

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

[REDACTED]

(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 Bouthwaite Barn Stockghyll Lane Ambleside Cumbria			
Post town	Ambleside	Postcode	LA22 9LG

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£ Not yet known (see attached note)

Part 2 - Applicant details

Please state whether you are applying for a premises licence as **appropriate** **Please tick as appropriate**

a)	an individual or individuals *	<input checked="" type="checkbox"/>	please complete section (A)
b)	a person other than an individual *	<input type="checkbox"/>	
	i as a limited company/limited liability partnership	<input 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		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 (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	Mrs <input checked="" type="checkbox"/>	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
[REDACTED]			[REDACTED]		
[REDACTED]			[REDACTED]		
[REDACTED]			[REDACTED]		
[REDACTED]			[REDACTED]		
[REDACTED]			[REDACTED]		
[REDACTED]			[REDACTED]		
[REDACTED]			[REDACTED]		
[REDACTED]			[REDACTED]		
[REDACTED] Home Office online right to work checking service), the 'share code' provided to the applicant by that service (please see note 15 for information)					

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Second individual applicant (if applicable)

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
Date of birth over		I am 18 years old or		Please tick yes	
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service: (please see note 15 for information)					

(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 9	0 6	2 0 2 3

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) The premises is a converted barn with 3 levels inside. There is a gate which opens onto a small patio area where we plan to have some seating. The patio leads to the main door which opens into the ground floor area where there is a service counter and some seating. Toilets are also situated on the ground floor level. Stairs lead upto a further seating area and kitchen. Further stairs lead to the top floor area with seating.

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 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)	
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)	

<u>Provision of late night refreshment</u> (if ticking yes, fill in box I)	
<u>Supply of alcohol</u> (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	
Day	Start	Finish		Outdoors	
				Both	
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			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					
Sun					

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	
				Outdoors	
				Both	
Day	Start	Finish			
Mon	-----		Please give further details here (please read guidance note 4)		
Tue	-----				
Wed	-----		State any seasonal variations for the exhibition of films (please read guidance note 5)		
Thur	-----				
Fri	-----		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)		
Sat	-----				
Sun	-----				

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			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Tue			
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)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
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	
				Outdoors	
				Both	
Day	Start	Finish			
Mon	.....	.....	Please give further details here (please read guidance note 4)		
Tue	.....	.....	
Wed	.....	.....	State any seasonal variations for the performance of live music (please read guidance note 5)		
Thur	.....	.....	
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)		
Sat	.....	.....	
Sun	.....	.....	

F

Recorded music Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
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 playing of recorded music</u> (please read guidance note 5)		
Thur	.....	.....	<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> (please read guidance note 6)		
Fri	.....	.....	
Sat	.....	.....	
Sun	.....	.....	

G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
Mon	-----	-----		Please give further details here (please read guidance note 4)	Both
Tue	-----	-----			
Wed	-----	-----	State any seasonal variations for the performance of dance (please read guidance note 5)		
Thur	-----	-----			
Fri	-----	-----	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 (please read guidance note 6)		
Sat	-----	-----			
Sun	-----	-----			

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

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	
					Outdoors	
Day	Start	Finish			Both	
Mon			<u>Please give further details here</u> (please read guidance note 4)			
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 consumption – please tick (please read guidance note 8)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Mon	12.00	23.00			
Tue	12.00	23.00			
Wed	12.00	23.00			
Thur	12.00	23.00			
Fri	12.00	23.00			
Sat	12.00	23.00			
Sun	12.00	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)		
			Service times will normally be 12.00 – 17.00 but the timings opposite allow for occasional private dinners/functions throughout the year.		

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	██████████
Date of birth	██████████
Address	██████████ ██████████ ██████████
Postcode	██████████
Personal licence number (if known)	Not received yet
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).

