

**GA01**



**SOUTH LAKELAND DISTRICT COUNCIL**

Licensing Group, South Lakeland House, Lowther Street, Kendal; Cumbria, LA9 4UQ

Tel: (01539) 740300 Fax: (01539) 740300

[www.southlakeland.gov.uk](http://www.southlakeland.gov.uk) e-mail: [licensing@southlakeland.gov.uk](mailto:licensing@southlakeland.gov.uk)

**Application for a premises licence under the Gambling Act 2005 (standard form)**

**PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST**

If you are completing this form by hand, please write legibly in block capitals using ink. Use additional sheets if necessary (marked with the number of the relevant question). You may wish to keep a copy of the completed form for your records.

Where the application is—

- In respect of a vessel, or
- To convert an authorisation granted under the Betting, Gaming and Lotteries Act 1963 or the Gaming Act 1968,

the application should be made on the relevant form for that type of premises or application.

**Part 1 – Type of premises licence applied for**

Regional Casino

Large Casino

Small Casino

Bingo

Adult Gaming Centre

Family Entertainment Centre

Betting (Track)

Betting (Other)

Do you hold a provisional statement in respect of the premises? Yes  No

If the answer is "yes", please give the unique reference number for the provisional statement (as set out at the top of the first page of the statement):

**Part 2 – Applicant Details**

If you are an individual, please fill in Section A. If the application is being made on behalf of an organisation (such as a company or partnership), please fill in Section B.

**Section A**

**Individual applicant**

1. Title: Mr  Mrs  Miss  Ms  Dr  Other (please specify)

2. Surname:

Other name(s):

*[Use the names given in the applicant's operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence]*

3. Applicant's address (home or business – [delete as appropriate]):

Postcode:

4(a) The number of the applicant's operating licence (as set out in the operating licence):

4(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:

5. Tick the box if the application is being made by more than one person.

[Where there are further applicants, the information required in questions 1 to 4 should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants".]

## Section B

### Application on behalf of an organisation

6. Name of applicant business or organisation: SCOTTABION PROPERTIES LTD

[Use the names given in the applicant's operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence.]

7. The applicant's registered or principal address:

Aquarius Building  
1 Giebe rd  
Bowness on Windermere  
Cumbria

Postcode: LA23 3HL

8(a) The number of the applicant's operating licence (as given in the operating licence):

000 0031 44 - N - 104 298 - 005

8(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:

9. Tick the box if the application is being made by more than one organisation.

[Where there are further applicants, the information required in questions 6 to 8 should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants".]

## Part 3 – Premises Details

10. Proposed trading name to be used at the premises (if known):

SCOTTABION PROPERTIES LTD.

11. Address of the premises (or, if none, give a description of the premises and their location):

AQUARIUS BUILDING  
1 GIERE RD  
BOWNESS ON WINDERMERE  
CUMBRIA

Postcode: LA23 3HE

12. Telephone number at premises (if known): 015394 42239.

13. If the premises are in only a part of a building, please describe the nature of the building (for example, a shopping centre or office block). The description should include the number of floors within the building and the floor(s) on which the premises are located.

THE PREMISES IS <sup>PART</sup> OF GROUND FLOOR ONLY,  
OF A THREE STOREY BUILDING WHICH THE  
UPSTAIRS IS A BREWERS TAYRE RESTAURANT.

14(a) Are the premises situated in more than one licensing authority area?

~~Yes~~/No [delete as appropriate]

14(b). If the answer to question 14(a) is yes, please give the names of all the licensing authorities within whose area the premises are partly located, **other than the licensing authority to which this application is made:**

#### Part 4 – Times of operation

15(a). Do you want the licensing authority to exclude a default condition so that the premises may be used for longer periods than would otherwise be the case? ~~Yes~~/No [delete as appropriate]  
[Where the relevant kind of premises licence is not subject to any default conditions, the answer to this question will be no.]

15(b). If the answer to question 15(a) is yes, please complete the table below to indicate the times when you want the premises to be available for use under the premises licence.

	Start	Finish	Details of any seasonal variation
Mon	hh:mm	hh:mm	
Tue			
Wed			
Thurs			
Fri			
Sat			
Sun			

16. If you wish to apply for a premises licence with a condition restricting gambling to specific periods in a year, please state the periods below using calendar dates:

### Part 5 – Miscellaneous

17. Proposed commencement date for licence (leave blank if you want the licence to commence as soon as it is issued): (dd/mm/yyyy)

18(a). Does the application relate to premises which are part of a track or other sporting venue which already has a premises licence? ~~Yes~~ No [delete as appropriate]

18(b). If the answer to question 18(a) is yes, please confirm by ticking the box that an application to vary the main track premises licence has been submitted with this application.

19(a). Do you hold any other premises licences that have been issued by this licensing authority? ~~Yes~~ No [delete as appropriate]

19(b). If the answer to question 19(a) is yes, please provide full details:

20. Please set out any other matters which you consider to be relevant to your application:

### Part 6 – Declarations and Checklist (Please tick)

I/ We confirm that, to the best of my/ our knowledge, the information contained in this application is true. I/ We understand that it is an offence under section 342 of the Gambling Act 2005 to give information which is false or misleading in, or in relation to, this application.

