

27 APR 2017

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.

W/We KITTCH COMPANY LTD.

(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 **W/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 FORMER SUMMITREKS PREMISES² MAIN STREET <i>* please note that the landlord has applied to the Land Registry to change the name of the premises to 'The Shop'.</i>			
Post town	HAWKESHEAD	Postcode	LA22 0NT
Telephone number at premises (if any)			
Non-domestic rateable value of premises		£ 11,058.25	

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/limited liability partnership | <input checked="" type="checkbox"/> please complete section (B) |
| ii as a partnership (other than limited liability) | <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 | <input type="checkbox"/> please complete section (B) |
| d) a charity | <input type="checkbox"/> 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 (by ticking yes to one box below):

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		
Date of birth over		I am 18 years old or		<input type="checkbox"/>	Please tick yes
Nationality					
Current residential 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)	
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Surname		First names	
Date of birth over		I am 18 years old or <input type="checkbox"/> Please tick yes	
Nationality			
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	KITTCH COMPANY LTD.
Address	1 LOW YEWDAL COTTAGES COMISTON CUMBRIA LA21 8DF
Registered number (where applicable)	10585094
Description of applicant (for example, partnership, company, unincorporated association etc.)	LIMITED COMPANY
Telephone number (if any)	
E-mail address (optional)	

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
29	05	2017

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)

Please refer to additional page at the back of this application for more detail.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

N/A

What licensable activities do you intend to carry on from the premises?

(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all that apply

- | | |
|---|-------------------------------------|
| a) plays (if ticking yes, fill in box A) | <input checked="" type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input checked="" 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 checked="" type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input checked="" type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input checked="" type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input checked="" 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 7)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	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 4) <i>Occasionally, as part of Spoken Word + Poetry performances</i> <i>See section H.</i>		
Mon					
Tue					
Wed	19.00	21.00	State any seasonal variations for performing plays (please read guidance note 5)		
Thur					
Fri			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 6)		
Sat	12.00	17.00			
	19.00	22.00			
Sun	12.00	17.00			

B

Films Standard days and timings (please read guidance note 7)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors <input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Mon	19.00	22.30	Please give further details here (please read guidance note 4) Weekly screenings provided free for the entertainment of guests. A double bill encompassing one family friendly film followed by a screening for older audiences. Takes place upstairs in the events area.	
Tue	19.00	22.30		
Wed	19.00	22.30	State any seasonal variations for the exhibition of films (please read guidance note 5) Additional screenings may occur during special events/talks, such as part of Kendal Film Festival, or guest speakers may wish to show a film for information purposes.	
Thur	19.00	22.30		
Fri	19.00	22.30	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 6) As above.	
Sat	19.00	22.30		
Sun	19.00	22.30		

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Wed			
Thur			<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 6)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	
Day	Start	Finish	Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 4)	
Tue				
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)	
Thur				
Fri			<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 6)	
Sat				
Sun				

E

Live music Standard days and timings (please read guidance note 7)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3)	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 4)	
Mon			Live music performances taking place twice a month on Saturdays, and occasionally additional performances on Sundays. Mainly unamplified acoustic sessions. Takes place upstairs in the events area.	
Tue				
Wed				
Thur			State any seasonal variations for the performance of live music (please read guidance note 5) Additional performances on New Years Eve until midnight.	
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 6) As above.	
Sat	19.00	22.30		
Sun	19.00	22.00		

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	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 4) Unamplified background music for ambience and enjoyment of guests.		
Mon	9.00	23.00			
Tue	9.00	23.00	State any seasonal variations for the playing of recorded music (please read guidance note 5)		
Wed	9.00	23.00			
Thur	9.00	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 6)		
Fri	9.00	23.00			
Sat	9.00	23.00			
Sun	10.00	22.30			

G

Performances of dance Standard days and timings (please read guidance note 7)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 3)		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 4) <i>Occasionally as part of other existing events such as Spoken Word + Poetry events. See Section H1.</i>		
Mon					
Tue					
Wed	19.00	21.00	<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)		
Thur					
Fri					
Sat	12.00	17.00	<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 6)		
	19.00	22.00			
Sun	12.00	17.00			

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing Poetry + Spoken Word Performance. One Saturday per month. Art + Craft sessions for families. Weekly. Sat + Sun. Art Classes. Wednesday evenings. Art + Photography Exhibitions. One per month, displayed in the events area.	
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors <input checked="" type="checkbox"/>
Mon				Outdoors <input type="checkbox"/>
				Both <input type="checkbox"/>
Tue			Please give further details here (please read guidance note 4) see above.	
Wed	19.00	21.00		
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5) Additional family Art + Craft sessions during school hols.	
Fri				
Sat	19.00	22.00	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 (please read guidance note 6)	
	12.00	17.00		
Sun	12.00	17.00		

I

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	
			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 4)	
Mon				
Tue				
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)	
Thur				
Fri			<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 6)	
Sat				
Sun				

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for <u>consumption – please tick</u> (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5) New Years Eve only. until 01.00 AM.		
Mon	11.00	23.00			
Tue	11.00	23.00			
Wed	11.00	23.00			
Thur	11.00	23.00	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 6) New Years Eve only. until 01.00 AM		
Fri	11.00	23.00			
Sat	11.00	23.00			
Sun	12.00	22.30			

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name	LUKE DOMINIC BROWN
Date of bi	
Address	
Postcode	
Personal licence number (if known)	PA036969
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 9).

