

# Peterborough Application for a premises licence Licensing Act 2003

For help contact

eh.licensing@peterborough.gov.uk

Telephone: 01733 747474

\* required information

Section 1 of 19		
You can save the form at any t	ime and resume it later. You do not need to b	e 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	lain Gordon-Smith - Alcohol	You can put what you want here to help you track applications if you make lots of them. It
Are you an agent acting on be	half of the applicant?	is passed to the authority.  Put "no" if you are applying on your own behalf or on behalf of a business you own or
○ Yes	No	work for.
Applicant Details		
* First name	lain	
* Family name	Gordon-Smith	
* E-mail		
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if you wou	lld prefer not to be contacted by telephone	
Are you:		
<ul><li>Applying as a business of</li></ul>	or organisation, including as a sole trader	A sole trader is a business owned by one person without any special legal structure.
<ul> <li>Applying as an individual</li> </ul>	al	Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.
<b>Applicant Business</b>		
* Is your business registered in the UK with Companies House?	○ Yes	
* Is your business registered outside the UK?	○ Yes	
* Business name		If your business is registered, use its registered name.
* VAT number		Put "none" if you are not registered for VAT.
* Legal status	Sole Trader	

Continued from previous page		
* Your position in the business	Owner	
Home country	United Kingdom	The country where the headquarters of your business is located.
<b>Business Address</b>		If you have one, this should be your official
* Building number or name	17 Howes Place	address - that is an address required of you by law for receiving communications.
* Street	Howes Place	
District		
* City or town	Cambridge	
County or administrative area		
* Postcode	CB30LD	
* Country	United Kingdom	
Section 2 of 19		
PREMISES DETAILS		
	ply for a premises licence under section 17 of the premises) and I/we are making this application the Licensing Act 2003.	
Premises Address		
Are you able to provide a posta	al address, OS map reference or description of t	the premises?
<ul><li>Address</li><li>OS major</li></ul>	p reference	
Postal Address Of Premises		
Building number or name	Unit 14	
Street	Alfric Square	
District		
City or town	Peterborough	
County or administrative area	Cambridgeshire	
Postcode	PE2 7JP	
Country	United Kingdom	
Further Details		
Telephone number	[	
Non-domestic rateable value of premises (£)	3,500	

Secti	on 3 of 19			
APPL	ICATION DETAILS			
In wh	nat capacity are you applyi	ng for the premises licence?		
$\boxtimes$	An individual or individuals			
	A limited company			
	A partnership			
	An unincorporated assoc	iation		
	A recognised club			
	A charity			
	The proprietor of an educ	cational establishment		
	A health service body			
		ed under part 2 of the Care Standards Act n 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)			
Conf	firm The Following			
$\boxtimes$	I am carrying on or propo the use of the premises for	osing to carry on a business which involves or licensable activities		
	☐ I am making the application pursuant to a statutory function			
	I am making the application virtue of Her Majesty's pro	ion pursuant to a function discharged by erogative		
Secti	on 4 of 19			
INDI	VIDUAL APPLICANT DET	AILS		
	<b>licant Name</b> e name the same as (or sim	nilar to) the details given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as required.	
•	Yes	○ No	Select "No" to enter a completely new set of details.	
First	name	lain		
Fami	ily name	Gordon-Smith		
Is the	e applicant 18 years of age	or older?		
<b>(</b> )	Yes	○ No		

Continued from previous page		
<b>Applicant Postal Address</b>		
Is the address the same as (or s	similar to) the address given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as
Yes	○ No	required. Select "No" to enter a completely new set of details.
Building number or name	17 Howes Place	
Street	Howes Place	
District		
City or town	Cambridge	
County or administrative area		
Postcode	CB30LD	
Country	United Kingdom	
Applicant Contact Details		
Are the contact details the sam	ne as (or similar to) those given in section one?	*
<ul><li>Yes</li></ul>	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
E-mail		
Telephone number		
Other telephone number		
	Add another applicant	
Section 5 of 19		
OPERATING SCHEDULE		
When do you want the premises licence to start?	25 / 06 / 2013 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	of the premises	
licensing objectives. Where yo	ises, its general situation and layout and any oth our application includes off-supplies of alcohol a plies you must include a description of where th	nd you intend to provide a place for
·	Park will be used as a storage unit and distribut y telephone or via the internet.	ion point for the delivery of alcohol directly to
There will be no public access	to the unit.	

