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PETERBOROUGH CITY COUNCIL  
 15 NOV 2011  
 ENVIRONMENTAL HEALTH



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.

I/We PARADISE PETERBOROUGH 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 83 EASTFIELD ROAD PETERBOROUGH PE1 4AS	
Post town PETERBOROUGH	Post code PE1 4AS

Telephone number at premises (if any)

01733 89 3221

Non-domestic rateable value of premises

£ 4,600

**Part 2 - Applicant details**

Please state whether you are applying for a premises licence as  
 Please 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) 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  Mrs  Miss  Ms  Other title   
(for example, Rev)

**Surname**

**First names**

I am 18 years old or over

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  Mrs  Miss  Ms  Other title   
(for example, Rev)

Surname

First names

Please tick  yes

I am 18 years old or over

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	PARADISE PETERBOROUGH Limited
Address	83 EASTFIELD ROAD PETERBOROUGH PE1 4AS
Registered number (where applicable)	7462448
Description of applicant (for example partnership, company, unincorporated association etc)	company
Telephone number (if any)	-
E-mail address (optional)	

**Part 3 Operating Schedule**

When do you want the premises licence to start?

Day	Month	Year
1	4	11 2011

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)

The premises will be a coffee shop which will sell alcoholic and non-alcoholic drinks (beverages). The coffee shop will also have sandwiches, snacks and cakes. The premises will be selling alcohol for consumption inside and off the premises.

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)

Please tick ✓ yes

**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)

**Supply of alcohol** (if ticking yes, fill in box M)



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

**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 [Y] (please read guidance note 2)</b>	Indoors	
Day	Start	Finish		Outdoors	
Mon			<b>Please give further details here</b> (please read guidance note 3)	Both	
Tue			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Wed			<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)		
Thur					
Fri					
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 [Y] (please read guidance note 2)	Indoors		
				Outdoors		
Day	Start	Finish		Both		
Mon			<b>Please give further details here</b> (please read guidance note 3)			
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			
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 <input type="checkbox"/> (please read guidance note 2)</b>	Indoors	
				Outdoors	
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 3)		
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

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 [Y] (please read guidance note 2)	Indoors	
				Outdoors	
Day	Start	Finish	Both		
Mon			<b>Please give further details here</b> (please read guidance note 3)		
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 [Y]</b> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	07	23	<b>Please give further details here</b> (please read guidance note 3)	Both	<input type="checkbox"/>
	00	00			
Tue	07	23			
	00	00			
Wed	07	23		<b>State any seasonal variations for playing recorded music</b> (please read guidance note 4)	
	00	00			
Thur	07	23			
	00	00			
Fri	07	23			<b>Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 5)
	00	00			
Sat	07	23			
	00	00			
Sun	07	23			
	00	00			

# 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 [Y] (please read guidance note 2)	Indoors		
				Outdoors		
Day	Start	Finish		Both		
Mon			<b>Please give further details here</b> (please read guidance note 3)			
Tue						
Wed				<b>State any seasonal variations for the performance of dance</b> (please read guidance note 4)		
Thur						
Fri			<b>Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list</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)			<b><u>Please give a description of the type of entertainment you will be providing</u></b>	
Day	Start	Finish	<b>Will this entertainment take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</b>	Indoors
Mon				Outdoors
				Both
Tue			<b><u>Please give further details here</u> (please read guidance note 3)</b>	
Wed				
Thur			<b><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)</b>	
Fri				
Sat			<b><u>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</u> (please read guidance note 5)</b>	
Sun				

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			Please give a description of the facilities for making music you will be providing								
			Will the facilities for making music be indoors or outdoors or both – please tick [Y] (please read guidance note 2)		Indoors						
			Outdoors								
			Both								
Day	Start	Finish	Please give further details here (please read guidance note 3)								
Mon											
Tue											
Wed						State any seasonal variations for the provision of facilities for making music (please read guidance note 4)					
Thur											
Fri									Non standard timings. Where you intend to use the premises for 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

