



THE | LICENSING | PRACTICE | LTD
Specialists in Local Authority Licensing

3 Cardinal Place, Cleveleys, Lancs. FY52SQ
Telephone: 01253 858186 or 01253 7708109 Fax: 01253 858186

E-mail: Licensingpract@aol.com Website: www.licensingpractice.co.uk

Application for a premises licence to be granted under the Licensing Act 2003

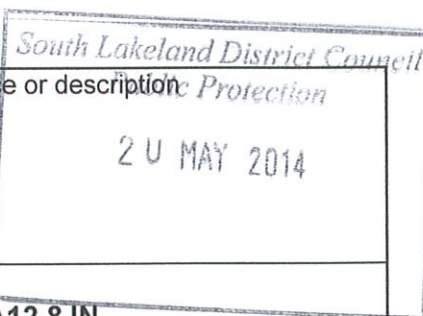
PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

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 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 Partington's Holiday Centres Limited apply for premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below the premises) and 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, ordinance survey map reference or description	
Black Beck Caravan Park Bouth Nr Newby Bridge	
Post town	Post code
Ulverston	LA12 8JN



Telephone number of premises (if any)	01229 861274
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Non domestic rateable value of premises	£93600 (Whole caravan site)
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Part A2 - Applicant Details

Please state the capacity in which you are applying to convert your existing licence

Please tick

a) an individual or individuals		please complete section(A)
b) a person other than an individual		please complete section (B)
i. as a limited company	<input checked="" type="checkbox"/>	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		please complete section (B)
h) the chief officer of police of a police force in England and Wales		please complete section (B)

Receipt No **233064**

Initials **EmE**

Date **20.05.14**

*If you are applying as a person described in (a) or (b) please confirm:

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or Please tick ✓
- 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		Mrs		Miss		Ms		Other title (for example, Rev)	
Surname						First names			
Please tick ✓ yes									
I am 18 years old or over									
Current postal address if different from premises address									
Post Town						Postcode			
Daytime contact telephone number									
Email address (optional)									

SECOND INDIVIDUAL APPLICANT (IF APPLICABLE)

Mr		Mrs		Miss		Ms		Other title (for example, Rev)	
Surname						First names			
Please tick ✓ yes									
I am 18 years old or over									
Current postal address if different from premises address									
Post Town						Postcode			
Daytime contact telephone number									
Email address (optional)									

Part 3 Operating Schedule

	Day		Month		Year			
When do you want the premises licence to start?	0	1	0	6	2	0	1	4

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

If 5000 or more people attend the premises at any one time, please state the number expected to attend	N/A
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<p>Please give a general description of the premises (please read guidance note 1)</p> <p>The premises comprise a small convenience store situated on and serving a holiday and touring caravan park. The customers of the premises are drawn virtually exclusively from the residents of the park.</p>
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What licensable activities do you intend to carry on from the premises?
(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Please tick ☒ Yes

Provision of regulated entertainment

a) plays	
b) films	
c) indoor sporting events	
d) boxing or wrestling entertainment	
e) live music	
f) recorded music	
g) performances of dance	
h) anything of a similar description to that falling within (e), (f) or (g)	

Provision of entertainment facilities for:

i) making music	
j) dancing	
k) entertainment of a similar description to that falling within (i) or (j)	

Provision of late night refreshment	
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Sale by retail of alcohol		
a) for consumption on the premises		
b) for consumption off the premises		✓

In all cases complete boxes N, O and P

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint nature (other than a body corporate), please give the name and address of each party concerned.