Continued from previous page	
If 5,000 or more people are	
expected to attend the premises at any one time,	
state the number expected to	
attend	
Section 6 of 19	
PROVISION OF PLAYS	
Will you be providing plays?	
○ Yes	○ No
Section 7 of 19	
PROVISION OF FILMS	
Will you be providing films?	
○ Yes	○ No
Section 8 of 19	
PROVISION OF INDOOR SPO	RTING EVENTS
Will you be providing indoor s	porting events?
○ Yes	○ No
Section 9 of 19	
PROVISION OF BOXING OR W	RESTLING ENTERTAINMENTS
Will you be providing boxing	or wrestling entertainments?
○ Yes	○ No
Section 10 of 19	
PROVISION OF LIVE MUSIC	
Will you be providing live mus	sic?
○ Yes	○ No
Section 11 of 19	
PROVISION OF RECORDED M	USIC
Will you be providing recorde	d music?
○ Yes	○ No
Section 12 of 19	
PROVISION OF PERFORMAN	CES OF DANCE
Will you be providing perform	ances of dance?
○ Yes	○ No
Section 13 of 19	
PROVISION OF ANYTHING O	F A SIMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF
Will you be providing anything performances of dance?	g similar to live music, recorded music or
○ Yes	○ No

Continued from previous p	page			
Section 14 of 19				
LATE NIGHT REFRESH	MENT			
Will you be providing la	te night refreshmen	t?		
○ Yes	○ No			
Section 15 of 19				
SUPPLY OF ALCOHOL				
Will you be selling or su	pplying alcohol?			
<ul><li>Yes</li></ul>	○ No			
Standard Days And Ti	mings			
MONDAY	Start 11:00	End	06:00	ive timings in 24 hour clock. e.g., 16:00) and only give details for the days
	Start	End		f the week when you intend the premises be used for the activity.
TUESDAY				ŕ
	Start 11:00	End End	06:00	
WEDNESDAY				
	Start 11:00	End	06:00	
	Start	End		
THURSDAY				
	Start 11:00	End	06:00	
	Start	End		
FRIDAY				
	Start 11:00	End	06:00	
	Start	End		
SATURDAY				
	Start 11:00	End	06:00	
	Start	End		
SUNDAY				
	Start 11:00	End	06:00	
	Start	End		

Continued from previous page		
Will the sale of alcohol be for c	onsumption:	If the sale of alcohol is for consumption on the premises select on, if the sale of alcohol
On the premises	● Off the premises ○ Both	•
State any seasonal variations		
For example (but not exclusive	ly) where the activity will occur on	additional days during the summer months.
Non-standard timings. Where to column on the left, list below	he premises will be used for the su	apply of alcohol at different times from those listed in the
For example (but not exclusive	ly), where you wish the activity to	go on longer on a particular day e.g. Christmas Eve.
State the name and details of t licence as premises supervisor	he individual whom you wish to sp	pecify on the
Name		
First name	lain	
Family name	Gordon-Smith	
Enter the contact's address		
Building number or name	17 Howes Place	
Street	Howes Place	
District		
City or town	Cambridge	
County or administrative area		
Postcode	CB3 0LD	
Country	United Kingdom	
Personal Licence number (if known)	PA1196	
Issuing licensing authority (if known)	South Cambridgeshire District Co	uncil

Continued from previous			
	ED PREMISES SUPERVISO		
How will the consent for be supplied to the auth	orm of the proposed design pority?	nated premises supervisor	
<ul><li>Electronically, by</li></ul>	the proposed designated p	oremises supervisor	
<ul><li>As an attachment</li></ul>	to this application		
Reference number for of form (if known)	consent		If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.
Section 16 of 19			
ADULT ENTERTAINME	NT		
	ertainment or services, act erise to concern in respect		ent or matters ancillary to the use of the
rise to concern in respe		f whether you intend child	ary to the use of the premises which may give ren to have access to the premises, for example c gambling machines etc.
Section 17 of 19			
HOURS PREMISES ARE	OPEN TO THE PUBLIC		
Standard Days And Ti	mings		
MONDAY			Give timings in 24 hour clock.
	Start	End	(e.g., 16:00) and only give details for the days
	Start	End	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			
monoph	Start	End	
	Start	End	
FRIDAY			
TNIDAT	Start	End	
		End	
	Start	EHU	I