Films for restricted age groups (eg certificates 15/18) shown Fridays at 9pm as part of film double-bill.

No under 18's admitted on the premises after 9pm.

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	New Years Eve only. until 01.00AM
Mon	9.00	23.30	
Tue	9.00	23.30	
Wed	9.00	23.30	
Thur	9.00	23.30	<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 6) As above.
Fri	9.00	23.30	
Sat	9.00	23.30	
Sun	10.00	23.00	

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 10)

- Free water available at all times.
- CCTV surveillance in place.
- Challenge 25 proof of age provision.
- All staff trained to high standards of competence. Refresh training regularly.
- Display signage regarding ID checks, measures available, taxi services.
- Food + hot drinks such as coffee available later in the evening and not just daytime.
- Maintain regular contact with neighbouring businesses.

b) The prevention of crime and disorder

- Join Pubwatch scheme. Keep regular contact with neighbouring businesses to share news or relevant info. Maintain a means of communication with local police.
- No tolerance drugs policy and regular checks of all public areas (eg toilets)
- All staff trained in crime prevention, exposure + train staff in anti-discriminatory policy.
- Ensure responsible retailing when selling alcohol for consumption off site.
- No promotions that encourage excessive or irresponsible drinking.
- Smaller drinks measures available and low alcohol options on offer.

c) Public safety

- Designated Driver discounts offering money off hot + cold non-alcoholic drinks during certain evenings.
- Taxi numbers advertised on site and on website.
- Adequate crowd and noise level monitoring.
- Regularly clearing used glasses and bottles.
- Emergency lighting installed and fire safety guidelines enforced.
- Staff trained in first aid.
- Promote responsible drinking with literature and posters.

d) The prevention of public nuisance

- No late night (after 11pm) events or trade.
- Winding down period with lower music levels + brighter lights leading to closing.
- Use dedicated taxi firms and book on customers behalf.
- 'Leave Quietly' notices.
- Shorter trading hours on Sundays and Bank Holidays.
- Outdoor seating brought inside after closing.

e) The protection of children from harm

- No under 18's permitted in the premises after 9pm.
- All under 16's must be accompanied by an adult.
- BBFC classifications enforced for film screenings. Ensure all staff enforce + check ID's.
- Challenge 25 proof-of-age provision.
- Maintain a refunds book.

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. ☒
- ☒ [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15).

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 12). If signing on behalf of the applicant, please state in what capacity.

Declaration	<ul style="list-style-type: none"> [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15). The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15)
Signature	
Date	26/4/17
Capacity	Director.

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 13). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	
Capacity	

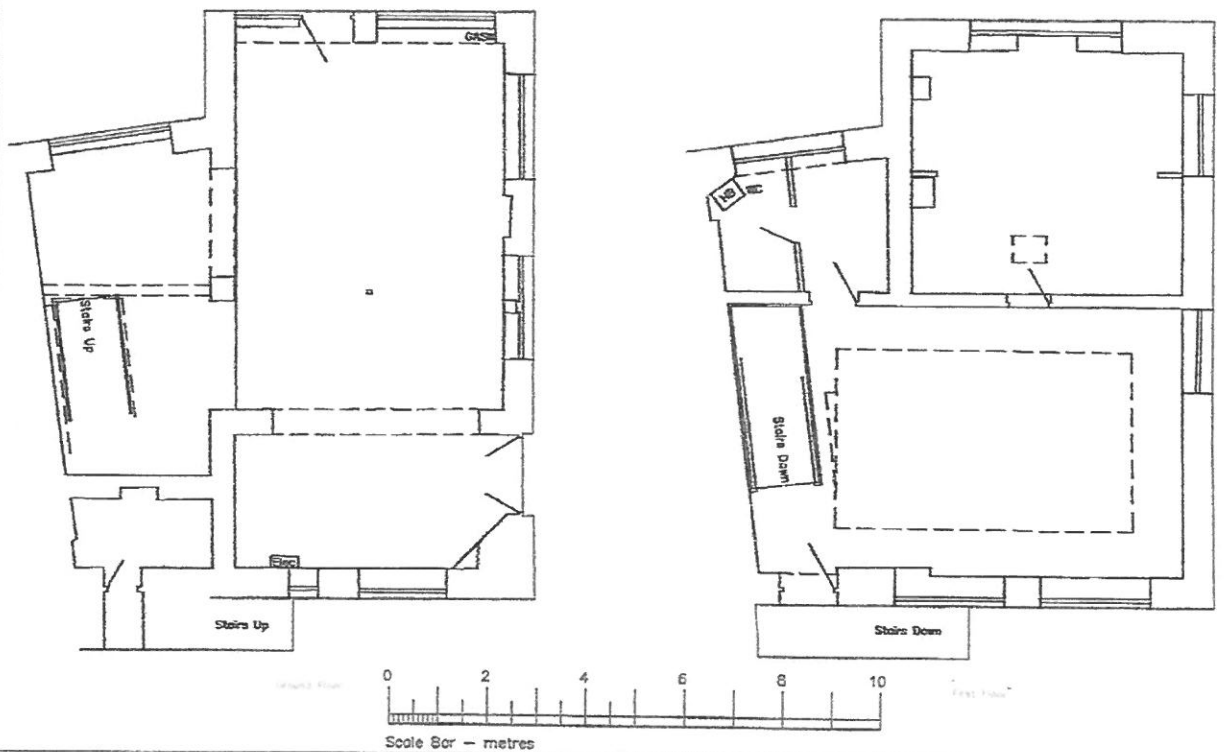
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)