Name	Partington's Holiday Centres Limited
Address	Chapel Court 204 Fleetwood Road North, Thornton Cleveleys Lancs. FY5 4BJ
Registered number (where applicable)	00391104
Description of applicant (for example, partnership, company, unincorporated association etc.)	Limited Company
Telephone number (if any)	01253 338260
E-mail address (optional)	

A

Plays Standard days and timings (please read guidance note 8)			Will the performance of a play take place indoors or outdoors, or both – please tick [Y] (please read guidance note 9)	Indoor	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<u>Please give further Details here</u> (please read guidance note 10)		
Tue					
Wed			<u>State any seasonal variations for the performance of a play</u> (please read guidance note 11).		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of a play at different times to those listed in the column on the left, please list</u> (Please read guidance note 12). •		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 8)			Will the performance of films take place indoors or outdoors, or both – please tick [Y] (please read guidance note 9)	Indoor	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<u>Please give further Details here</u> (please read guidance note 10)		
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 11).		
Thur					
Fri			<u>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</u> (Please read guidance note 12). •		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 8)			<u>Please give further Details here</u> (please read guidance note 10)
Day	start	finish	
Mon			
Tue			<u>State any seasonal variations for the use the premises for Indoor sporting events</u> (please read guidance note 11).
Wed			<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 12).
Thur			
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainment Standard days and timings (please read guidance note 8)			Will the boxing or wrestling entertainment take place indoors or outdoors, or both – please tick [Y] (please read guidance note 9)	Indoor	
Day	Start	Finish		Outdoors	
Mon				Both	
Tue					
Wed					
Thur					
Fri					
Sat					
Sun					

Please give further Details here (please read guidance note 10)

State any seasonal variations for boxing or wrestling entertainment (please read guidance note 11).

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 (Please read guidance note 12).

E

Live Music Standard days and timings (please read guidance note 8)			Will the performance of live music take place indoors or outdoors, or both – please tick [Y] (please read guidance note 9)	Indoor	
Day	Start	Finish		Outdoors	
Mon			Please give further Details here (please read guidance note 10)	Both	
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 11).		
Thur					
Fri			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 12).		
Sat					
Sun					

F

Recorded Music Standard days and timings (please read guidance note 8)			Will the playing of recorded music take place indoors or outdoors, or both – please tick [Y] (please read guidance note 9)	Indoor	
Day	Start	Finish		Outdoors	
Mon			Please give further Details here (please read guidance note 10)	Both	
Tue					
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 11).		
Thur					
Fri			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 12).		
Sat					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 8)			Will the performance of dance take place indoors or outdoors, or both – please tick [Y] (please read guidance note 9)	
Day	Start	Finish	Indoor	Outdoors
Mon				
Tue				
Wed				
Thur				
Fri				
Sat				
Sun				

Please give further Details here (please read guidance note 10)

State any seasonal variations for the performance of dance (please read guidance note 11).

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 (Please read guidance note 12).

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 8)			Please give a description of the type of entertainment you will be providing	
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick [Y] (read guidance note 9)	Indoors
Mon				
Tue				
Wed				
Thur				
Fri				
Sat				
Sun				

Please give further details here (please read guidance note 10)

State any seasonal variations for anything of a similar description to that falling within (e), (f) or (g) (please read guidance note 11).

Non standard timings. Where you intend to use the premises for anything 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 (Please read guidance note 12).

I

Provision of facilities for making music			Please give a description of the facilities for making music you will be providing	
Standard days and timings (please read guidance note 8)				
Day	Start	Finish	Will the facilities for making music take place indoors or outdoors or both – please tick [Y] (read guidance note 9)	
Mon			indoors	
			Outdoors	
			Both	
Tue			<u>Please give further details here</u> (please read guidance note 10)	
Wed				
Thur				
Fri			<u>State any seasonal variations for the provision of facilities for making music</u> (please read guidance note 11)	
Sat				
Sun			Non standard timings. Where you intend to use the premises for the provision of facilities for making music at different times to those listed in the column on the left, please list (Please read guidance note 12).	
			•	

