

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)

ALARM SYSTEM, TRAINED STAFF WITH RECORDED ONGOING ALCOHOL TRAINING REGIME, CHALLENGE 25 AND PROOF OF AGE INITIATIVE EMBRACED, INSTORE CHALLENGE SIGNAGE, REFUSALS SYSTEM WITH REFUSALS BOOK

b) The prevention of crime and disorder

ALARM SYSTEM, TRAINED STAFF, CHALLENGE 21, REFUSALS SYSTEM

c) Public safety

STAFF TRAINED IN FIRE SAFETY PROCEDURES AND THE USE OF FIRE SAFETY EQUIPMENT, FIRE FIGHTING EQUIPMENT

d) The prevention of public nuisance

STAFF TRAINED TO DEAL WITH SITUATIONS

e) The protection of children from harm

FULL ALCOHOL TRAINING REGIME IN USE, ONGOING RECORDED ALCOHOL TRAINING AND REFRESHER TRAINING, CHALLENGE 21 TRADING INITIATIVE EMBRACED, CHALLENGE SIGNAGE, REFUSALS SYSTEM AND REFUSALS BOOK


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	20 TH AUGUST 2013
Capacity	LICENSING SOLUTIONS - DULY AUTHORISED AGENT

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)

LICENSING SOLUTIONS
235 BOTLEY ROAD
BURRIDGE

Post town	SOUTHAMPTON	Post code	SO31 1BJ
Telephone number (if any)	07831 159 450		
If you would prefer us to correspond with you by e-mail your e-mail address (optional) applications@licensingsolutions.org.uk			

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.