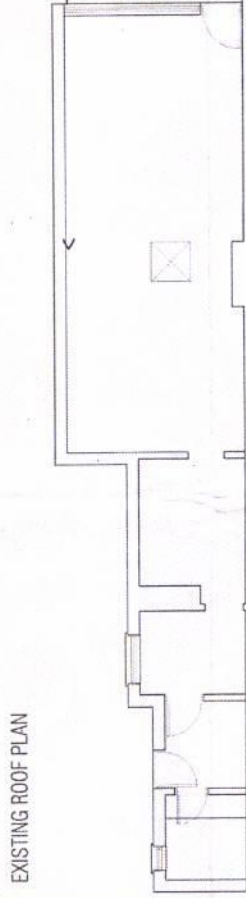




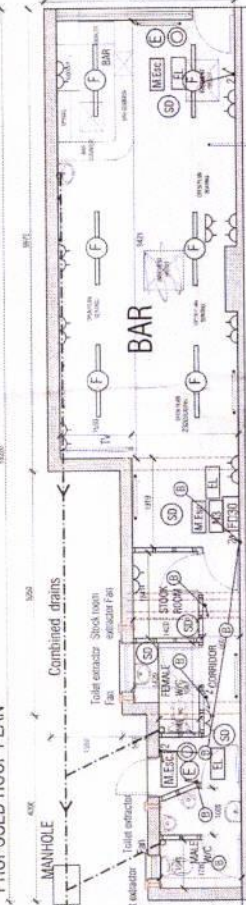
EXISTING ROOF PLAN



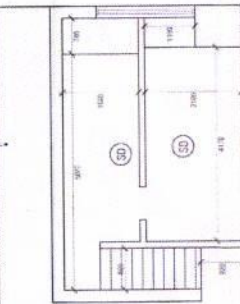
EXISTING GROUND FLOOR PLAN



PROPOSED ROOF PLAN



PROPOSED GROUND FLOOR PLAN



PROPOSED BASEMENT PLAN

**ELECTRICAL LEGEND**

- (F) Fluorescent Light
- (S) Double switched socket outlet 600 mm AFEL
- (P) Pendant light fitting
- (B) Bulkhead light fitting
- (L) Light switch
- (2) 2 Way Light switch
- (SD) Smoke Detector
- (H) Heat Detector
- (RAD) Radiator

**PROPOSED GROUND FLOOR PLAN**

Allow for full height wall fitting to toilet area, all to client's requirements.

The hot water supply temperature from the boiler to a sink, wash basin and bath is limited to a maximum of 43 degree C by the use of an electric thermostatic blending valve in other appropriate temperature control devices. Both vented and unvented storage vessels should have safety devices in place to prevent the stored water exceeding 100 degree C.

Heating radiators in the storage space will be achieved via electric fired convectors.

combustion leading steel panel radiators throughout or by means of electric powered convectors.

**EXISTING GROUND FLOOR PLAN**

**ND FLOOR PLAN THIS DRAWING MUST BE READ IN CONJUNCTION WITH A SEPARATE WRITTEN SCHEDULE SPECIFICATION**

Apply 15 mm British Gypsum sound boards to party walls around the staircase

**FIRE PROTECTION OF STEELWORKS**  
All steel beams to be fire lined using 15mm Gyproc fireline boards to achieve 60min fire resistance

**FIRE PROTECTION OF PARTY WALLS AND FLOORS**  
All party floors and walls to be fire lined using double 15mm Gyproc fire line Board on one side of the wall such as the corridors facing or either side of the walls, and to the under side of the buttressed out out ceiling soffit to achieve 60min fire resistance

(SD) Smoke Detector with  
(H) Heat Detector  
(EL) Emergency lighting BSS206  
Fire alarm call point BS 5839

(E) Emergency exit sign  
(M.ESC.) Main escaping sign  
Apply 15 mm British Gypsum sound boards to party walls around the staircase

**EXISTING BASEMENT PLAN**

Apply 15 mm British Gypsum sound boards to party walls around the staircase

DRAWING No  
**7801 102**

**KUNSTLER DESIGNS**  
ARCHITECTS

**KUNSTLER DESIGNS ARCHITECT**  
31 Ruford Street  
Leicester  
LE1 1HE  
Mob: 07797992738

NO	DATE	BY	REV
1	18/03/2017	SCALE 6 AT	SCALE 1:50

NO	DATE	BY	REV
1	18/03/2017	SCALE 6 AT	SCALE 1:50

**PROPOSED PUBLIC HOUSE**  
**148 NARBOROUGH ROAD, LEICESTER**

CLIENT: **OASIS BAR**

PROJECT: **PROPOSED PUBLIC HOUSE**

TITLE: **148 NARBOROUGH ROAD, LEICESTER**