

South Lakeland District Council, South Lakeland District Council Offices, South Lakeland House,  
Lowther Street, Kendal, Cumbria, LA9 4DQ

**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.

I/We MEHMET NURI GILGIL

*(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 <b>5-7 NEW MARKET STREET</b>			
<b>Post town</b>	ULVERSTON	<b>Postcode</b>	<b>LA12 7LQ</b>
Telephone number at premises (if any)		<b>01229 585 585</b>	
Non-domestic rateable value of premises		<b>£5,100</b>	

**Part 2 - Applicant Details**

Please state whether you are applying for a premises licence as

Please tick as appropriate

- |    |   |                             |
|----|---|-----------------------------|
| a) | an individual or individuals *                  | please complete section (A) |
| b) | a person other than an individual *             |                             |
|    | i. as a limited company                         | 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 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	Mrs	Miss	Ms	Other Title (for example, Rev)	
<b>Surname</b> GILGIL			<b>First names</b> MEHMET NURI		
I am 18 years old or over				Please tick yes	
Current postal address if different from premises address					
Post town				Postcode	
<b>Daytime contact telephone number</b>			01229 585 585		
<b>E-mail address (optional)</b>					

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
I am 18 years old or over				Please tick yes	
Current postal address if different from premises address					
Post town				Postcode	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**(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
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

### Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
0	5	05
2	02	1

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)

Entrance door for customers to enter and exit from. Inside, customer waiting and food ordering area, and an area at the end of the counter for waiting for orders. There is a main long counter and food is prepared from behind the counter, LED lighting from a suspended ceiling. Service of hot and cold food, as well as cold drinks. No alcohol is served from the premises. Employees access the premises via a rear door.

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

**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**

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of a play take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
				Both	
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Tue					
Wed			<b><u>State any seasonal variations for performing plays</u></b> (please read guidance note 4)		
Thur					
Fri			<b><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></b> (please read guidance note 5)		
Sat					
Sun					

## B

Films Standard days and timings (please read guidance note 6)			<b><u>Will the exhibition of films take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
				Both	
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Tue					
Wed					
Thur			<b><u>State any seasonal variations for the exhibition of films</u></b> (please read guidance note 4)		
Fri					
Sat			<b><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></b> (please read guidance note 5)		
Sun					

C

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			<b><u>Please give further details</u></b> (please read guidance note 3)
Day	Start	Finish	
Mon			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 4)
Tue			
Wed			<b><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></b> (please read guidance note 5)
Thur			
Fri			
Sat			
Sun			

# D

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Tue					
Wed			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 4)		
Thur					
Fri			<b><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></b> (please read guidance note 5)		
Sat					
Sun					

# E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
				Both	
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Tue					
Wed					
Thur			<b><u>State any seasonal variations for the performance of live music</u></b> (please read guidance note 4)		
Fri					
Sat			<b><u>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</u></b> (please read guidance note 5)		
Sun					

**F**

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
				Both	
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Tue					
Wed			<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 4)		
Thur					
Fri			<b><u>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</u></b> (please read guidance note 5)		
Sat					
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	
					Outdoors	
Day	Start	Finish			Both	
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

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> 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	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	
Mon				Outdoors	
				Both	
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed					
Thur			<b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 4)		
Fri					
Sat			<b><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></b> (please read guidance note 5)		
Sun					

# I

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
				Both	
Mon	23:00	00:00	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Tue	23:00	00:00			
Wed	23:00	00:00	<b><u>State any seasonal variations for the provision of late night refreshment</u></b> (please read guidance note 4)		
Thur	23:00	00:00			
Fri	23:00	01:30	<b><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></b> (please read guidance note 5)		
Sat	23:00	01:30			
Sun	23:00	00:00			

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b><u>Will the supply of alcohol be for consumption – please tick</u></b> (please read guidance note 7)	On the premises	
				Off the premises	
				Both	
Day	Start	Finish	<b><u>State any seasonal variations for the supply of alcohol</u></b> (please read guidance note 4)		
Mon					
Tue					
Wed					
Thur					
Fri					
Sat					
Sun					
			<b><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></b> (please read guidance note 5)		

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

Name	
Address	
Postcode	
Personal licence number (if known)	
Issuing licensing authority (if known)	



**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)**

1. The controls and measures we have in place, seek to ensure the physical safety of staff and customers using the premises.
2. The premises complies with all fire safety controls.
3. The premises complies with all food safety regulations.
4. The premises is used and managed in a manner that restricts noise, light pollution, noxious smells and litter.

