



Lockett & Co

Retail, Licensing & Training Consultants

10th September 2013

FOR THE ATTENTION OF THE LICENSING OFFICER

Dear Sir/Madam

Re: Licensing Act 2003 – Premises Licence Application

We enclose our client's application for a Premises Licence for your department's attention and trust that you will find everything in order.

Please note that the date of service is as stated on the Notices.

We have provided the application online via elms, it is our understanding from the guidance that it is your responsibility as the local authority to serve copies on all the responsible authorities.

We confirm that a notice of the application has been placed in a local newspaper with the notices displayed at the site in the required manner.

We would also like to confirm that the DPS named on this application is not the proposed DPS but a nominee only. This site will not trade until a DPS variation has been submitted in the name of permanent DPS.

Should you have any queries with regard to this matter would you please contact us in the first instance rather than reject or return the application.

It may be that we can speedily resolve any query for you by this method.

Thanking you in anticipation

Yours faithfully

Lockett & Co

Enclosures:

Application for a Premises Licence

Consent Form for DPS

Plan

Fee

Lockett House
13 Church Street
Kidderminster
Worcestershire
DY10 2AH

Local Rate 0845 2305625
Telephone 01562 864488
Facsimile 01562 863539

E-mail info@lockett.uk.com
Web site www.lockett.uk.com

**General description and photographs supplementary to the
premises licence application for:**

SHELL UK OIL PRODUCTS LIMITED

SHELL ULVERSTON

OUBAS HILL

ULVERSTON

CUMBRIA

LA12 7LA

**PUBLIC NOTICE OF AN APPLICATION FOR A PREMISES
LICENCE UNDER SECTION 17 OF THE LICENSING ACT 2003**

Notice is hereby given that an application was made to
SOUTH LAKELAND DISTRICT COUNCIL for a premises licence
under the above Act on the **11TH SEPTEMBER 2013**

Applicant: **SHELL UK OIL PRODUCTS
LIMITED**

Address of premises: **SHELL ULVERSTON
OUBAS HILL
ULVERSTON
CUMBRIA, LA12 7LA**

Proposed licensable activities:

**SALE OF ALCOHOL FOR CONSUMPTION OFF THE PREMISES
PROVISION OF LATE NIGHT REFRESHMENT**

Proposed days and hours of licensable activity:

	EVERY DAY
ALCOHOL SALES	00.00 TO 24.00
PROVISION OF LATE NIGHT REFRESHMENT	23.00 TO 05.00

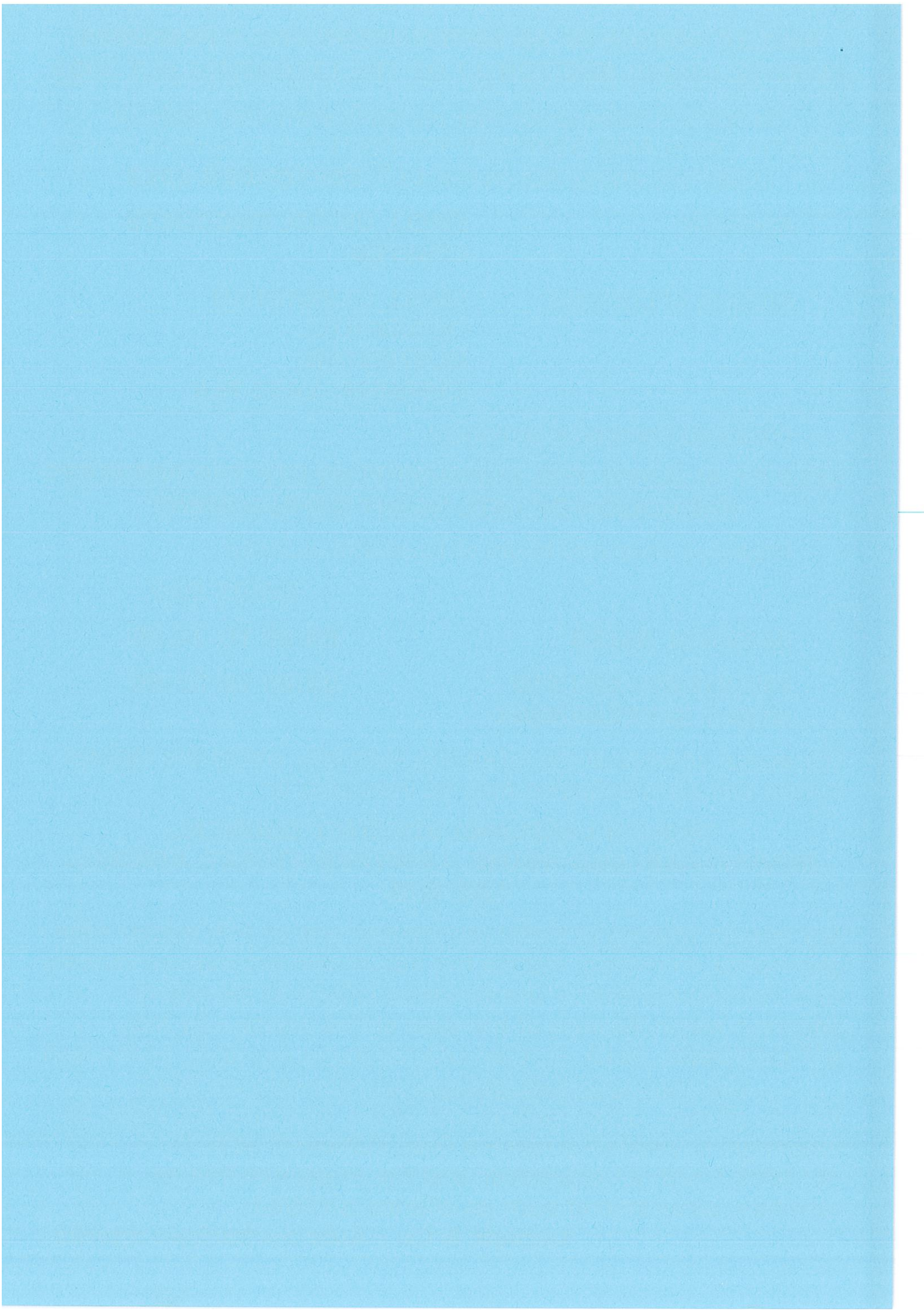
The postal address of the Licensing Authority where the register
is kept and the application may be inspected is:

