

* required information

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You can save the form at any time and resume it later. You do not need to be logged in when you resume.

System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference	Little Europe	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
<p>Are you an agent acting on behalf of the applicant?</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>		<p>Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.</p>

Applicant Details

* First name	Aidas	
* Family name	Meckauskas	
* E-mail	little.europe1@googlemail.com	
Main telephone number	07853399089	Include country code.
Other telephone number		
<p><input type="checkbox"/> Indicate here if the applicant would prefer not to be contacted by telephone</p>		

Is the applicant:

- Applying as a business or organisation, including as a sole trader
- Applying as an individual

A sole trader is a business owned by one person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.

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Address

* Building number or name	Little Europe
* Street	715 Lincoln Road
District	
* City or town	Peterborough
County or administrative area	
* Postcode	PE1 3HD
* Country	United Kingdom

Agent Details

* First name	Jose Manuel
* Family name	Rocha
* E-mail	manuelrocha01@hotmail.com
Main telephone number	07868697778
Other telephone number	

Include country code.

Indicate here if you would prefer not to be contacted by telephone

Are you:

- An agent that is a business or organisation, including a sole trader
- A private individual acting as an agent

A sole trader is a business owned by one person without any special legal structure.

Your Address

* Building number or name	Unit 35, Battersea Business Centre
* Street	99-109 Lavender Hill
District	
* City or town	London
County or administrative area	
* Postcode	SW11 5QL
* Country	United Kingdom

Address official correspondence should be sent to.

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PREMISES DETAILS

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I/we, as named in section 1, apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in section 2 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.

Premises Address

Are you able to provide a postal address, OS map reference or description of the premises?

- Address OS map reference Description

Postal Address Of Premises

Building number or name	<input type="text" value="LITTLE EUROPE"/>
Street	<input type="text" value="715 LINCOLN ROAD"/>
District	<input type="text"/>
City or town	<input type="text" value="PETERBOROUGH"/>
County or administrative area	<input type="text"/>
Postcode	<input type="text" value="PE1 3HD"/>
Country	<input type="text" value="United Kingdom"/>

Further Details

Telephone number	<input type="text" value="07853399089"/>
Non-domestic rateable value of premises (£)	<input type="text" value="6,100"/>

Section 3 of 19**APPLICATION DETAILS**

In what capacity are you applying for the premises licence?

- An individual or individuals
- A limited company
- A partnership
- An unincorporated association
- A recognised club
- A charity
- The proprietor of an educational establishment
- A health service body
- A person who is registered under part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales
- A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England
- The chief officer of police of a police force in England and Wales
- Other (for example a statutory corporation)

Confirm The Following

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

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

Non Individual Applicant's Name

Name

LITTLE EUROPE PARTNERS LIMITED

Details

Registered number (where applicable)

07898545

Description of applicant (for example partnership, company, unincorporated association etc)

Continued from previous page...

PRIVATE LIMITED COMPANY

Address

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

Contact Details

E-mail

Telephone number

Other telephone number

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OPERATING SCHEDULE

When do you want the premises licence to start? / /
dd mm yyyy

If you wish the licence to be valid only for a limited period, when do you want it to end / /
dd mm yyyy

Provide a general description of 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.

LITTLE EUROPE IS A MINI MARKET/ DELICATESSEN SPECIALIZED IN LITHUANIAN, POLISH & RUSSIAN PRODUCTS.

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

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PROVISION OF PLAYS

Will you be providing plays?

- Yes No

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PROVISION OF FILMS

Will you be providing films?

- Yes No

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PROVISION OF INDOOR SPORTING EVENTS

Will you be providing indoor sporting events?

- Yes No

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PROVISION OF BOXING OR WRESTLING ENTERTAINMENTS

Will you be providing boxing or wrestling entertainments?

- Yes No

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PROVISION OF LIVE MUSIC

Will you be providing live music?

- Yes No

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PROVISION OF RECORDED MUSIC

Will you be providing recorded music?

- Yes No

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PROVISION OF PERFORMANCES OF DANCE

Will you be providing performances of dance?

- Yes No

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PROVISION OF ANYTHING OF A SIMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF DANCE

Will you be providing anything similar to live music, recorded music or performances of dance?