I/ We confirm that the applicant(s) have the right to occupy the premises.

Checklist:

- Payment of the appropriate fee has been made/is enclosed
- A plan of the premises is enclosed
- I/ we understand that if the above requirements are not complied with the application may be rejected
- I/ we understand that it is now necessary to advertise the application and give the appropriate notice to the responsible authorities

### Part 7 – Signatures

21. Signature of applicant or applicant's solicitor or other duly authorised agent. If signing on behalf of the applicant, please state in what capacity:

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: 01/11/2012 (dd/mm/yyyy) Capacity: DIRECTOR, SCOTTGIBION PROPERTIES LTD

22. For joint applications, signature of 2nd applicant, or 2nd applicant's solicitor or other authorised agent. If signing on behalf of the applicant, please state in what capacity:

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_ (dd/mm/yyyy) Capacity: \_\_\_\_\_

*[Where there are more than two applicants, please use an additional sheet clearly marked "Signature(s) of further applicant(s)". The sheet should include all the information requested in paragraphs 21 and 22.]*

*[Where the application is to be submitted in an electronic form, the signature should be generated electronically and should be a copy of the person's written signature.]*

### Part 8 – Contact Details

23(a) Please give the name of a person who can be contacted about the application:

\_\_\_\_\_

23(b) Please give one or more telephone numbers at which the person identified in question 23(a) can be contacted:

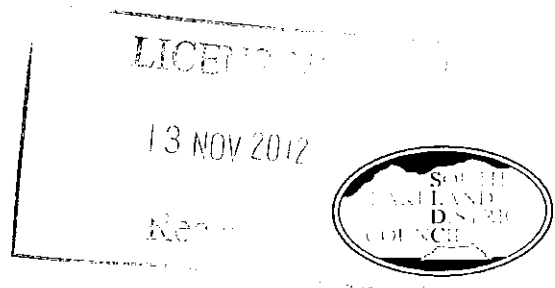
\_\_\_\_\_

24. Postal address for correspondence associated with this application:

SCOTTGIBION PROPERTIES LTD  
AQUARIUS BUILDING  
1 GILBE RD  
BOWNESS ON WINDERMERE  
Postcode: LA23 3NE

25. If you are happy for correspondence in relation to your application to be sent via e-mail, please give the e-mail address to which you would like correspondence to be sent:

**GA05**



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**NOTICE OF APPLICATION FOR A PREMISES LICENCE (Form A)**

This notice is issued in accordance with regulations made under section 160 of the Gambling Act 2005

Notice is hereby given that: **SCOTTABION PROPERTIES LTD**

[Give the full name of the applicant as set out in Part 2 of the application for a premises licence]

of the following address: **AQUARIUS BUILDING  
1 GIEBE RD  
BOWNESS ON WINDERMERE  
CUMBRIA**

Postcode: **LA23 2HE**

[Give the full address of the applicant as set out in Part 2 of the application for a premises licence]

the number of whose operating licence is **000 003144-N-104298-605**  
who applied for an operating licence on **1-11-2012**.

[Delete as appropriate. Insert the reference number of the applicant's operating licence (as set out in the operating licence). Where an application for an operating licence is in the process of being made, indicate the date on which the application was made.]

has made an application for a **A.G.C.**  
premises licence.

[Insert here the kind of premises licence being applied for]

The application relates to the following premises: **small area at  
back corner of amusement arcade, within a  
premises within a premises.**

[Give the trading name to be used at the premises, and the address of the premises (or, if none, give a description of the premises and their location).]

**SCOTTABION PROPERTIES LTD  
AQUARIUS BUILDING, 1 GIEBE RD, BOWNESS**

The application for a premises licence has been made to the following licensing authority:

SOUTH LAKELAND DISTRICT COUNCIL

LICENSING GROUP

SOUTH LAKELAND HOUSE, LOWTHER ST  
KENDAL, CUMBRIA

Postcode:

LA9 4UA

Website: [www.southlancashire.gov.uk](http://www.southlancashire.gov.uk)

*[Insert name of the licensing authority and the address of its principal office, followed by the address of its website]*

Information about the application is available from the licensing authority, including the arrangements for viewing the details of the application.