J

Provision of facilities for dancing			Will the facilities for dancing be indoors or outdoors, or both – please tick [Y] (please read guidance note 9)	
Standard days and timings (please read guidance note 8)				
Day	Start	Finish	Indoor	
Mon			Outdoors	
			Both	
Tue			<u>Please give further Details here</u> (please read guidance note 10)	
Wed			<u>State any seasonal variations for the provision of facilities for dancing</u> (please read guidance note 11).	
Thur				
Fri			Non standard timings. Where you intend to use the premises for the provision of facilities for dancing at different times to those listed in the column on the left, please list (Please read guidance note 12).	
Sat			•	
Sun				

K

Provision of facilities for entertainment of a similar description to that falling within I or J Standard days and timings (please read guidance note 8)			Please give a description of the type of entertainment facility you will be providing		
Day	Start	Finish	Will the entertainment facility be indoors or outdoors or both – please tick [Y] (read guidance note 9)	Indoors	
Mon				Outdoors	
				Both	
Tue			<u>Please give further details here</u> (please read guidance note 10)		
Wed			<u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within I or J</u> (please read guidance note 11)		
Thur					
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the Provision of facilities for entertainment of a similar description to that falling within I or J at different times to those listed in the column on the left, please list</u> (Please read guidance note 12).		
Sun					

L

Late Night Refreshment Standard days and timings (please read guidance note 8)			Will the provision of late night refreshment take place indoors or outdoors, or both – please tick [Y] (please read guidance note 9)	Indoor	
Day	Start	Finish		Outdoors	
				Both	
Mon			<u>Please give further Details here</u> (please read guidance note 10)		
Tue			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 11).		
Wed					
Thur					
Fri					
Sat					
Sun					

Hours premises are open to the public Standard days and timings (please read guidance note 8)			State any seasonal variations (please read guidance note 11)
Day	Start	Finish	None
Mon	07.00hrs	23.00hrs	
Tue	07.00hrs	23.00hrs	
Wed	07.00hrs	23.00hrs	
Thur	07.00hrs	23.00hrs	
Fri	07.00hrs	23.00hrs	
Sat	07.00hrs	23.00hrs	
Sun	07.00hrs	23.00hrs	
			Non standard timings. Where you intend to use the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 12)

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)

A nominated person shall have responsibility for the premises whilst the premises are open.

b) The prevention of crime and disorder

A Challenge 25 proof of age policy shall be implemented and adhered to. All staff to have received suitable training in relation to the Challenge 25 proof of age scheme. Records to evidence this will be made available to an authorised officer upon request.

A notice shall be displayed at the entrance to the premises where they can be clearly seen and read and shall indicate that it is unlawful for persons under 18 to purchase alcohol or for any person to purchase alcohol on behalf of a person under 18 years of age.

An incident book shall be maintained, in which shall be recorded refused sales to suspected under age/ drunken persons.

c) Public safety

The Premises shall be operate in accordance with all relevant legislation which promotes the public safety objective including, but not limited to, the Health and Safety at Work etc Act 1974 and associate regulations, the Food Safety Act 1990, the Regulatory Reform (Fire Safety) Order 2005 and the Disability Discrimination Act 1995.

Adequate first aid and fire-fighting provision will be available at all times on the premises.

M

Supply of alcohol Standard days and timings (please read guidance note 8)			Will the supply of alcohol be for consumption (Please tick Box Y) [please read guidance note 13]	On the premises	
				Off the premises	✓
				Both	
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 11)		
Mon	07.00hrs	23.00hrs			
Tues	07.00hrs	23.00hrs	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 12). •		
Wed	07.00hrs	23.00hrs			
Thur	07.00hrs	23.00hrs			
Fri	07.00hrs	23.00hrs			
Sat	07.00hrs	23.00hrs			
Sun	07.00hrs	23.00hrs			

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

Name: Joseph Hartley Dixon

Address & Postcode:

(seasonal address)

Personal licence number (if known) L/N 200501240

Issuing licensing authority (if known) City of London Authority

N

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)

None

a) The prevention of public nuisance

None

e) The protection of children from harm

Suitable signage will be displayed to specify that a Challenge 25 Policy is in place.