Postcode

e-mail address (optional)

Notes for Guidance

- 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.
- In terms of specific regulated entertainments please note that:

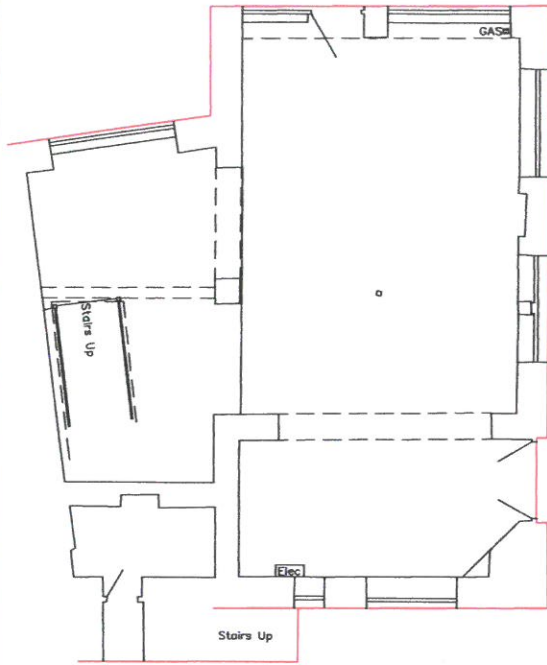


SPATIAL DATA LIMITED
Chartered Land Surveyors
3 Boundary Gate, Keston, Cambrid. CB3 9HT
Telephone: +44(0)1539 734400
E-mail: info@spatialdata.co.uk
URL: www.spatialdata.co.uk

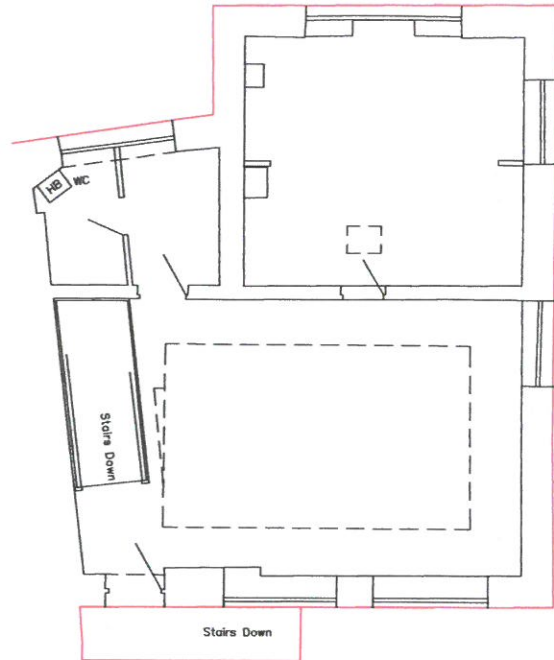
Client: Emerald Meadows
Project: The Square - Hockland
Location: Survey Area: 2011
Scale: 1:100 @ A4
Draw: N/A Date: 10/11/11

Revision: 1/11/11
Drawn: N/A





Ground Floor



First Floor



Scale Bar - metres

SPATIAL DATA LIMITED
Chartered Land Surveyors
3 Boundary Bank, Kendal, Cumbria, LA9 9BB
Telephone: +44(0)1539 734400
E-mail: info@spatialdata.ltd.com
URL: www.spatialdata.ltd.com

Client: Emma Watson
Project: The Square, Hawkshead.
Licence Survey: April 2017
Scale: 1:100 @ A4
Crew: NR Chk: NR Ref: KUY

Revision Notes:
Draft Plan