***SOUTH LAKELAND DISTRICT COUNCIL,
SOUTH LAKELAND HOUSE, LOWTHER STREET, KENDAL,
LA9 4UD.**

Any person wishing to make representations on this matter shall
give notice, in writing, stating the nature and grounds for making
such representations to The Licensing Officer at the above
address* within 28 days of the date of this notice – by the
9TH OCTOBER 2013. Further information is available on the web
site www.southlakeland.gov.uk following the links.

It is an offence, under section 158 of the Licensing Act 2003, to
knowingly or recklessly make a false statement in or in
connection with an application and the maximum fine on
summary conviction of such an offence is £5000.

Lockett & Co – duly authorised agents



Convenience Store Overview.

This is a well established convenience store site traded by Shell with ancillary fuel sales. The store is currently undergoing refurbishment. There will be 4 pumps located on the forecourt and an ATM is also located on site. There are no facilities on site for the maintenance and/or sale of motor vehicles.

The Convenience Store.

The convenience store has a retail area of approximately 1000 sq ft. The purpose built store has been designed to serve both the local community along with passing trade. The convenience store operates 24 hours per day, seven days per week under the company's own format. The store will stock a range of fresh foods and dairy produce, groceries and other domestic products and also offers 'express' lunch facilities. In addition dry fuel products such as BBQ charcoal/kindling/logs will be available. Off sales are a standard and expected feature of the convenience store service.

The Operation.

The convenience store will be operated by the Manager who is also the DPS, assisted by a team of full and part time staff. The Designated Premises Supervisor, is trained and certified through an accredited scheme and is responsible for training all staff utilising the company wide training package-and keeping complete training records. The Challenge 25 trading initiative is used supported by the refusals system with records kept in the Refusals Log.

Security.

The internal and external digital CCTV system benefits from a recorder with 31 day image retention. Recordings can be made available to Police and other enforcement agencies as needed. The convenience store operates at closed door policy between the hours of 23.00 and 06.00 seven days per week with all service taking place through the night hatch.

LOCKETT & CO DUE DILIGENCE PACKAGE.

Our due diligence package consists of the following:

1. A Premises Licence Manual:

This consists of all the relevant information you will need regarding your premises licence and what the requirements are under the Licensing Act.

2. Staff Training Manual:

This manual is designed so that you can carry out in house training of all your staff on a regular basis, ensuring that all staff know their legal duties, what the requirements are under the Licensing Act and the penalties if the law is not adhered to.

3. Premises Refusals Log:

This log is where your staff will record any refused sales to customers (for example if they are underage, did not have any ID, etc). This log allows all refusals to be kept in one place. If the Police or Trading Standards ask if you are making the correct ID checks and refusing sales to anyone who is under 18 years of age, you have documented evidence to prove you have been compliant.