- Yes No

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LATE NIGHT REFRESHMENT

Will you be providing late night refreshment?

Section 15 of 19**SUPPLY OF ALCOHOL**

Will you be selling or supplying alcohol?

 Yes No**Standard Days And Timings**

MONDAY

Start End Start End

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.

TUESDAY

Start End Start End

WEDNESDAY

Start End Start End

THURSDAY

Start End Start End

FRIDAY

Start End Start End

SATURDAY

Start End Start End

SUNDAY

Start End Start End

Will the sale of alcohol be for consumption:

 On the premises Off the premises Both

If the sale of alcohol is for consumption on
the premises select on, if the sale of alcohol
is for consumption away from the premises
select off. If the sale of alcohol is for
consumption on the premises and away
from the premises select both.

State any seasonal variations

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

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Non-standard timings. Where the premises will be used for the supply of alcohol at different times from those listed in the column on the left, list below

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

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

Name

First name

Family name

Enter the contact's address

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

Personal Licence number (if known)

Issuing licensing authority (if known)

PROPOSED DESIGNATED PREMISES SUPERVISOR CONSENT

How will the consent form of the proposed designated premises supervisor be supplied to the authority?

- Electronically, by the proposed designated premises supervisor
- As an attachment to this application

Reference number for consent form (if known)

If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.

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ADULT ENTERTAINMENT

Highlight any adult entertainment or services, activities, or other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children

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 etc gambling machines etc.

N/A

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HOURS PREMISES ARE OPEN TO THE PUBLIC

Standard Days And Timings

MONDAY

Start

End

Start

End

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.

TUESDAY

Start

End

Start

End

WEDNESDAY

Start

End

Start

End

THURSDAY

Start

End

Start

End

FRIDAY

Start

End

Start

End

SATURDAY

Start

End

Start

End

SUNDAY

Start

End

Start

End

State any seasonal variations

Continued from previous page...

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

Non standard timings. Where you intend to use the premises to be open to the members and guests at different times from those listed in the column on the left, list below

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

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LICENSING OBJECTIVES

Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b,c,d,e)

List here steps you will take to promote all four licensing objectives together.

ALL STAFF TO RECEIVE REGULAR TRAINING REGARDING THE REQUIREMENTS OF THE FOUR LICENSING OBJECTIVES OF THE LICENSING ACT 2003 WITH APPROPRIATE TRAINING RECORDS MAINTAINED. WE WILL IMPLEMENT ANY RECOMMENDATIONS GIVEN BY THE AUTHORITIES TO IMPLEMENT AND PROMOTE THE FOUR LICENSING OBJECTIVES. REGULAR STAFF TRAINING TO TAKE PLACE REGARDING THE REQUIREMENTS AND RESPONSIBILITIES OF THE LICENSING ACT 2003, STAFF WILL BE TRAINED TO USE THE INCIDENT LOGS. CCTV WILL BE INSTALLED WITH 31 DAYS RECORDING, CHALLENGE 25 POLICY BE OPERATED ON THE PREMISES. EVERY SUPPLY OF ALCOHOL UNDER THIS LICENSE WILL BE MADE OR AUTHORISED BY A PERSON WHO HOLDS A PERSONAL LICENSE.

b) The prevention of crime and disorder

CCTV WILL BE CAPABLE OF HOLDING RECORDINGS FOR 31 DAYS AND WILL BE MADE AVAILABLE UPON REQUEST TO SUITABLY AUTHORISED OFFICERS. DRUNK AND VIOLENT PERSONS WILL NOT BE SERVED OR ALLOWED IN OUR PREMISES. POSTERS AND SIGNAGE WILL BE PLACED; STAFF WILL BE TRAINED IN ACCORDANCE. WE WILL IMPLEMENT ANY RECOMMENDATIONS GIVEN BY THE POLICE OR OTHER AUTHORITIES. AN INCIDENT LOG BOOK WILL BE MAINTAINED AT THE PREMISES WHERE STAFF WILL BE RESPONSIBLE FOR ENTERING DETAILS OF ANY INCIDENT OF A VIOLENT/ DISORDERLY NATURE. IF INVITED, WE WILL PARTICIPATE IN THE LOCAL PUB WATCH & HAVE REGULAR MEETINGS WITH NEIGHBOURS.