Any person who looks or appears to be under the age of 25 shall be asked to provide identification that they are over the age of 18. The following are the only forms of identification acceptable:

- i. A recognised proof of age card accredited under the British Retail Consortium's Proof of Age Standards Scheme (PASS)
- ii. Photo driving licence
- iii. Citizen card supported by the Home Office
- iv. Official ID card issued by HM Forces or European Union bearing a photograph and date of birth of the holder.

If no suitable identification is provided, the sale of alcohol to them will be refused.

Training shall be given to all staff of the consequences for adults who buy alcohol on behalf of children

- | | 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 15th May 2014

Capacity **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 address for correspondence associated with this application (please read guidance note 19)

Robin Atkinson or Rodger Wightman
The Licensing Practice ,
3 Cardinal Place,

Tel: 01253 770810 or 01253 858186

Post town **Cleveleys**

Post code **FY5 2 SQ**

Telephone number (if any) **01253 770810 or 01253 858186**

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)



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www.licensingpractice.co.uk.

Consent of individual to being specified as premises supervisor

I Joseph Hartley Dixon of [REDACTED],

(seasonal address [REDACTED])

hereby confirm that I give my consent to be specified as

the designated premises supervisor in relation to the application for a new Premises
Licence by Partington's Holiday Centres Limited for Black Beck Caravan Park,
Bouth, Nr Newby Bridge. LA12 8JN.

I also confirm that I am in possession of a personal licence

Personal licence number: L/N 200501240

Personal licence issuing authority: City of London.

Name: Joseph Hartley Dixon

Address: [REDACTED]

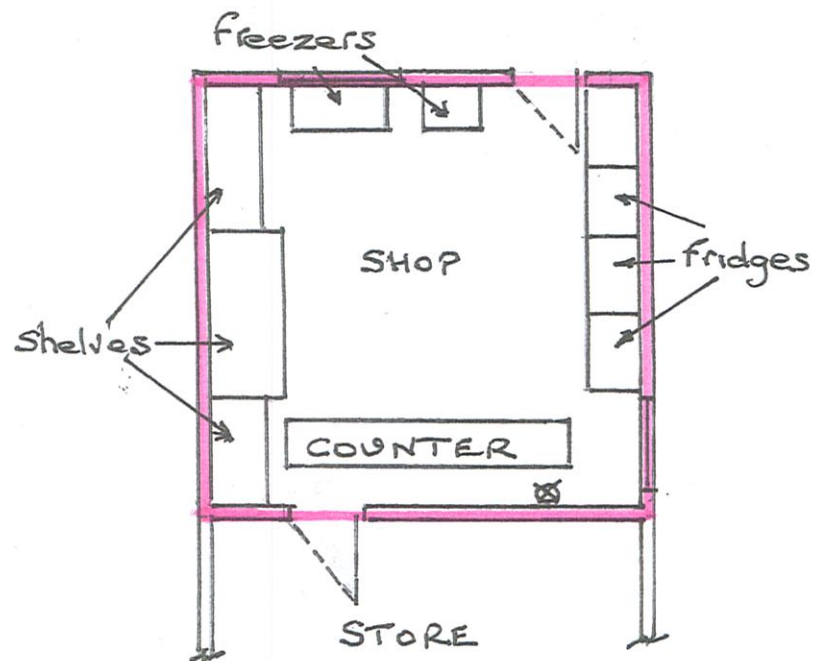
Signature ...

Name (please print). JOSEPH HARTLEY DIXON.

Date 28th April 2014.

LICENSING ACT 2003

BLACK BECK
CARAVAN PARK
SHOP.
BOOTH.
NR NEWBY BRIDGE



⊗ 2kg powder extinguisher
— licensed area.

SCALE 1:100