



056802

Environmental Services

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

PETERBOROUGH CITY COUNCIL
15 JUL 2009
ENVIRONMENTAL HEALTH

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 ALAIS ALZADA (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	
3 WINSLOW ROAD NETHERTON PETERBOROUGH CAMBS	
Post town £	Post code PE3 9RE

Telephone number at premises (if any)

[Empty box]

Non-domestic rateable value of premises

£ 6,600

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:

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or Please tick yes
- 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)

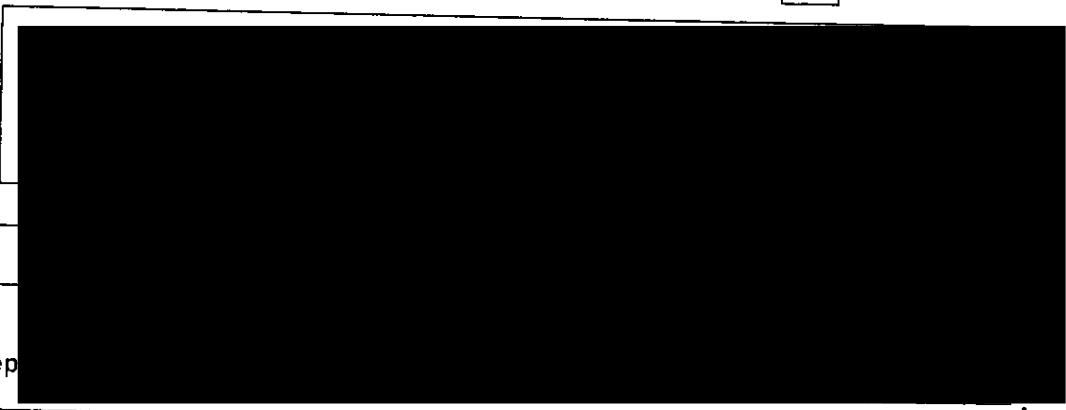
Mr Mrs Miss Ms Other title
(for example, Rev)

Surname

First names

I am 18 years old or over Please tick yes

Current postal address if different from premises address



Post Town

Daytime contact telephone

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
Address
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?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

If you wish the licence to be valid only for a limited period, when do you want it to end?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

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)

NETHERTON FOOD AND WINE The SHOP IS
CONVENIENCE STORE,

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

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue			State any seasonal variations for performing plays (please read guidance note 4)		
Wed			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 (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	
Day	Start	Finish		Outdoors	
				Both	
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur					
Fri			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 (please read guidance note 5)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon			State any seasonal variations for indoor sporting events (please read guidance note 4)
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick <input type="checkbox"/> (please read guidance note 2)	
			Indoors	
Day	Start	Finish	Outdoors	
Mon			Both	
Tue				
Wed			Please give further details here (please read guidance note 3)	
Thur			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)	
Fri			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 (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)			
Day	Start	Finish	Indoors			
			Outdoors			
			Both			
Mon			Please give further details here (please read guidance note 3)			
Tue						
Wed					State any seasonal variations for the performance of live music (please read guidance note 4)	
Thur						
			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 (please read guidance note 5)			
Fri						
Sat						
Sun						

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)	
Day	Start	Finish	Indoors	
Mon			Outdoors	
Tue			Both	
Wed			Please give further details here (please read guidance note 3)	
Thur				
			State any seasonal variations for playing recorded music (please read guidance note 4)	
Fri				
Sat				
Sun			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 (please read guidance note 5)	

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</u>			
			Indoors			
Day	Start	Finish	Outdoors			
Mon			<u>Please give further details here (please read guidance note 3)</u>			
Tue						
Wed					<u>State any seasonal variations for the performance of dance (please read guidance note 4)</u>	
Thur						
Fri			<u>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 (please read guidance note 5)</u>			
Sat						
Sun						

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			<u>Please give a description of the type of entertainment you will be providing</u>		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)	Indoors	
Mon				Outdoors	
				Both	
Tue			<u>Please give further details here</u> (please read guidance note 3)		
Wed					
Thur			<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)		
Fri					
Sat			<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)		
Sun					

Provision of facilities for making music 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

