

Receipt No. 011054
Initials EME
Date 11.11.14



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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 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.

Mark Greenhow

I/We

(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			
Laurel and Hardy Museum Brogden Street		Public Protection 11 NOV 2014	
Post town	Ulverston	Postcode	LA12 7AH

Telephone number at premises (if any)	01229 582292
Non-domestic rateable value of premises	£ Band B

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)	
Surname Greenhow			First names Mark		
I am 18 years old or over				<input checked="" type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)		laurelandhardymuseum@gmail.com			

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
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?

DD		MM		YYYY			
0	1	1	2	2	0	1	4

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)

The Laurel and Hardy Museum is an exhibition located in Ulverston town centre. Made up of shop area, exhibition space and staged area with fixed seating and; all spread over one floor in the former Roxy Bingo premises.

The space is multi use, with the usual use cases as follows:

Bar - There is a separated bar area for smaller events, less than 30 people for special events and serving alcohol to museum customers through the day and evening.

Stage - There is a staged area with 27 fixed seats and 70 temporary seats for seated events such as plays, stand-up comedy, seated concerts.

Dance floor - One seating area can be used as a dance floor for music events, with seating also available.

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 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 6)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 2)		Indoors <input checked="" type="checkbox"/>
					Outdoors <input type="checkbox"/>
					Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) Small staged area with 27 permanent seats and 73 temporary seats.		
Mon	10:00	23:00			
Tue	10:00	23:00	State any seasonal variations for performing plays (please read guidance note 4)		
Wed	10:00	23:00			
Thur	10:00	23:00	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)		
Fri	10:00	23:00			
Sat	10:00	23:00			
Sun	10:00	23:00			

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 (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	10:00	23:00	Please give further details here (please read guidance note 3) Part of the exhibition is the showing of film clips all day on a loop, with museum customers able to join and leave as they please. There are 27 fixed seats with the ability to add up to 70 more (for pre booked parties such as coach trips).		
Tue	10:00	23:00			
Wed	10:00	23:00	State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur	10:00	23:00			
Fri	10:00	23:00	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) Possible evening showings of our programme of films to pre booked parties in the evening. No film shall run later than 23:00.		
Sat	10:00	23:00			
Sun	10:00	23:00			

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon	10:00	23:00	
Tue	10:00	23:00	<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Wed	10:00	23:00	
Thur	10:00	23:00	
Fri	10:00	23:00	<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 5)
Sat	10:00	23:00	
Sun	10:00	23:00	

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Wed					
Thur			<u>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</u> (please read guidance note 5)		
Fri					
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 (please read guidance note 2)		Indoors <input checked="" type="checkbox"/>
					Outdoors <input type="checkbox"/>
					Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) Occasional live music, both amplified and un-amplified.		
Mon	10:00	23:00			
Tue	10:00	23:00			
Wed	10:00	23:00	State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur	10:00	23:00			
Fri	10:00	23:00			
Sat	10:00	23:00	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)		
Sun	10:00	23:00			

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 checked="" type="checkbox"/>
				Outdoors <input type="checkbox"/>
				Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) The playing of background music throughout the day and night at levels suitable to allow easy conversation. Also occasional amplified music for free and ticketed disco events.	
Mon	10:00	23:00		
Tue	10:00	23:00		
Wed	10:00	23:00	State any seasonal variations for the playing of recorded music (please read guidance note 4)	
Thur	10:00	23:00		
Fri	10:00	23:00		
Sat	10:00	23:00	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)	
Sun	10:00	23:00		

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</u> (please read guidance note 2)		Indoors <input checked="" type="checkbox"/>
					Outdoors <input type="checkbox"/>
					Both <input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon	10:00	23:00			
Tue	10:00	23:00			
Wed	10:00	23:00	<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)		
Thur	10:00	23:00			
Fri	10:00	23:00			
Sat	10:00	23:00	<u>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sun	10:00	23:00			

H



Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
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 a 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					

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 (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)			
Mon						
Tue						
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)			
Thur						
Fri						
Sat			<u>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</u> (please read guidance note 5)			
Sun						

J

Supply of alcohol Standard days and timings (please read guidance note 6)			<u>Will the supply of alcohol be for consumption – please tick</u> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 4)		
Mon	10:00	23:00			
Tue	10:00	23:00			
Wed	10:00	23:00			
Thur	10:00	23:00			
Fri	10:00	23:00			
Sat	10:00	23:00			
Sun	10:00	23:00	<u>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</u> (please read guidance note 5) Later times may apply on Bank Holidays, New years eve etc. Never to exceed 01:00		

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

Name	Mark Greenhow
Address	
Postcode	
Personal licence number (if known)	PA 029993
Issuing licensing authority (if known)	SLDC

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 8).