**b) The prevention of crime and disorder**

- 1 Incident register to be kept and updated by the manager on-site at any given time.
- 2 Soft drinks only served and not glass containers (only plastic or tin cans).
- 3 Customers carrying open or sealed bottles or glasses will not be admitted to the premises at any time.
- 4 Bins for collection or empty bottles will not be accessible to members of the public.
- 5 CCTV is installed.
- 6 Employees uniform is clothing that can be easily and clearly identifiable on C.C.T.V.
- 7 Recordings will be maintained for an appropriate period of time to be agreed with the Police and the Licensing Authority.
- 8 If the C.C.T.V. equipment fails, then Police and the Licensing Authority will be informed immediately by telephone and immediate steps will be taken to put the equipment back into working order.
- 9 A notice is displayed at the entrance to the premises advising that C.C.T.V. is in operation.
- 10 At least one C.C.T.V. camera is in operation at the front of the premises at all times when the premises is in use.
- 11 All instances of crime and disorder will be reported to the Police as soon as reasonably practicable.
- 12 We have a capacity limit of 13 to prevent overcrowding in the premises. The designated manager will ensure this number is not breached.

**c) Public safety**

- 1 We have conducted a suitable Fire Risk Assessment at the premises and implemented the necessary control measures.
- 2 All exit doors are easily operable without the use of a key, card, code or similar means.
- 3 Exit doors are regularly checked to ensure they function satisfactorily.
- 4 Records of all these checks are kept and can be produced on request.
- 5 All removable security fastenings are removed whenever the premises are open to the public or staff.
- 6 All fire doors are maintained unobstructed and effectively self-closing and will not be held open other than with approved devices.
- 7 Fire resistant doors to service shafts, ducts and cupboards are kept locked shut.
- 8 Step and stair edges are appropriately highlighted so as to be conspicuous.
- 9 Notices detailing the actions to be taken in the event of fire or other emergency are prominently displayed and maintained in good condition.
- 10 Access is provided for emergency vehicles and kept clear and free from obstruction at all times.
- 11 All fire exits and means of escape are signed in accordance with BS5499: Part 1: Specification for Fire Safety Signs : 1990.
- 12 An evacuation policy is in place that is to the satisfaction of the Fire Authority.

- 13 All staff members have been trained in fire and emergency evacuation procedures.
- 14 Wall and ceiling finishes are fire resistant to the appropriate standard.
- 15 Exit doors open outwards or are secured in the open position if this is not the case.
- 16 Adequate and appropriate First Aid equipment and materials are available on the premises.
- 17 In the absence of adequate daylight suitable and sufficient artificial lighting is provided and maintained in any area accessible to the public.
- 18 Fire safety signs are adequately illuminated.
- 19 Emergency lighting is installed and regularly maintained.
- 20 Emergency lighting batteries are fully charged before the admission of the public.
- 21 The premises have current certificates of inspection for all portable fire fighting equipment. An inspection is carried out every six months and new certificates will be obtained at these intervals.
- 22 The premises have a current certificate of inspection for the fire detection alarm. An inspection is carried out every six months and a new certificate will be obtained at these intervals.
- 23 Any temporary electrical installation being used is checked before use by a N.I.C.E.I.C. or E.C.A. electrician and a temporary electrical installation report or a certificate of compliance with British Standard BS7909: 1998 will be obtained.
- 24 We operate a complete no smoking policy at the premises.

d) The prevention of public nuisance

- 1 All windows are always closed to minimise the breakout of noise.
- 2 Prominent, clear and legible notices are displayed at all exits requesting customers to respect the needs of local residents and to leave the premises and the area quietly.
- 3 All ventilation and extract systems are designed and maintained so as to prevent noxious smells causing a nuisance to nearby properties.
- 4 Refuse receptacles are cleaned with disinfectant at least weekly.
- 5 The premises has a waste collection contract with Cumbria Waste who remove waste.
- 6 Staff undertake a litter pick to a distance of 3-5 metres around the premises daily.

e) The protection of children from harm

- 1 Alcohol is not sold on the premises.
- 2 The premises has clear signs displayed for restricting alcohol from being brought onto the premises by customers.

**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	[REDACTED]
Date	19 May 2021
Capacity	Solicitor acting on behalf of the Applicant. Catherine Cross, Solicitor, for and on behalf of Brodies LLP

**For joint applications, signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> 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) Brodies LLP 110 Queen Street			
Post town	<b>Glasgow</b>	Postcode	<b>G1 3BX</b>
Telephone number (if any)	[REDACTED]		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) Catherine.Cross@brodies.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.