



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 DEAN HANNABY AND ROBERT BUTLER (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 MIGUEL'S BEACH APPROACH			
Post town	BRIXHAM	Postcode	TQ5 8JL

Telephone number at premises (if any)	
Non-domestic rateable value of premises	11111111

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as Please tick as appropriate

- 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 in Wales please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England 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 <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev) <input type="checkbox"/>
Surname HANNABY		First names DEAN		
Date of Birth 02/02/2000		I am 18 years old or over <input checked="" type="checkbox"/> Please tick yes		
Nationality BRITISH				
Current residential address if different from premises address		02/02/2000		
Post town	02/02/2000	Postcode	02/02/2000	
Daytime contact telephone number		02/02/2000		
E-mail address (optional)	02/02/2000			

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev) <input type="checkbox"/>
Surname BUTLER		First names ROBERT		
Date of Birth 11/02/1990		I am 18 years old or over <input checked="" type="checkbox"/> Please tick yes		
Nationality BRITISH				
Current residential address if different from premises address		11027222222		
Post town	11027222222	Postcode	11027222222	
Daytime contact telephone number		01234567890		
E-mail address (optional)	11027222222@11027222222.COM			

(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 11027222222
Address 11027222222
Registered number (where applicable) 11027222222
Description of applicant (for example, partnership, company, unincorporated association etc.) 11027222222
Telephone number (if any) 11027222222
E-mail address (optional) 11027222222

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
3	1	1 0 2 0 1 9

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

DD	MM	YYYY

Please give a general description of the premises (please read guidance note 1)
 A SMALL GROUND FLOOR CAFE STYLE PREMISES TO OFFER TRADITIONAL TAPAS ALONGSIDE COFFEE, TEA AND THE SUPLPY OF ALCOHOL FOR CONSUMPTION ON THE PREMISES.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick any that apply

- 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 late night refreshment (if ticking yes, fill in box I)

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

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 7)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	<input type="text"/>	<input type="text"/>	Please give further details here (please read guidance note 4) <input type="text"/>		
	<input type="text"/>	<input type="text"/>			
Tue	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text"/>	<input type="text"/>	State any seasonal variations for performing plays (please read guidance note 5) <input type="text"/>		
	<input type="text"/>	<input type="text"/>			
Thur	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Fri	<input type="text"/>	<input type="text"/>	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 6) <input type="text"/>		
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Mon	0900	2300			
Tue	0900	2300			
Wed	0900	2300			
Thur	0900	2300			
Fri	0900	2400			
Sat	0900	2400			
Sun	1000	2300			
			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 6)		

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

Name DEAN HANNABY	
Date of Birth 09/05/1988	
Address 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000	
Postcode	CV3 9 2AA
Personal licence number (if known) 1234567890	
Issuing licensing authority (if known) WARWICK DISTRICT COUNCIL	

K

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 9).

NO CONCERNS FOR THE WELFARE OF CHILDREN WITH RESPECT TO THE ACTIVITIES ON SITE. NO ADULT ENTERTAINMENT OR SERVICES OR OTHER INAPPROPRIATE ENTERTAINMENT WILL BE PERMITTED ON THE PREMISES.

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			<u>State any seasonal variations</u> (please read guidance note 5)
Day	Start	Finish	
Mon	0900	2300	<p><u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 6)</p>
Tue	0900	2300	
Wed	0900	2300	
Thur	0900	2300	
Fri	0900	2400	
Sat	0900	2400	
Sun	1000	2300	

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

a) General – all four licensing objectives (b, c, d and e) (please read guidance note 10)

STAFF SELLING OR SERVING ALCOHOL WILL BE MADE AWARE OF THEIR ROLE IN PROMOTING THESE OBJECTIVES THROUGH ON-GOING TRAINING AND SUPERVISION.

b) The prevention of crime and disorder

THE PREMISES WILL OPERATE A ZERO TOLERANCE POLICY WITH REGARDS TO THE USE OF ILLEGAL DRUGS AS WELL AS "LEGAL" HIGH.

CUSTOMERS USING THE OUTSIDE SPACE TO SMOKE WILL NOT BE ALLOWED TO TAKE GLASSWARE OUTSIDE AND WILL BE MONITORED FOR ANTI SOCIAL BEHAVIOURS AT ALL TIMES.

THE PREMISES WILL OPERATE CHALLENGE 25 AND ALL STAFF WILL BE TRAINED APPROPRIATELY AND ASK FOR ID IF NECESSARY USING ONLY PASSPORTS, DRIVING LICENCES, MILITARY ID S & PASS CARDS AS ACCEPTABLE

ANY GLASSWARE FOUND OUTSIDE WILL BE CONFISCATED AND DISPOSED OF.

c) Public safety

FIRE EXITS WILL BE CLEARLY MARKED. STAFF WILL BE TRAINED IN THE EVACUATION OF CUSTOMERS IN EMERGENCIES

A QUALIFIED FIRST AIDER WILL BE ONSITE DURING TRADING HOURS.