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

# K

<b>Provision of facilities for entertainment of a similar description to that falling within I or J</b> Standard days and timings (please read guidance note 6)			<b>Please give a description of the type of entertainment facility you will be providing</b>		
Day	Start	Finish	<b>Will the entertainment facility be indoors or outdoors or both – please tick [Y] (please read guidance note 2)</b>	Indoor	
Mon				Outdoor	
				Both	
Tue			<b>Please give further details here (please read guidance note 3)</b>		
Wed			<b>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)</b>		
Thur			<b>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)</b>		
Fri					
Sat					
Sun					

L

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 [Y] (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>		
Day	Start	Finish		Outdoors	<input type="checkbox"/>		
Mon	07	01	Please give further details here (please read guidance note 3)	Both	<input type="checkbox"/>		
	00	00					
Tue	07	01					
	00	00					
Wed	07	01		State any seasonal variations for the provision of late night refreshment (please read guidance note 4)	Both	<input type="checkbox"/>	
	00	00					
Thur	07	01					
	00	00					
Fri	07	01			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 (please read guidance note 5)	Both	<input type="checkbox"/>
	00	00					
Sat	07	01					
	00	00					
Sun	07	01					
	00	00					



**M**

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption (Please tick box Y) (please read guidance note 7)	On the premises		
Day	Start	Finish		Off the premises		
				Both	<input checked="" type="checkbox"/>	
Mon	07	01	State any seasonal variations for the supply of alcohol (please read guidance note 4)			
	00	00				
Tue	07	01				
	00	00				
Wed	07	01				
	00	00				
Thur	07	01		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)		
	00	00				
Fri	07	01				
	00	00				
Sat	07	01				
	00	00				
Sun	07	01				
	00	00				

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

Name FARLEY ROMERO DA FONSECA SEIXAS DE PASSOS

Address 59 DUNSBERY,  
BRETON

PETERBOROUGH

Postcode PE3 8LB

Personal Licence number(if known) 048326

Issuing licensing authority (if known) PETERBOROUGH CITY COUNCIL

**N**

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)

There will be no adult entertainment or services, that may give a rise to concern in respect of children safety.

O

Hours premises are open to the public Standard timings (please read guidance note 6)			State any seasonal variation (please read guidance note 4)
Day	Start	Finish	
Mon	06:00	01:00	There will be no seasonal variation.
Tue	06:00	01:00	
Wed			
	06:00	01:00	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 the left, please list (please read guidance note 5)  NOT APPLICABLE
Thur	06:00	01:00	
	06:00	01:00	
Fri	06:00	01:00	
	06:00	01:00	
Sat	06:00	01:00	
	06:00	01:00	
Sun	06:00	01:00	
	06:00	01:00	

**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)

The coffee shop will run responsibly to, prevent crime and disorder, public safety, to prevent public nuisance and to protect children from harm, by following all rules of the "Licensing Act 2003"

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

- video CCTV equipment will be installed inside the premises and maintained in working order.
- notices will be displayed advising that CCTV has been installed on the premises.
- Any person selling or supplying alcoholic drink under the authority of a personal license holder must ask for photo ID or proof of age.

**c) Public safety**

A fire risk assessment will be completed under the regulatory reform (Fire safety) order 2005 and it will be available for an authorised inspection officer.

**d) The prevention of public nuisance**

Litter shall be prevented at all times and where identified regularly cleared from vicinity of the premises. Receptacles for refuse storage shall be maintained in a clean condition.

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

The "Challenge 25" initiative to prevent sales of alcohol to persons under 18 years of age will be implemented at the premises. The premises will be containing signage.



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 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, 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 semi-nudity, 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.

L8

Part A

Consent of Individual to being specified as premises supervisor

I FARLEY DE PASSOS [full name of prospective premises supervisor]

of 59 DUNSBERRY ROAD [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 New Premises Application [type of application]

by Paradise P'Boro Ltd [name of applicant]

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

for 83 Eastfield Road, PE1 4AS [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

Paradise P'Boro Ltd [name of applicant]

concerning the supply of alcohol at 83 Eastfield Road, PE1 4AS

[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 048326 [insert personal licence number, if any]

Personal licence issuing authority PCC

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

FARLEY signed

FARLEY DE PASSOS name (please print)

15-11-2011 dated

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