If a customer comes into your premise, and you refuse a sale of alcohol or age restricted product, you will need to record this information in this log, including date, time, person who refused service and why.

4. Premises Incident Log:

This log is where your staff will record any incidents that occur in your premises (for example theft, non payment for service, violence, etc).

If any of these incidents or any other relevant incidents occur, you will need to record them in the incident log including details of the event, who was involved, date, time and any other applicable information.

5. Refusals Cards (per 1000 for alcohol):

The cards are for your staff members to give out to customers when they are refused service when trying to purchase alcohol, telling them why they were refused. The use of the card can assist in reducing potential confrontation.

If a staff member refuses to sell alcohol to the customer they will need to tick the reason why on the card, stamp or write the name of the premise on the back and date and sign the card. Once they have done this they can give the card to the customer. They should record the refused sale in the refusal log.

6. Refusals Cards (per 500 for age restricted products):

These cards are for your staff members to give out to a customer when they are refused service for age restricted products, telling them why they were refused.

If a staff member refuses to sell age restricted products to the customer they will need to tick the reason why on the card, stamp or write the name of the premise on the back and date and sign the card. Once they have done this they can give the card to the customer. They should record the refused sale in the refusal log.

7. U 25 Drink Awareness Badges (per 20):

These badges are for staff members to wear, showing customers that they will be requesting ID from anyone who appears to be under the age of 25 when purchasing alcohol. It will inform customers that this is company policy, rather than just a staff member being awkward or unfair requesting ID.

All staff members on the premise should wear these badges.

8. U 25 Drink Awareness Posters (per set A3, A4 & A2):

These posters are for you to display around your premise, portraying the message that anyone who appears to be under the age of 25 will be asked for ID when purchasing alcohol. Again these posters are there to advise customers that this is company policy, and will assist in the prevention of underage requests for alcohol.

These posters should be displayed around the premise.

9. Staff Guide to Selling Alcohol Booklet (per 10):

This small booklet is an easy guide for staff members to refer to regarding their responsibilities with regard to the sale of alcohol. The booklet has been designed so that you can keep it in your pocket or under the counter.

All staff members should be issued with one of these booklets upon completion of training.

[illegible]

Date: September 2013
Scale: 1:100

11 SEP 2013

[Insert name and address of relevant licensing authority and its reference number (optional).]

**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.

Receipt No

Initials

Date

I/We SHELL UK OIL PRODUCTS LIMITED

(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			
SHELL ULVERSTON OUBAS HILL			
Post town	ULVERSTON	Postcode	LA12 7LA

Telephone number at premises (if any)	01229 581951
Non-domestic rateable value of premises	£74,500

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- | | | |
|---|-------------------------------------|-----------------------------|
| a) an individual or individuals * | <input type="checkbox"/> | please complete section (A) |
| b) a person other than an individual * | | |
| i. as a limited company | <input checked="" type="checkbox"/> | please complete section (B) |
| ii. as a partnership | <input type="checkbox"/> | please complete section (B) |
| iii. as an unincorporated association or | <input type="checkbox"/> | please complete section (B) |
| iv. other (for example a statutory corporation) | <input type="checkbox"/> | 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 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)					

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 SHELL UK OIL PRODUCTS LIMITED
Address SHELL CENTRE LONDON SE1 7NA
Registered number (where applicable) 3625633
Description of applicant (for example, partnership, company, unincorporated association etc.) PRIVATE LIMITED COMPANY
Telephone number (if any) 0207 9341234
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD		MM		YYYY			
1	0	1	0	2	0	1	3

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

DD		MM		YYYY			
1	1	1	1	1	1	1	1

Please give a general description of the premises (please read guidance note 1)

PLEASE SEE ATTACHED OVERVIEW.

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) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/> |

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)			<u>Will the performance of a play 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					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 4)		
Thur					
Fri					
Sat			<u>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</u> (please read guidance note 5)		
Sun					

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

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			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Wed			
Thur			
Fri			<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			
Sun			

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					
Wed					
Thur			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Fri					
Sat					
Sun					
			<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)		

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 type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)		
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 5)		
Sat					
Sun					

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 type="checkbox"/>
			Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)	
Mon				
Tue				
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 4)	
Thur				
Fri				
Sat			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				

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

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					



I

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 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 PROVISION OF HOT FOOD AND DRINKS.		
Mon	23.00	05.00			
Tue	23.00	05.00			
Wed	23.00	05.00	State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Thur	23.00	05.00			
Fri	23.00	05.00			
Sat	23.00	05.00	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 (please read guidance note 5)		
Sun	23.00	05.00			

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 checked="" type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish				
Mon	00.00	24.00				
Tue	00.00	24.00				
Wed	00.00	24.00				
Thur	00.00	24.00				
Fri	00.00	24.00	<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)			
Sat	00.00	24.00				
Sun	00.00	24.00				

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

Name SARA CLEMENT	
Address 	
Postcode	
Personal licence number (if known) WF020054490	
Issuing licensing authority (if known) WYRE FOREST 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 8).