FIREFIGHTING EQUIPMENT WILL BE MAINTAINED AND IN GOOD ORDER.

d) The prevention of public nuisance

TAXI DETAILS WILL BE AVAILABLE FROM STAFF AT ALL TIMES

CUSTOMER NOTICES AND DIRECT INFORMATION WILL INFORM CUSTOMERS TO LEAVE THE PREMISES QUIETLY AND RESPECTFULLY.

STAFF WILL RECEIVE TRAINING IN REDUCING ANY DRUNK AND DISORDERLY BEHAVIOUR.

ALL MUSIC WILL BE AT AN AMBIENT LEVEL ONLY.

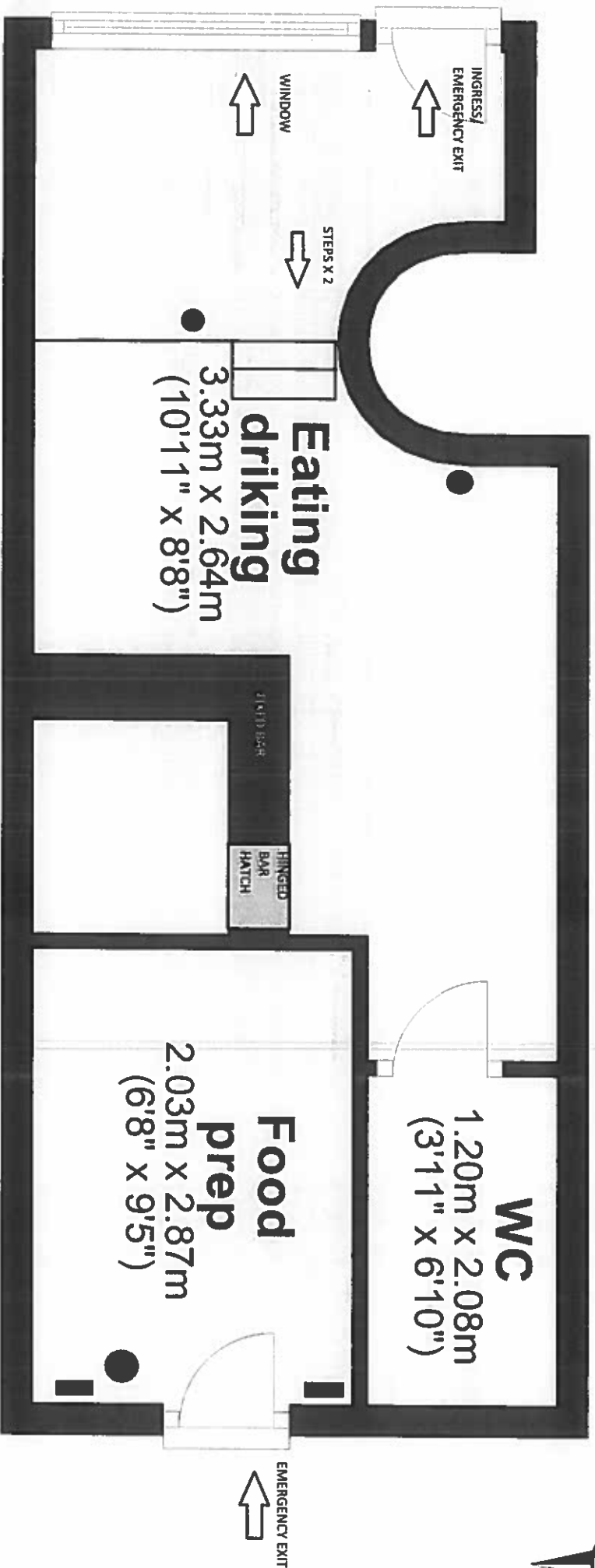
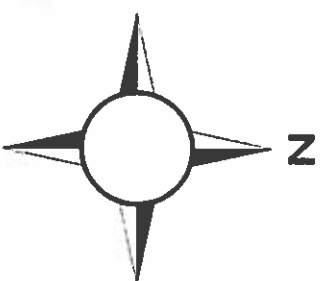
e) The protection of children from harm

THE CHALLENGE 25 SCHEME WILL BE ENFORCED BY ALL STAFF. STAFF WILL ONLY ACCEPT IDENTIFICATION AS DESCRIBED ABOVE.

CUSTOMERS UNDER THE AGE OF 18 WILL BE ASKED TO LEAVE BY 2100 HOURS IN ALL CIRCUMSTANCES.

CUSTOMERS UNDER THE AGE OF 18 MUST BE WITH AN APPROPRIATE ADULT AT ALL TIMES

Ground Floor



- WATER FIRE EXTINGUISHER
- CO2 FIRE EXTINGUISHER
- FIRE BLANKET