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

Application for a minor variation to a premises licence or club premises certificate 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, especially Note 1.

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 in black ink. Use additional sheets if necessary.

Once completed please send your application to the relevant licensing authority. You may wish to keep a copy of the completed form for your records.

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(Insert name(s) of applicant)

being the premises licence holder(s)/club holding a club premises certificate, apply to vary a premises licence under section 41A/club premises certificate under section 86A of the Licensing Act 2003 for the premises described in Part 1 below.

Part 1 – Premises details

Postal address of premises (or, if none, ordnan	ce survey map reference, or description)	
3-4 Kelsick Road		
Post town	Postcode	
Ambleside	LA22 OBZ	

Telephone number at premises (if any)

Premises licence number/club premises certificate number

PL(A)029095

Brief description of premises (Please see Guidance Note 2)

Indian Restaurant and Takeaway

Part 2 - Applicant Details

I am/we are the premises licence holder/club premises certificate holder. (Please delete as appropriate)

Contact phone number in working hours (if any)

Applicant Postal address IF DIFFEREN	T FROM PREMISES ADDRESS	
Please provide cman address it you would	Postcode Id prefer us to contact you	

Part 3 – Proposed variation(s)

Please tick

Do you want the proposed variation to have effect as soon as possible? 🗹 Yes 🗌 No

DDMMYYYY

If not, from what date do you want the variation to take effect?

Do you want the proposed variation to have effect in relation to the introduction of the late night levy? (Please see Guidance Note 3)

Please describe the proposed variation(s) in detail in the box below and explain why you consider that they could not have an adverse effect on the promotion of any of the licensing objectives (See Guidance Note 1). This should include whether new or increased levels of licensable activities will be taking place indoors or outdoors (indoors may include a tent):

Details of proposed variation(s) (Please see Guidance Note 4)

I wish to move the bar from its existing position to the new position shown on the plan and it will be slightly larger. No emergency exits will be blocked and it will not cause any additional noise pollution Details of proposed variation(s) (Continued)

Part 4 - Operating Schedule

Please tick those parts of the Operating Schedule which would be subject to change if this application to vary was successful.

Please tick all that apply

Provision of regulated entertainment

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

(Note that this can only relate to reducing licensed hours, or moving them without any overall increase between 7am and 11pm)

Please tick to indicate you have enclosed the following:

I have enclosed the premises licence/club premises certificate

I have enclosed the relevant part of the premises licence/ club premises certificate

I have included a copy of the plan (this is necessary if the proposed variation will affect the layout)

If you have not ticked one of the previous three boxes, please explain why in the box below.

 \Box

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V

Reasons why you have not enclosed the premises licence/club premises certificate or relevant parts.

THE ORIGINAL WAS NOT PROVIDED BY THE SELLER.

Any further information to support your application. (See Guidance Note 5)

I do not believe that there will be any impact on the licensing objectives as this is a minor variation to the layout of the existing licensed area

CHECKLIST: Please tick to indicate agreement

٠	I have made or enclosed payment of the fee; or	Ζ
٠	I have not made or enclosed payment of the fee because this application has been made i relation to the introduction of the late night levy.	n
•	I have enclosed the plan, if appropriate, of the premises in scale [1mm to 100mm], unles otherwise agreed with the licensing authority.	s Z
•	I have enclosed the premises licence/club premises certificate or relevant part of it or provided an explanation.	6
•	I understand that if I do not comply with the above requirements my application will be rejected.	1
•	I understand that I must now advertise my application for a continuous period beginning the first working day after the day on which the application was given to the relevant licensing authority and ending at the expiry of the ninth consecutive working day after th day.	

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.

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Part 5 – Signatures and Contact Details (See Guidance New Contact Details

Premises Lic solicitor or of please state y		arrent premises licence holder) or applicant's lance Note 7). If signing on behalf of the applicant, are authorised to sign:
Signature		
Date	26th BANUARY	2017
Capacity	Souchol.	

Where the premises licence is jointly held, signature of 2nd applicant (the current premises licence holder) or 2nd applicant's solicitor or other authorised agent (See Guidance Note 8). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	
Capacity	

Where the premises are a club

I (insert full name) make this application on behalf of the club and have authority to bind the club.

Signature	
Date	
Capacity	

Contact name (where not previously given) and address for correspondence associated with this application. (See Guidance Note 9)		
Davenport and Scott Solicitors Lancaster	House Lake Road	
Post town Ambleside	Postcode LA22 OAD	
Telephone number (if any)	If you would prefer us to correspond with you by email your email address (optional)	
015394 31919	info@davenport_scott.co.uk	

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