NONE

L

Hours premises are open to the public
Standard days and timings
(please read guidance note 6)

Day	Start	Finish
Mon	00.00	24.00
Tue	00.00	24.00
Wed	00.00	24.00
Thur	00.00	24.00
Fri	00.00	24.00
Sat	00.00	24.00
Sun	00.00	24.00

State any seasonal variations (please read guidance note 4)

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 (please read guidance note 5)

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)

PLEASE SEE ATTACHED SHEET.

b) The prevention of crime and disorder

PLEASE SEE ATTACHED SHEET.

c) Public safety

PLEASE SEE ATTACHED SHEET.

d) The prevention of public nuisance

PLEASE SEE ATTACHED SHEET.

e) The protection of children from harm

PLEASE SEE ATTACHED SHEET.

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	10 TH SEPTEMBER 2013
Capacity	DULY AUTHORISED AGENTS

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)

SARA CLEMENT
LOCKETT & CO
13 CHURCH STREET

Post town **KIDDERMINSTER**

Postcode **DY10 2AH**

Telephone number (if any) 01562 864488

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)
sara@lockett.uk.com

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.

Consent of individual to being specified as premises supervisor

SARA CLEMENT

I

[full name of prospective premises supervisor]

of

[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 APPLICATION FOR SALE OF ALCOHOL FOR
CONSUMPTION OFF THE PREMISE. *a LNR*

[type of application]

by

SHELL UK OIL PRODUCTS LIMITED

[name of applicant]

relating to a premises licence

--

[number of existing licence, if any]

for

SHELL ULVERSTON
OUBAS HILL
ULVERSTON
CUMBRIA
LA12 7LA

[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

SHELL UK OIL PRODUCTS LIMITED

[name of applicant]

concerning the supply of alcohol at

SHELL ULVERSTON
OUBAS HILL
ULVERSTON
CUMBRIA
LA12 7LA

[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

WF020054490

[insert personal licence number, if any]

Personal licence issuing authority

WYRE FOREST DISTRICT COUNCIL, DUKE HOUSE, CLENSMORE STREET,
KIDDERMINSTER, WORCS, DY10 2JX - 01562 732593

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

Signed



Name (please print)

SARA CLEMENT

Date

10TH SEPTEMBER 2013

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

a) General-all four licensing objectives (b, c, d, e)

A suitable and sufficient CCTV system with recording facilities will be in place at site and will operate at all times the premise is open for licensable activities. Images can be made available upon reasonable request by the Police or other relevant officers of a responsible authority.

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

A refusals book will be operated and maintained and will be produced to a relevant officer of the Police or other relevant officers of a responsible authority upon request.

A Challenge 25 policy will be operated at the premise, acceptable forms of identification are a passport, photocard driving licence and PASS accredited identification card.

Spirits will be located behind the counter.

b) The prevention of crime and disorder.

A suitable and sufficient CCTV system with recording facilities will be in place at site and will operate at all times the premise is open for licensable activities. Images can be made available upon reasonable request by the Police or other relevant officers of a responsible authority.

Spirits will be located behind the counter.

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

c) Public Safety.

A suitable and sufficient CCTV system with recording facilities will be in place at site and will operate at all times the premise is open for licensable activities. Images can be made available upon reasonable request by the Police or other relevant officers of a responsible authority.

d) Prevention of public nuisance.

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

e) The protection of children from harm.

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

A refusals book will be operated and maintained and will be produced to a relevant officer of the Police or other relevant officers of a responsible authority upon request.

A Challenge 25 policy will be operated at the premise, acceptable forms of identification are a passport, photocard driving licence and PASS accredited identification card.

Spirits will be located behind the counter.

Analysis of Intensity of Use.

Shell Ulverston, Oubas Hill, Ulverston, Cumbria, LA12 7LA.

1st January 2013 to 31st March 2013 incl.

	Fuel	Convenience Store	Total
1st to 31st January 2013	76,060	112,751	188,811
1st to 28th February 2013	78,655	114,248	192,903
1st to 31st March 2013	77,358	113,499	190,857
TOTAL	232,073	340,498	572,571

Analysis of Intensity of Use
Shell Ulverston, Oubas Hill, Ulverston, Cumbria, LA12 7LA.
1st January 2013 to 31st March 2013 incl.

