L2



Peterborough City Council, Licensing Section, Bridge House, Town Bridge, Peterborough, PE1 1HU

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.

Part 1 – Premises details	
Postal address of premises or, if none, ordnance	survey map reference or description
Peter borough	<u>,</u> •
	· · ·
Post town Peterborough	Post code PEI 3DR
Telephone number at premises (if any)	01733 701169
Non-domestic rateable value of premises	£ 3 \$ 50
	<del></del>
Part 2 - Applicant details	
Please state whether you are applying for a premise Please	s licence as ase tick * yes
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	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) ple	
I am carrying on or proposing to carry on a busing which involves the use of the premises for licensa	
I am making the application pursuant to a - statutory function or	
- a function discharged by virtue of H	er Majesty's prerogative
(A) INDIVIDUAL APPLICANTS (fill in as applicable)	
Mr Mrs Miss Ms	Other title (for example, Rev)
Surname	First names
IJAZ	QAISER
	Please tick vyes
I am 18 years old or over	
Current postal address if different from premises address	4 D
Post Town PETERBOROUGH	Postcode PEI 2PB
Daytime contact telephone number	
E-mail address (optional)	**

SECOND INDIVIDUAL APPLICANT (IT applicable)
Mr Mrs Miss Ms Other title
(for example, Rev) Surname First names
ristilanes
Please tick ✓ yes
i am 18 years old or over
Current postal
address
if different from
premises address
* [
Post Town Postcode
Daytima contact talanhana number
Daytime contact telephone number
E-mail address
(optional)
(D) OTHER ARRIGANTS
(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
Concerned
Name
Address
Address
Registered number (where applicable)
Description of applicant (for example partnership, company, unincorporated association etc)
, and the second
Telephone number (if any)
E-mail address (optional)
E mail address (optional)

## Part 3 Operating Schedule

When do you want the premises licence to start?  Day Month Year  [   S     1   2   0	
If you wish the licence to be valid only for a limited period, when do you want it to end?  Day Month Year  If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.	
Please give a general description of the premises (please read guidance note1)	
What licensable activities do you intend to carry on from the premises? (Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)	-
Provision of regulated entertainment	
a) plays (if ticking yes, fill in box A)	
b) films (if ticking yes, fill in box B)	
c) indoor sporting events (if ticking yes, fill in box C)	
d) boxing or wrestling entertainment (if ticking yes, fill in box D)	
e) live music (if ticking yes, fill in box E)	
f) recorded music (if ticking yes, fill in box F)	
g) performances of dance (if ticking yes, fill in box G)	
h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)	
Provision of entertainment facilities for:	
i) making music (if ticking yes, fill in box I)	
j) dancing (if ticking yes, fill in box J)	
k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)	
Provision of late night refreshment (if ticking yes, fill in box L)	

 $[\cdot]$ 

## In all cases complete boxes N, O and P

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Plays Standa	rd days a	nd .	Will the performance of a play take place indoors or outdoors or both - please tick [Y] (please read guidance note 2)	Indoors Outdoors
timings	(please r	ead	guidance note 2)	Culduois
Day	ce note 6 Start	Finish		Both
Mon	Otart	TRUOT	Please give further details here (please read guidan	ce note 3)
Tue				
Wed			State any seasonal variations for performing plays guidance note 4)	<u>s (</u> please read
Thur				<u> </u>
Fri	/		Non standard timings. Where you intend to use to performance of plays at different times to those list on the left, please list (please read guidance note 5	stea in the column
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Films	8		Will the exhibition of films take place indoors or	Indoors
Standa	ard days	and	outdoors or both - please tick [Y] (please read	
	s (pleas		guidance note 2)	
	ncë note			Outdoors
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			exhibition of films at different times to those listed in	<u>i the column on</u>
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Boxing	or wr	estling	Will the boxing or wrestling entertainment take	Indoors
entertainments			place indoors or outdoors or both - please tick	
Standard days and			[Y](please read guidance note 2)	Outdoors
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	e note 6			,
Day	Start	Finish		Both
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Tue	<del>                                     </del>			
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Wed		<del> </del>	State any seasonal variations for boxing or wrest	ing entertainment
			(please read guidance note 4)	
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<b>[</b> 1]		/	boxing or wrestling entertainment at different tim	es to those listed in
1			the column on the left, please list (please read guid	dance note 5)
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	or sport	ing	Please give further details (please read guidance note 3)
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Standard days and			
timings (please read			
	nce note 6		
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			guidance note 4)
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			on the left, please list (please read guidance note 5)
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Reco	rded mi	usic	Will the playing of recorded music take place	Indoors
Standard days and		nd	indoors or outdoors or both - please tick [Y]	
timings	timings (please read		(please read guidance note 2)	Outdoors
	ce note 6			
Day	Start	Finish		Both
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Fri		) ,	Non standard timings. Where you intend to use playing of recorded music entertainment at diffe	tne premises for the
			listed in the column on the left, please list (please	e read guidance note 5)
			noted in the detailing on the stay process.	,
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Live music Standard days and timings (please read guidance note 6)		read	Will the performance of live music take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)	Indoors Outdoors
Day	Start	Finish		Both
Mon			Please give further details here (please read guidance	
Tue				
Wed			State any seasonal variations for the performance of I read guidance note 4)	ive music (please
Thur				
Fri			Non standard timings. Where you intend to use the p performance of live music at different times to those I column on the left, please list (please read guidance no	isted in the
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Sun				