Continued from previous page
SATURDAY
Start End
Start End
SUNDAY
Start End
Start End
State any seasonal variations
, and the second se
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.
Section 18 of 19
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.
The DPS has carried out full risk assessment with due consideration of the four licensing objectives.
The premises will not be accessible to members of the public, but only staff who will collect and deliver stock to satisfy
customer orders by telephone or internet.
b) The prevention of crime and disorder
The DPS has identified potential issues relating to potential crime and disorder:
Thieves breaking into the premises to access the alcohol for re-sale (high volume spirits especially can be sold on with
relative ease) could pose a potential security threat. CCTV Cameras will be installed both inside and outside of the premises. The premises will also be fitted with a burglar alarm. The DPS welcomes any further consultation offered by a police crime
prevention officer that may further enhance the security of the premises.
It is worth noting that the premises is likely to be occupied by admin staff during the daytime hours as well as delivery and telephone staff in the evenings which should help reduce the threat of theft from the premises.

Another threat of crime arises from the safety of staff when out on deliveries. The point of maximum risk would be when staff are exiting the vehicles and carrying out any cash transactions. To combat this issue the DPS intends to implement a

number of measures through staff training and and safety practices:

### Continued from previous page...

- -Drivers must not exit the vehicle if they feel any threat to their personal safety.
- -Call backs will be made before deliveries arrive to re-confirm order details and also to confirm address of the recipient.
- -Based on information gained from all checks and procedures drivers and telephone staff must be confident that deliveries will only be made to a bona-fide residential or business addresses before an order is delivered.

Fake or alternative addresses may be provided in the event of pre-meditated thefts or other undesirable circumstances. The driver must ensure they can see the customer exiting the delivery house or where this is not possible, proof of address (in the form of a bank statement, utility bill, passport or driving license) must be provided before the transaction takes place.

All deliveries will be signed for by the recipient at the address.

All cash taken on deliveries will be deposited into a safe securely installed in the delivery vehicles, the contents of which will never exceed 250GBP before being deposited into another secure safe on the premises.

## c) Public safety

Members of the public shall not have access to the premises.

## d) The prevention of public nuisance

Any customers deemed to be too heavily intoxicated either by their telephone manner or by their visible inebriation upon delivery will refused alcohol.

The service operates as an essentially retailed-based service. As a form of retailing the alcohol pricing will adhere to the 50p per unit Alcohol (Minimum Pricing) (Scotland) Act 2012. As has been proven this the policy targets young, harmful and hazardous drinkers who tend to chose the cheapest drinks and comprise a disproportionate share of the alcohol-related costs to public services.

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

All orders shall be accepted and delivered with consideration of a challenge 25 age verification policy.

Only a PASS hologram card, passport or photographic driving license shall be accepted as suitable ID upon delivery.

A 'No ID, No Sale' policy shall be implemented at all times.

All staff shall be trained in the above company policy and records of maintained to demonstrate said training.

All refusals of sales shall be logged, recorded.

## Section 19 of 19

#### **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

Continued from previous page				
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 premises then your are required			narily used for the consumption of a	Icohol on the
Band D - £87001 to £12500	£900.00			
Band E - £125001 and over	£1,905.00			
chapel halls or premises of a sir costs associated with these lice the premises for the supply of a	milar nature, villag nces will be met b alcohol or the prov	ge halls, parish or commo by central Government. I vision of late night refres	ion of regulated entertainment at chunity halls, or other premises of a sir of the licence also authorises shment, a fee will be required.	milar nature. The ses the use of
	•		I for the purposes of the school or co	
If you operate a large event you	u are subject to A[	ODITIONAL fees based u	pon the number in attendance at ar	ny 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 (£)	100.00			
ATTACHMENTS				
AUTHORITY POSTAL ADDRES	S			
Address				
Building number or name				
Street				
District				
City or town				
County or administrative area				
Postcode				
Country	United Kingdom			
DECLARATION				

Continued from previous page	
	rce, liable on conviction to a fine up to level 5 on the standard scale, under section 158 of the false statement in or in connection with this application.
$\square$ Ticking this box indicat	es you have read and understood the above declaration
This section should be comple behalf of the applicant?"	ted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
* Full name	
* Capacity	
Date (dd/mm/yyyy)	
	Add another signatory
2. Go back to <a href="https://www.gov">https://www.gov</a> continue with your application	uter by clicking to file/save as . <u>uk/apply-for-a-licence/premises-licence/peterborough/apply-1</u> to upload this file and