

Application to vary a premises licence under the Licensing Act 2003

We **Bluebird Inns Limited**

(Insert name of applicant)

being the premises licence holder, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number: **PL(A)040916**

Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description:

The Lake View Bar & Grill Glebe Road, Bowness-On-Windermere

Post town	Windermere	Postcode	LA23 3HE
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Non-domestic rateable value of premises	£69,500.00
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Part 2 – Applicant details

Daytime contact telephone number	[REDACTED]		
Current postal address if different from premises address	[REDACTED]		
Post town	[REDACTED]	Postcode	[REDACTED]

Part 3 - Variation

Please tick as appropriate

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

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

DD	MM	YYYY
0	6	102021

Do you want the proposed variation to have effect in relation to the introduction of the late night levy? Yes No

Please describe briefly the nature of the proposed variation: **The inclusion of an ancillary bar and function room, which is intended to be licensed for weddings, above the main bar. All licensable activities, hours of opening & operation and conditions to remain the same.**

Part 4 Operating Schedule

Please complete those parts of the Operating Schedule below which would be subject to change if this application to vary is successful.

- Provision of regulated entertainment Please tick all that apply
- 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

J

Supply of alcohol Standard days and timings			Will the supply of alcohol be for consumption – please tick	Both	✓			
Mon	10:00	24:00	<u>State any seasonal variations for the supply of alcohol</u> Not Applicable					
Tue	10:00	24:00						
Wed	10:00	24:00						
Thur	10:00	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> Not Applicable		
Fri	10:00	24:00						
Sat	10:00	24:00						
Sun	10:00	24:00						

K

<p>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:</p> <p style="text-align: center;">Not Applicable</p>

L

Hours premises are open to the public Standard days and timings			State any seasonal variations Not Applicable
Mon	10:00	24:00	<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> Not Applicable
	00:00	00:30	
Tue	10:00	24:00	
	00:00	00:30	
Wed	10:00	24:00	
	00:00	00:30	
Thur	10:00	24:00	
	00:00	00:30	
Fri	10:00	24:00	
	00:00	00:30	
Sat	10:00	24:00	
	00:00	00:30	
Sun	10:00	24:00	
	00:00	00:30	

Please identify those conditions currently imposed on the licence which you believe could be removed as a consequence of the proposed variation you are seeking.
Not Applicable

Please tick as appropriate

- I have enclosed the premises licence ✓
- I have enclosed the relevant part of the premises licence ✓

M Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

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

AS PER CURRENT LICENCE

b) The prevention of crime and disorder

AS PER CURRENT LICENCE

c) Public safety

AS PER CURRENT LICENCE

d) The prevention of public nuisance

AS PER CURRENT LICENCE

e) The protection of children from harm

AS PER CURRENT LICENCE

Checklist:



Please tick to indicate agreement






- I have made or enclosed payment of the fee; or ✓
- I have not made or enclosed payment of the fee because this application has been made in relation to the introduction of the late night levy.
- I have sent copies of this application and the plan to responsible authorities and others where applicable. ✓
- I understand that I must now advertise my application. ✓
- I have enclosed the premises licence or relevant part of it or explanation. ✓
- I understand that if I do not comply with the above requirements my application will be rejected. ✓

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.

