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**SOUTH LAKE LAND DISTRICT COUNCIL**  
**Public Health & Licensing Group, South Lakeland House, Lowther Street,**  
**Kendal, Cumbria LA9 4UD**

**Tel: 0845 050 4434 Fax: (01539) 740300**

**www.southlakeland.gov.uk e-mail: licensing@southlakeland.gov.uk**

**Application to vary a premises licence 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 DAVID MACKENZIE

(Insert name(s) of applicant)

being the premises licence holder, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number

PL(A) 0696

**Part 1 – Premises Details**

Postal address of premises or, if none, ordnance survey map reference or description

THE SUN INN  
MARKET STREET  
ULVERSTON  
CUMBRIA  
LA12 7AY

Post town

ULVERSTON

Postcode

LA12 7AY

Telephone number at premises (if any)

01229 585044

Non-domestic rateable value of premises

£50,750

**Part 2 – Applicant details**

Daytime contact telephone number	01229 585044		
E-mail address (optional)	kirsty@thesuninnulverston.co.uk		
Current postal address if different from premises address	/		
Post town		Postcode	

**Part 3 - Variation**

Please tick as appropriate

Do you want the proposed variation to have effect as soon as possible?

☒ Yes☐ No

If not, from what date do you want the variation to take effect?

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Please describe briefly the nature of the proposed variation (Please see guidance note 1)**

The Sun inn is situated on market street in ulverston. We have recently invested in extending + refurbishing outdoor garden area to improve the general look of the area.

We want to be able to play live music + have dj's play on certain weekends of the year, including the festivals run within the town, eg dickensian festival, carnival day + another fire fest.

If your proposed variation would mean that 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend:

**Part 4 Operating Schedule**

October 2012

Please complete those parts of the Operating Schedule below which would be subject to change if this application to vary is successful.

**Provision of regulated entertainment**

**Please tick all 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) ☐
- i) Provision of late night refreshment (if ticking yes, fill in box I) ☐
- j) Sale by retail of alcohol (if ticking yes, fill in box J) ☐

**In all cases complete boxes K, L and M**

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 (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) DJs playing music through amplified sound system System is limited to ensure volume is kept low.		
Mon					
Tue			State any seasonal variations for the performance of live music (please read guidance note 4)		
Wed					
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	12.00	22.55			
Sun	12.00	22.55			

\* Bank holiday weekends only.

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 (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	10:00	22:55	Please give further details here (please read guidance note 3) Music/volume on outside tv in beer garden for sports (can only be heard if sat near to it).		
Tue					
Wed					
Thur			State any seasonal variations for the playing of 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 at different times to those listed in the column on the left, please list (please read guidance note 5)		

Please tick as appropriate

- I have enclosed the premises licence
- I have enclosed the relevant part of the premises licence

☒  
☐

If you have not ticked one of these boxes, please fill in reasons for not including the licence or part of it below

Reasons why I have not enclosed the premises licence or relevant part of premises licence.

### M

Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

#### a) General – all four licensing objectives (b, c, d and e) (please read guidance note 9)

- SIA door staff to control customers
- CCTV to ensure safety of customers
- no children after 9pm
- very thorough control over volumes of noise

#### b) The prevention of crime and disorder

- SIA qualified door staff ~~is~~ provided
- New CCTV cameras installed covering entire beer garden
- Number of people in venue closely monitored
- Signage requesting customers conduct themselves in an orderly manner
- Bag/Person Searches + clear Drug Policy
- Clear Challenge 25 Policy in place + all bar staff trained

#### c) Public safety

- a thorough + concise log is kept on inspections of beer garden (and pub)
- access for emergency vehicles is clear.
- water is available to all customers
- first aider always on premises
- All areas are maintained in a good and safe condition (seating, lighting, washroom).

**d) The prevention of public nuisance**

- Amplified sound system will be limited using a device fitted specifically by sound engineer - there will be no base noise travel
- regular checks will be done using sound monitor to ensure the sound is not travelling
- notices will be displayed asking customers to leave quietly
- customers can't leave using back entrance after 11pm - must use front
- sound system facing pub not away from it.

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

- no children allowed in premises after 9pm
- No children allowed at bar
- children must be supervised + not allowed to walk on their own in any part of venue
- Challenge 25 in place to ensure no children are served alcohol.

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee. ☐
- I have sent copies of this application and the plan to responsible authorities and others where applicable. ☐
- I understand that I must now advertise my application. ☐
- I have enclosed the premises licence or relevant part of it or explanation. ☐
- I understand that if I do not comply with the above requirements my application will be rejected. ☐

**IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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.**

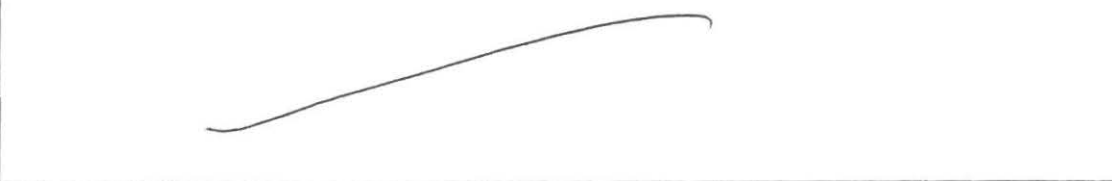
**Part 5 – Signatures** (please read guidance note 10)

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

Signature	
Date	
Capacity	

**Where the premises licence holder is not the applicant (the current authorised agent** (please read guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	

Capacity			
<b>Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 13)</b>			
			
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

**This application cannot be used to vary the licence so as to extend the period for which the licence has effect or to vary substantially the premises to which it relates. If you wish to make that type of change to the premises licence, you should make a new premises licence application under section 17 of the Licensing Act 2003.**

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 state 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 the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. 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 or 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, each of the 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.





ELLIOTT & EDWARDS  
PROJECT MANAGEMENT  
26 SOUTERGATE  
ULVERSTON  
CUMBRIA LA12 7ER 01229 580088

SUN INN  
MARKET STREET  
ULVERSTON  
LA12 7AY

SITE LOCATION PLAN

DRAWING: 1522/001

SCALE: 1:500 @ A4