c) Public safety

WE WILL IMPLEMENT ANY REASONABLE RECOMMENDATIONS GIVEN BY THE POLICE AND OTHER RESPONSIBLE AUTHORITIES. VIOLENT AND DRUNK PEOPLE SHALL NOT BE SERVED, STAFF WILL BE FURTHER TRAINED. THE UNDER 25 CHALLENGE WILL BE IMPLEMENTED. THE PREMISES LICENSE HOLDER WILL ENSURE COMPLIANCE OF CURRENT FIRE AND SAFETY REGULATIONS AND VENTILATION AND AIR CONDITIONING TO BE WELL MAINTAINED AND IN GOOD CONDITION.

d) The prevention of public nuisance

Continued from previous page...

CUSTOMERS WILL BE ASKED TO LEAVE THE VICINITY PROMPTLY, QUIETLY AND RESPECTFULLY. CLEAR AND LEGIBLE NOTICES WILL BE PROMINENTLY DISPLAYED AT ALL EXITS ASKING CUSTOMERS TO RESPECT LOCAL RESIDENTS AND TO LEAVE QUIETLY.

e) The protection of children from harm

STAFF WILL BE TRAINED REGARDING PROTECTION OF CHILDREN FROM HARM OBJECTIVE.
NO ID, NO SALE. THE UNDER 25 CHALLENGE WILL APPLY.
STAFF WILL BE TRAINED TO RECOGNISE ID PROOF AND CHALLENGE 25.
REFUSAL BOOK, STAFF TRAINING RECORDS WILL BE AVAILABLE FOR THE AUTHORITIES.

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PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

Premises Licence Fees are determined by the non domestic rateable value of the premises.

To find out a premises non domestic rateable value go to the Valuation Office Agency site at http://www.voa.gov.uk/business_rates/index.htm

Band A - No RV to £4300	£100.00
Band B - £4301 to £33000	£190.00
Band C - £33001 to £8700	£315.00
Band D - £87001 to £12500	£450.00*
Band E - £125001 and over	£635.00*

*If the premises rateable value is in Bands D or E and the premises is primarily used for the consumption of alcohol on the premises then you are required to pay a higher fee

Band D - £87001 to £12500	£900.00
Band E - £125001 and over	£1,905.00

There is an exemption from the payment of fees in relation to the provision of regulated entertainment at church halls, chapel halls or premises of a similar nature, village halls, parish or community halls, or other premises of a similar nature. The costs associated with these licences will be met by central Government. If, however, the licence also authorises the use of the premises for the supply of alcohol or the provision of late night refreshment, a fee will be required.

Schools and sixth form colleges are exempt from the fees associated with the authorisation of regulated entertainment where the entertainment is provided by and at the school or college and for the purposes of the school or college.

If you operate a large event you are subject to ADDITIONAL fees based upon the number in attendance at any one time

Capacity 5000-9999	£1,000.00
Capacity 10000 -14999	£2,000.00
Capacity 15000-19999	£4,000.00
Capacity 20000-29999	£8,000.00
Capacity 30000-39000	£16,000.00
Capacity 40000-49999	£24,000.00
Capacity 50000-59999	£32,000.00
Capacity 60000-69999	£40,000.00
Capacity 70000-79999	£48,000.00
Capacity 80000-89999	£56,000.00
Capacity 90000 and over	£64,000.00

* Fee amount (£)

190.00

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DECLARATION

* I/we understand it is an offence, liable on conviction to a fine up to 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.

Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

* Full name

* Capacity

* Date / /
dd mm yyyy

[Add another signatory](#)

Once you're finished you need to do the following:

1. Save this form to your computer by clicking file/save as...
2. Go back to <https://www.gov.uk/apply-for-a-licence/premises-licence/peterborough/apply-1> to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

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

OFFICE USE ONLY

Applicant reference number

Fee paid

Payment provider reference

ELMS Payment Reference

Payment status

Payment authorisation code

Payment authorisation date

Date and time submitted

Approval deadline

Error message

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