Adult oriented plays, comedy shows aimed at an adult audience (including (but not limited to) swearing, sexual references, adult themes).

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 4)
Day	Start	Finish	
Mon	10:00	00:00	<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 5)
Tue	10:00	00:00	
Wed	10:00	00:00	
Thur	10:00	00:00	
Fri	10:00	00:00	
Sat	10:00	00:00	
Sun	10:00	00:00	

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 9)

Having recently acquired a personal licence, the four licensing objectives are at the front of my mind in this application. I intend to fully comply with the aims of the objectives through training staff, recording incidents and using the challenge 25 initiative. Having worked with the police and licensing authority previously to the submission of this application, I intend to continue working closely with them, and any other responsible authorities, to uphold the intention of the objectives. I have read the SLDC best practice documentation and will aim to comply with the guidelines, regularly reviewing them to ensure compliance.

b) The prevention of crime and disorder

A challenge 25 initiative will be in place.
No open containers will be allowed outside the premises, a table will be provided at the inner doors and notices displayed.
Staff will be trained in their role in prevention.
Membership of Bar Watch will be applied for.

c) Public safety

Points of egress will be clearly signposted and kept clear at all times, with alarms and extinguishers regularly checked, portable electrical equipment PAT tested.
The number of customers and staff will not exceed 150 at any time, number will be monitored.
Policies and procedures reviewed and updated as necessary.

d) The prevention of public nuisance

Doors will be kept closed during events.
Regular checks by staff outside the premises will be carried out to ensure noise levels are acceptable.
No music will be played after 23:00
Drinks will be served in plastic glasses, bottles will be supplied with plastic glasses.
Adequate drinking up time will be allowed to allow customers to disperse.
We will encourage an open discourse with local residents and take action where possible.
Signs will be displayed at the exit to encourage customers to respect our neighbours.

e) The protection of children from harm

Children will not be allowed to any ticketed or non ticketed event which is not age appropriate.
Where entertainment is aimed at families, children will be accompanied by an adult with no more than three children per adult.
Children will be encouraged not to linger in the bar area.
A challenge 25 initiative will be in place.

Checklist:


Please tick to indicate agreement

- 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 designated 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 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 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	9/11/14
Capacity	Owner

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		Postcode	
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 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 applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

SOUTH LAKELAND DISTRICT COUNCIL

Licensing Section, South Lakeland House, Lowther Street, Kendal, Cumbria, LA9 4UD

Tel: (01539) 733333 Ext 7481/7484 Fax: (01539) 737659

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

Part A

Consent of individual to being specified as premises supervisor

I Mark Greenhow [full name of prospective premises supervisor]
 of [redacted]
 [home address of prospective premises supervisor]
 hereby confirm that I give my consent to be specified as the designated premises
 supervisor in relation to the application for Premises licence [type of application]
 by Mark Greenhow [name of applicant]
 relating to a premises licence New application [number of existing licence, if any]
 for Laurel and Hardy Museum, Brogden Street, Ulverston, LA12 7AH
 [name and address of premises to which the application relates]
 and any premises licence to be granted or varied in respect of this application made
 by Mark Greenhow [name of applicant]
 concerning the supply of alcohol at Laurel and Hardy Museum, Brogden Street, Ulverston
LA12 7AH [name and address of premises to which application relates].
 I also confirm that I am applying for, intend to apply for or currently hold a personal
 licence, details of which I set out below.

Personal licence number PA029993 [insert personal licence number, if any]
 Personal licence issuing authority SLDC
 [insert name and address and telephone number of personal licence issuing authority, if
 [redacted]]

[redacted] signed
Mark Greenhow name (please print)
9/11/14 dated

PART B

Consent of premises licence holder to transfer

I/we Mark Greenhow [full name of premises licence holder(s)]
 the premises licence holder of premises licence number New application [insert
 premises licence number] relating to Laurel and Hardy Museum, Brogden Street, Ulverston
 [name and address of
 premises to which the application relates] hereby give my consent for the transfer of
 premises licence number New application [insert premises licence number]
 to [redacted] [full name of transferee].

[redacted] signed
Mark Greenhow name (please print)
9/11/14 dated