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)		o that (e), (f) nd timings dance note	Please give a description of the type of entertainment you will be providing  Will this entertainment take place Indoors	
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick	
Mon			[Y] (please read guidance note 2)	Doth
Tue			Please give further details here (please read guidance note 3)	
Wed				
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)	
Fri				·
Sat			Non standard timings. Where you intend to use the premises for the entertainment of similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list (please read guidance note 5)	
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Perfo	rmance	s of	Will the performance of dance take place indoors	Indoors
dance			or outdoors or both - please tick [Y] (please read	
	ard days a		guidance note 2)	Outdoors
	s (please i			
	ce note 6			
Day	Start	Finish		Both `
Mon			Please give further details here (please read guidance	e note 3)
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Wed	·		State any seasonal variations for the performance	of dance (please
			read guidance note 4)	
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			in the column on the left, please list (please read gu	idance note 5)
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Please give a description of the facilities for making music you will be Provision of providing facilities for making music Standard days and timings (please read guidance note 6) Will the facilities for making music be indoors of Indoors outdoors or both - please tick [Y] (please reget Outdoors guidance note 2) Day Start Finish Both Please give further details here (please read guidance note 3) Mon Tue State any seasonal variations for the provision of facilities for making Wed music (please read guidance note 4) Thur Non standard timings. Where you intend to use the premises for Fri provision of facilities for making music entertainment at different times to those listed in the column on the left, please list (please read guidance note 5) Sat Sun

J

Provision of facilities			Will the facilities for dancing be indoors or outdoors	Indoors
for dancing			or both - please tick [Y] (see guidance note 2)	
Standard days and timings				outdoors
(please read guidance note		dance note	/	
6) Day Start Finish				Both
Mon	Jan		Please give a description of the facilities for dancing	
			providing	
				<u>,,,,, </u>
Tue			Please give further details here please read guidance	note 3)
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Wed	<del> </del>	<u> </u>	State any seasonal variations for providing dancing fa	acilities (please
'''			read guidance note 4)	
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Fri	+		Non standard timings. Where you intend to use the p	premises for the
1			I provision of facilities for dancing entertainment at dis	fferent times to
	<u> </u>	/	those listed in the column on the left, please list (plea	ise read guidance
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# K

Provision of facilities for entertainment of a similar description to that falling within I or J Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment facility you will be providing	
Day	Start	Finish	Will the entertainment facility be Indoors or outdoors or both – please tick [Y] (please read	
Mon			guidance note 2) Outdoor Both	
Tue			Please give further details here (please read guidance note 3)	
Wed				
Thur			State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within I or J (please read guidance note 4)	
Fri				
Sat			Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times to those listed in the column on the left, please list (please read guidance note 5)	
Sun				

Indoors Will the provision of late night refreshment take Late night place indoors or outdoors or both - please tick [Y] refreshment (please read guidance note 2) Standard days and Outdoors timings (please read guidance note 6) Both Start Finish Day Please give further details here (please read guidance note 3) Mon Tue State any seasonal variations for the provision of late night Wed refreshment (please read guidance note 4) Thur Non standard timings. Where you intend to use the premises for the Fri provision of late night refreshment at different times, to those listed in the column on the left, please list (please read guidance note 5) Sat Sun

Supply of alcohol Standard days and			Will the sale of alcohol be for consumption (Please tick box Y) (please	On the premises
timings (please read guidance note 6)			read guidance note 7)	Off the premises
Day	Start	Finish		Both
Mon	1	10.30pm	State any seasonal variations for the supply guidance note 4)	
Tue	IDAM	10.30 pm	• .	
Wed	10AM	10.30 PM		
Thur	10 AM	10.30pm	Non-standard timings. Where you intend to supply of alcohol at different times to those the left, please list (please read guidance not	listed in the column on
Fri	MAM	11.30 pm		
Sat	loam	11.30 pm		, 1
Sun	10 AM	10.30pm	·	
	1	1		•

State the name and details of the individual whom you supervisor	
Name	
Address	
Postcode	
Personal Licence number(if known)	
ssuing licensing authority (if known)	
Please highlight any adult entertainment or services,	activities other entertainment or mafters
incillary to the use of the premises that may give rise	e to concern in respect of children (please
ead guidance note 8)	
MALLY SUDDIY OF ALCOHO	• • •
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ONLY SUPPLY OF ALCOHO	

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Hours premises are		ises are	State any seasonal variation (please read guidance note 4)
open to the public			the diff seasonal variation (please read guidance note 4)
Stand	Standard timings (please		
	read guidance note 6)		
Day Mon	Start	Finish :	
IVIOIT	10.00	22.30	
1	10.00	20,30	
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Tue	10.00	22.30	
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Wed	10.00	22.00	
	10.00	22.00	
			Non standard timings. Where you intend to use the premises to be
			open to the public at different times from those listed in the column on
Thur	1		the left, please list (please read guidance note 5)
	10.90	22.30	
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Fri	<u> </u>	<u> </u>	
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Sat	10.00	23.30	
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Sun	10.00	22:30	
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### P

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

a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)

Keep within the Licensing hours.