Part 5 – Signatures

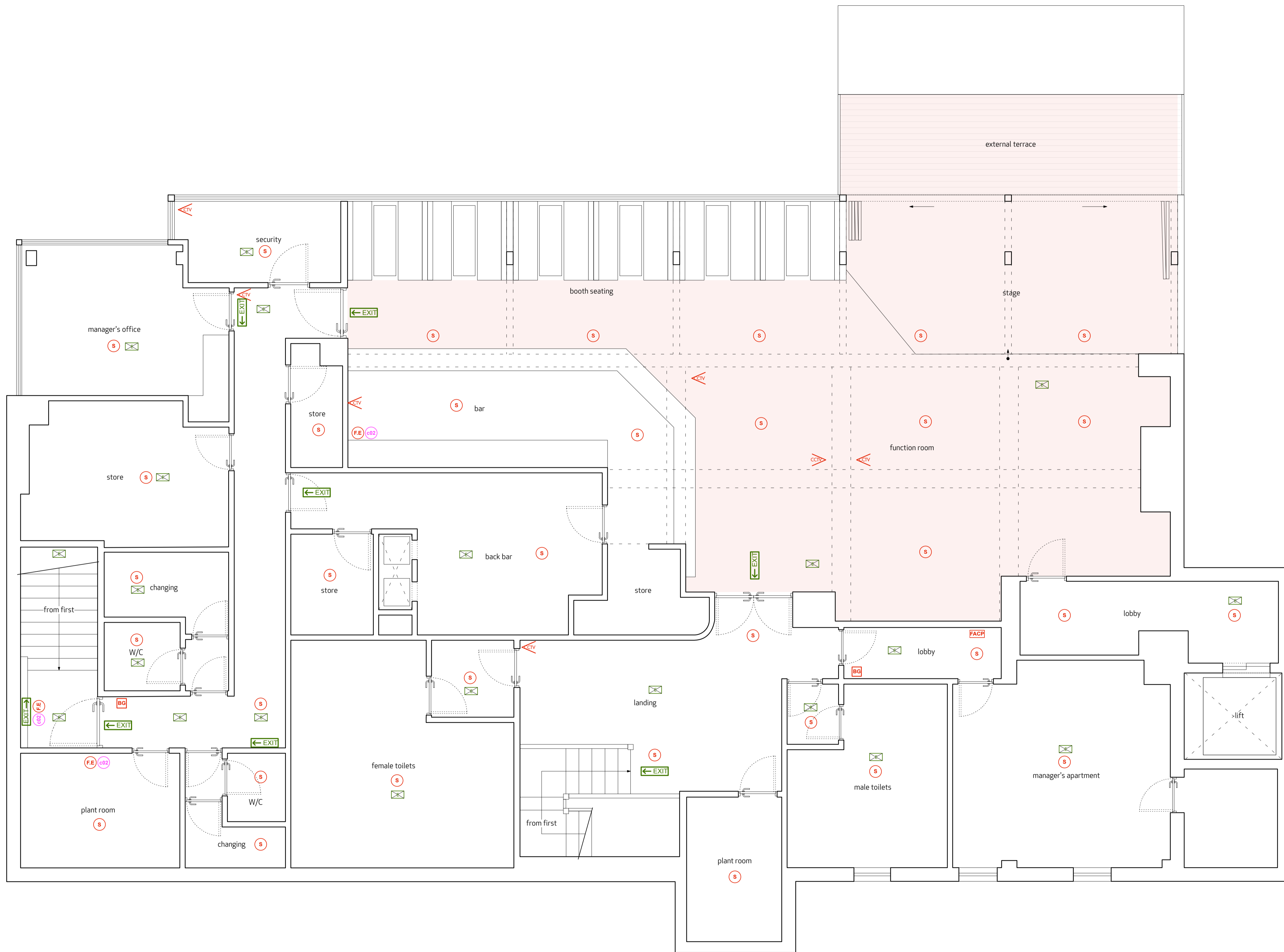
Signature of applicant's duly authorised agent. If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	7th September 2021
Capacity	

Address for correspondence associated with this application: 			
Post town		Post code	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) 			

Key

- Smoke detector (note, all S.D minimum 520mm from walls/beam)
- Break glass call point
- Fire fighting equipment
- Emergency Exit
- Fire alarm control panel
- CCTV
- Emergency light
- *Licensed area shown in red/pink hatch



1m
0 1 2
LAKE VIEW
001. second floor plan 1:50 @ A1

Do not scale from this drawing
All dimensions are to be checked on site prior to commencing works on site. Discrepancy found between information given on this drawing and that given elsewhere or recorded on site shall be notified immediately to the project architect in writing.