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick [Y] (see guidance note 2)		Indoors	
					Outdoors	
Day	Start	Finish				
Mon			Please give a description of the facilities for dancing you will be providing			
Tue			Please give further details here (please read guidance note 3)			
Wed			State any seasonal variations for providing dancing facilities (please read guidance note 4)			
Thur						
Fri			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)			
Sat						
Sun						

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 guidance note 2)	Indoor				
Mon					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								

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	
					Outdoors	
Day	Start	Finish	Both			
Mon			Please give further details here (please read guidance note 3)			
Tue						
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)			
Thur						
Fri			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)			
Sat						
Sun						

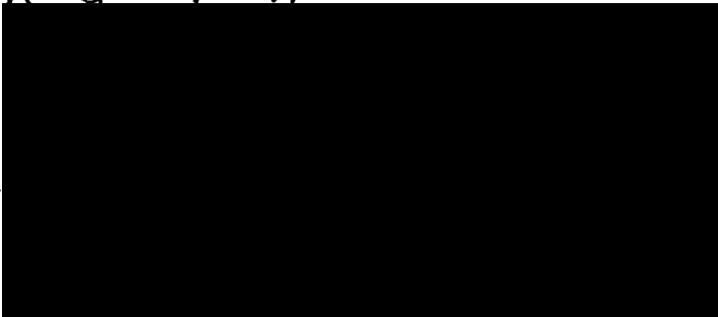
M

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	<input checked="" type="checkbox"/>			
Mon	7am		State any seasonal variations for the supply of alcohol (please read guidance note 4)	<input type="checkbox"/> Both				
		2am						
Tue	7am							
		2am						
Wed	7am							
		2am						
Thur	7am					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)	<input type="checkbox"/> Both	
		2am						
Fri	7am							
		2am						
Sat	7am							
		2am						
Sun	7am							
		2am						

NONE

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

Name..... ROQUIA ALIZADA

Address..... 

Postcode.....

Personal

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)

NONE STRICTLY POLICY NOT SAYING
LIQUOR TO ANYONE BELAVE TO BE
UNDER AGE WITHOUT ID

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	7am		<p>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)</p>
		2am	
Tue	7am		
		2am	
Wed	7am		
		2am	
Thur	7am		
		2am	
Fri	7am		
		2am	
Sat	7am		
		2am	
Sun	7am		
		2am	

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)

A WELL RUN ^{AND} ~~EXACTLY~~ SUPERVISED STORE

b) The prevention of crime and disorder

SEE ATTACHED

c) Public safety

SEE ATTACHED

d) The prevention of public nuisance

SEE ATTACHED

e) The protection of children from harm

SEE ATTACHED

b) The prevention of crime and disorder

Any person selling or supplying alcoholic drink under the authority of a personal licence holder must ask for a photo ID proof of age where they have reason to suspect that the individual may be under 21 years of age.

Video/CCTV equipment shall be installed inside the premises and maintained in working order.

Video/CCTV equipment will be set to record from the time that the premises open to the public until the premises close and all members of the public have left.

Digital images shall be retained for at least one month and shall be produced to an authorised officer on demand.

Notices advising that CCTV has been installed on the premises shall be posted up so that they are clearly visible to the public within the licensed premises.

No alcohol shall be consumed on the premises.

c) Public safety

A fire risk assessment conforming to the Regulatory Reform (Fire Safety) Order 2005 (as amended) will be completed and be available for inspection by an authorized officer.

d) The prevention of public nuisance

Receptacles for refuse storage shall be maintained in a clean condition.

Litter shall be prevented at all times and where identified regularly cleared from the vicinity of the premises.

e) The protection of children from harm

The 'Challenge 21' initiative to prevent sales of alcohol to persons under 18 years of age will be implemented at the premises.

Signage will be prominently placed within the premises advertising the fact that the premises operates the 'Challenge 21' initiative.



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CHECKLIST:-

Please tick ✓ yes

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 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

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

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent. (See guidance note 11) **If signing on behalf of the applicant please state in what capacity.**

Signature



Date

14-07-2009

Capacity

For joint applications signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent. (please read guidance note 12) **If signing on behalf of the applicant please state in what capacity.**

Signature

Date

Capacity

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

Post town

Post code

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.

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