

Our Ref: CP/WHIT/18045/8 Contact: Charlotte Pinson

Torbay Council
Safety & Licensing, Environmental Health & Consumer Protection
Roebuck House
Abbey Road
Torquay
Devon
TQ2 5EJ

25 May 2011

Dear Sirs

PREMISES – COYOTE BAR (FORMERLY HOGSHEAD), 3-5 UNION STREET, TORQUAY, DEVON, TQ1 1ES TRANSFER OF PREMISES LICENCE BY POST AND BY FAX 01803 292866

We act for Whitbread Group Plc.

On our client's behalf, we enclose by way of service on you:

 Application for the transfer of the premises licence to Whitbread Group Plc, together with a cheque for £23.00.

The premises licence cannot be traced. We should be grateful if you would issue a duplicate Licence. Attached is our cheque in your favour in the sum of £10.50 being the fee payable.

The whereabouts of the outgoing premises licence holder are not known; therefore consent to transfer cannot be provided.

Please note that this application is to take immediate effect and a copy of this application has been served on the relevant Police.

Thank you for your assistance. We look forward to hearing from you.

Yours faithfully

John Gaunt & Partners

Email: CPinson@john-gaunt.co.uk

Encs.

Tei. 0114 266 8664

Helpline: 0114 266 3400 Fax: 0114 267 9613

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John Gaunt & Partners regulated by the Solicitors Regulation Authority SSA No. 173393

## Application to transfer 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.

We Whitbread Group Pic, apply to transfer the premises licence described below under section 42 of the Licensing Act 2003 for the premises described in Part 1 below.

Premises Li	cence Number	590			
Part 1 – Pre	emises details				
Postal addr	ess of premises or, if none, ordnance survey	map refer	ence or desc	ription	
Coyote Bar	(formerly Hogshead), 3-5 Union Street,				
		Post			
Post town Torquay		TQ1 1			
	current premises licence holder				
Layote for	Day Enriced		<u>.                                    </u>	<u>.                                    </u>	
Part 2 - Ap	plicant Details				
Please state	whether you are applying for a premises lice	ence as	Please tick *	,	
a) An individ	dual or individuals*			please complete	section (A)
b) a person	other than an individual*				
.  i.  ii.  v.	as a limited company as a partnership as an unincorporated association or other (for example a statutory corporation)	1		please complete please complete please complete please complete	section (B) section (B)

c) a recognised club		please complete section (B)		
d) a charity		please complete section (B)		
•	г	please complete section (B)		
e) the proprietor of an educational establishment		•		
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	m:	Please tick √ γes		
<ul> <li>I am carrying on or proposing to carry on a business</li> </ul>				
involves the use of the premises for licensable activi	ities; or	oxtimes		
<ul> <li>I am making the application pursuant to a</li> </ul>				
<ul> <li>Statutory function or</li> </ul>				
<ul> <li>A function discharged by virtue of Her Maje</li> </ul>	esty's pre	erogative 🔲		
(A) INDIVIDUAL APPLICANTS (fill in as applicable)				
Mr Mrs Miss Ms		Other title (For example, Rev)		
Surname	First n	am <u>es</u>		
Surriume				
		Please tick		
I am 18 years old or over				
Current postal address if different from premises address				
Current postal address if different from premises address  Post Town	Postcode			
from premises address	Postcode			

Seco	nd Individı	ual Applic	ant (if ap	plicable)						
Мг		Mrs		Miss		M	1s		Other title (For example, Rev)	
urna	ime							<u>First</u> nar	nes	
		·								
			·····	-						Please ti
am	18 years old	d or over								
Curre rom	ent postal ac premises ac	ddress if di ddress	fferent			<u></u>				
ost '	Town	;				]		Postcode		
Davti	me contact	telephone	number							
-	l address (o									
Nan Whi	ne itbread Grou	up plc	concerned						orate), please give the	
000	jistered nun )29423									
Des Priv	scription of vate Limited	applicant ( I Company	for examp	le, partners	hip, co	mpany,	unin	corporated	association etc.)	
Tel	ephone nun	nber (if an	y)		•					
E-n	nail address	(optional)		<u> </u>				·		<del></del>
l										

Part 3	Please
Are you the holder of the premises licence under an interim authority notice?	
Do you wish the transfer to have immediate effect?	
If not, when would you like the transfer to take effect?	Day Month Year
	Please
I have enclosed the consent form signed by the existing premises licence holder	г
If you have not enclosed the consent form referred to above please give reason What steps have you taken to try and obtain the consent?	ons why not.
The whereabouts of the outgoing premises licensee is not known and therefore	e this consent is not av
	Please
To this and lighting in growted I would be in a position to use the premises during	
If this application is granted I would be in a position to use the premises during application period for the licensable activity or activities authorised by the licen (see section 43 of the Licensing Act 2003)	; the
If this application is granted I would be in a position to use the premises during application period for the licensable activity or activities authorised by the licen (see section 43 of the Licensing Act 2003)	; the
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ı	I have made or enclosed payment of the fee	$\boxtimes$
•	I have enclosed the consent form signed by the existing premises licence holder or my statement as to why it is not enclosed	_
,	I have enclosed the premises licence or relevant part of it or explanation	$\boxtimes$
	I have sent a copy of this application to the chief officer of police today	×
•	I understand that if I do not comply with the above requirements my application will be rejected	K
10	IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCAI IDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN INNECTION WITH THIS APPLICATION	LE,
Pa	rt 4 - Signatures (please read guidance note 2)	
no	gnature of applicant or applicant's solicitor or other duly authorised agent. (Please read guidar te 3).  If signing on behalf of the applicant please state in what capacity.	
Si	gnature: John Gaunt & Partners	
Ca	pacity: Solicitors	•••••
aç ca	or joint applications signature of $2^{nd}$ applicant or $2^{nd}$ applicant's solicitor or other authorised pent. (Please read guidance note 4). If signing on behalf of the applicant please state in what applicant please state in what pacity.	
Si	gnature: John Gaunt & Partners	
Da	ate:	
Ca	apacity: Solicitors	

Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 5)

Post code

S11 8FT

John Gaunt & Partners Omega Court 372 Cemetery Road

Post town Sheffield

Telephone number (if any)

0114 266 8664

If you would prefer us to correspond with you by email your email address (optional)

## Notes for Guidance

- 1. Describe the premises. For example the type of premises it is, its general situation and layout and any other information which would be relevant to the licensing objectives.
- 2. The application form must be signed.
- 3. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- 4. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
- 5. This is the address which we shall use to correspond with you about this application.