The following person connected with the applicant is able to give further information about the application:



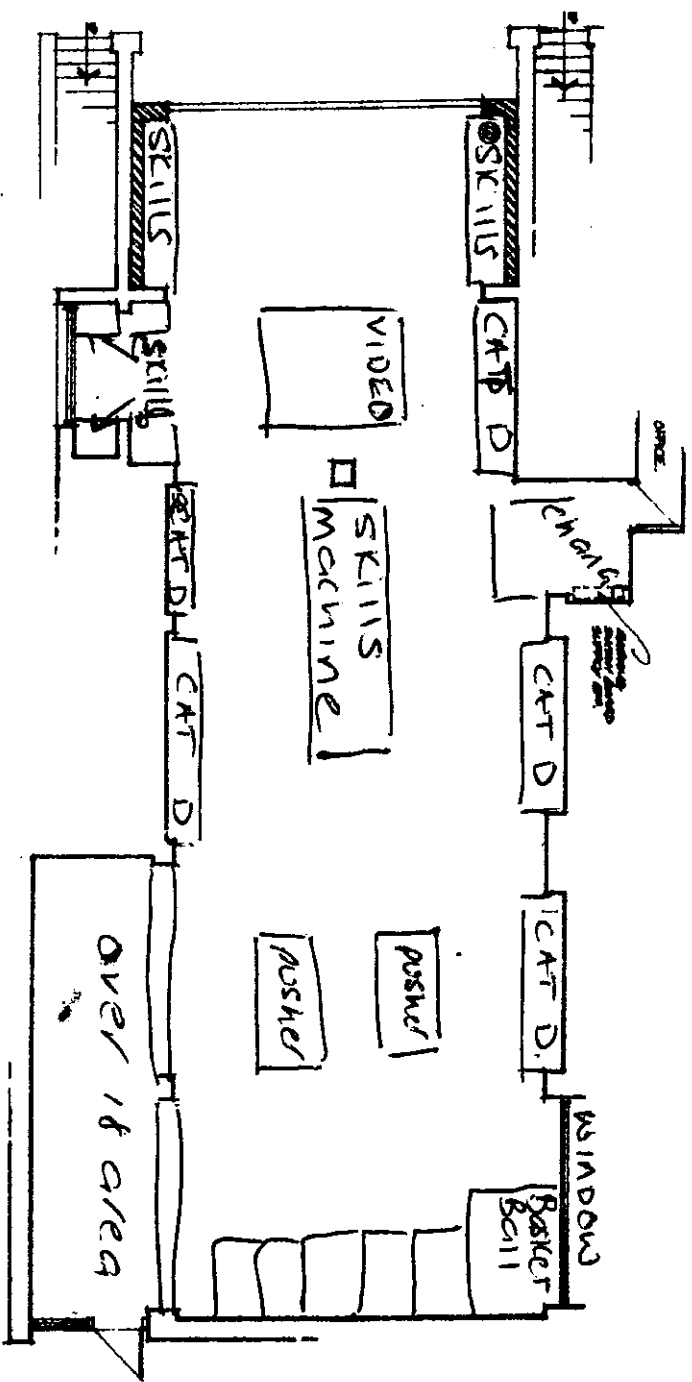
*[This entry is optional and is to be included if the applicant wishes to provide the name, telephone number and (if available) e-mail address of a person connected with the applicant who is able to answer questions and provide further information about the application.]*

**Any representations under section 161 of the Gambling Act 2005 must be made no later than the following date:**

*[Please insert last day on which representations may be made in relation to the application. The period for making representations is 28 days (inclusive) starting with the day on which the application for the premises licence was made to the licensing authority.]*

**GROUND FLOOR PLAN**  
1:100

SHOWING EXISTING AREAS AND EQUIPMENT PLUS NEW EXPANSION AT FRONT OF ARCADE (WALLS HATCHED).



89. FLOOR ARRANGEMENT  
ARCADE, AQUARIUM BUILDING  
GAMES ROOM, BARBERS

COMPUTATION PROPERTIES
DC/EA SCS
DATE
SCALE
1 TO 100



**NOTICE OF APPLICATION FOR A PREMISES LICENCE UNDER THE  
GAMBLING ACT 2005**

Notice is hereby given that: SCOTTALBION PROPERTIES LTD  
[Give the full name of the applicant(s)]

of the following address: AQUARIUS, 1 GIERE ROAD  
BOWNESS ON WINDERMERE  
CUMBRIA  
LA23 3HE

SOUTH LAKELAND  
DISTRICT COUNCIL  
RECEIVED  
13 NOV 2012  
REVS & BENS

is/are applying for a A. G. C.  
premises licence under section 159 of the Gambling Act 2005. [Insert kind of premises licence  
being applied for]

The application relates to the following premises:

Small area at back of amusement  
arcade. A premises within a premises.

[Give the trading name to be used at the premises, and the address of the premises (or, if none,  
give a description of the premises and their location)]

The application has been made to: SOUTH LAKELAND DISTRICT COUNCIL  
[Specify the name of the licensing authority to which the application has been made]

Information about the application is available from the licensing authority, including the  
arrangements for viewing the details of the application.

Any of the following persons may make representations in writing to the licensing authority about  
the application:

- A person who lives sufficiently close to the premises to be likely to be affected by the  
authorised activities
- A person who has business interests that might be affected by the authorised activities
- A person who represents someone in any of the above two categories.

Any representations must be made by the following date: 5/12/2012

**It is an offence under section 342 of the Gambling Act 2005 if a person, without reasonable  
excuse, gives to a licensing authority for a purpose connected with that Act information  
which is false or misleading.**