NOT Sell alcohol to any person under the age of 18.

NOT to allow customers to hang around outside the sheft to prevent public nuissance.

NOT to serve any one who seems to be drunk.

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

Install cctu inside and obtside the fremises.

Keep in touch with Local community support officers.

Inform the relevant authority of any crime in the area.

#### c) Public safety

NOT to Play Music in the shelf or allow anyone to do 90 outside the shel.

Prevent illegal Parking outside.

#### d) The prevention of public nuisance

STOP anyone hanging around outside.

STOP motorists from sounding their norn.

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

Not to serve anyone under the age of 18. regularly check ID of anyone who Looks under 21 years.

CHECKLIST:-	Please tick Y yes	
I have made or enclosed payment of the fee	, 12350 tion , 965	
I have enclosed the plan of the premises		
I have sent copies of this application and the plan to respondthers where applicable	nsible authorities and	
I have enclosed the consent form completed by the individual supervisor, if applicable	ual I wish to be premises	
I understand that I must now advertise my application		V
understand that if I do not comply with the above requirem be rejected	ents my application will	7
IT IS AN OFFENCE, LIABLE ON CONVICTION TO ON THE STANDARD SCALE, UNDER SECTION 1 ACT 2003, TO MAKE A FALSE STATEMENT IN WITH THIS APPLICATION	50 OF THE HORMONO	
Part 4 – Signatures (please read guidance note 10)		
Signature of applicant or applicant's solicitor or other duly a guidance note 11) If signing on behalf of the applicant please	authorised agent. (See	
Signature	ţ	
Date 27-10-2011		
Capacity OUNER		
For joint applications signature of 2 <sup>nd</sup> applicant or 2 <sup>nd</sup> applications authorised agent. (please read guidance note12) If signing or please state in what capacity.		
Signature		
Date		
Capacity		
Contact name (where not previously given) and postal addrewith this application (please read guidance note 13)	ess for correspondence associa	ated
MR GAISER I JAZ		
LINCOLN ROAD		
·		
Post town 1	Post code On a On	
	Post code PEI 2 PB	į.

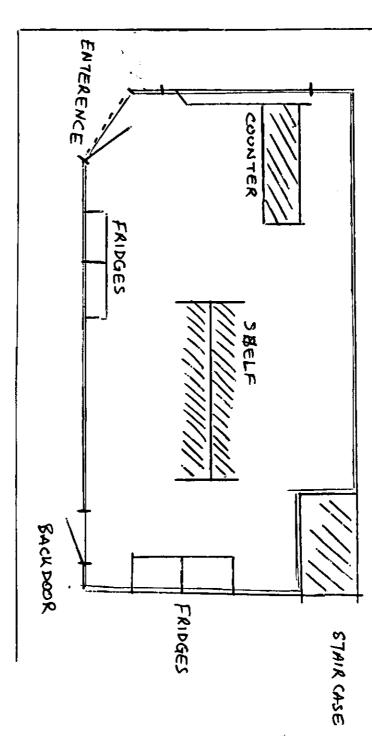
Telephone number (if any)

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

#### **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 offsupplies 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, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. 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 seminudity, films for restricted age groups, 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, both applicants or their respective agents must sign the application form.
- 13. This is the address which we shall use to correspond with you about this application.

ST PAULS



LYNTON ROAD

Mr Qaiser Ijaz Lincoln Road Peterborough PE1 2PB

The Licensing Team
Peterborough City Council

Ref: 62198

Date: 15.11. 2011

Dear Licensing Team

### REF: Premises Licence Application for 97 Lincoln Road, Peterborough

With reference to the above application and the subsequent representation made by Trading Standards I agree that the following additional conditions are placed upon the premises licence:

- No alcoholic drinks will be purchased by the store owners or staff from sellers calling at the store
- All invoices (originals or copies) for all alcoholic goods for retail sale on the premises will be kept at the shop and made available to Police, Council and HMRC Officers upon request
- A strict stock control system will be introduced so that the licensee can quickly identify where and when alcoholic drinks have been purchased
- An ultra-violet light will be available at the premises for the purpose of checking the UK Duty Stamp on all spirits as soon as practical after they have been purchased
- If any spirits bought by the company have UK Duty Stamps that do no fluoresce under ultra-violet light, or are otherwise suspicious, the licensee shall identify the supplier to Trading Standards department and HMRC as soon as possible

Yours Faithfully

Mr Qaiser Ijaz