NONE

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	
Mon	9.00	00.00	
Tue	9.00	00.00	
Wed	9.00	00.00	
Thur	9.00	00.00	
Fri	9.00	00.00	
Sat	9.00	00.00	
Sun	9.00	00.00	

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 (please read guidance note 6)

Opening times will normally be 9.00 – 17.00 but the timings opposite allow for occasional private dinners/functions throughout the year.

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)

Designated Premises Supervisor nominated
Sufficient number of trained staff on the premises at all times
Regular training of staff
Adherence to 4 objectives as below

b) The prevention of crime and disorder

Provision of CCTV:

- A digital, colour, cctv system is installed to cover the premises and recorded coverage will include all internal and external areas to where the public have access to consume alcohol
- It will be maintained, working and recording at all times when the premises are open
- The recordings will be of good evidential quality to be produced in court or other such hearing and of sufficient quality to permit the facial identification of all individuals entering the premises
- Copies of the recordings will be made available for any responsible authority within 48 hours upon request subject to data protection requirements
- Copies of the recordings will display correct date and time
- Manger will ensure that there is always a member of staff available that can download evidence from the CCTV system at the request of the police or responsible authority

Staff Training:

- All staff will be trained at the start of their employment and all training will be documented regarding staff's obligation under the Licensing Act in respect of:
 - Retail sale of alcohol
 - Age verification policy
 - Conditions attached to Premises Licence
 - Permittable Licensable activities
 - Licensing Objectives
 - Opening times of the venue
- With such training documented records shall be kept for a minimum of 1 year and will be made available immediately on request from any responsible authority. Documented training will be refreshed on a regular basis, at no more than 12 month intervals
- A Refusals Register and Incident Report Register will be kept. Such documents will record incidents of staff refusals to serve alcohol to under age or drunk customers, as well as incidents of any anti-social behaviour and ejections from the premises. Any seizure of drugs/weapons or fake identification will also be recorded
- Both refusals and Incident Report registers will be kept for at least 1 year and they will be made available immediately upon a reasonable request from any Responsible Authority.
- We will actively participate in any local pub watch scheme
- There will be a written drugs policy agreed with Cumbria Constabulary for the premises relating to drugs found on persons or on the premises. The premises will operate a lockable drugs box and the contents will be passed to Cumbria Police at the earliest opportunity.

c) Public safety

I will, or staff authorised by me will check the premises before it opens to the public to ensure there are no risks to customers and all safety precautions are in place
 I will ensure that all staff receive appropriate training about emergency and general safety precautions and procedures
 I will ensure that all staff are aware of their social and legal obligations and their responsibilities regarding the sale of alcohol.
 All bottles, glasses and rubbish will be removed from public areas on regular and frequent basis.
 The fire safety measures provided on the premises will be maintained in good working order and their adequacy will be determined on a regular basis, by carrying out a fire risk assessment as required by, and in accordance with the Regulatory Reform (Fire Safety Order 2005.
 An adequate and appropriate supply of first aid equipment and materials will be made available on the premises. Appropriate staff will be trained in basic First Aid and there will always be a trained First Aider on site.

d) The prevention of public nuisance

Suitable and conspicuous notices will be displayed at the entrance and exit requesting customers to minimize noise and when smoking or leaving the premises.
 Regular assessment of noise levels – keep windows and external doors closed after 21.00 and as necessary to limit noise emission from premises.
 Ensure extraction fans are maintained with regards to noise/odour.

e) The protection of children from harm

Children will only be admitted in line accordance with licencing laws.
 We will operate a Challenge 25 Age Verification Policy and display prominent signage at the point of sale indicating that the Challenge 25 scheme is in operation.
 Only the following proof of age identification shall be accepted: current passport, photo card Driving Licence or identification carrying the PASS logo or military id (until we are able to adopt other effective identification technology, such as thumb print or pupil recognition.
 Staff will be trained appropriately in terms of the above policy.

Checklist:

Please tick to indicate agreement

<input checked="" type="checkbox"/>	I have made or enclosed payment of the fee.	X
<input checked="" type="checkbox"/>	I have enclosed the plan of the premises.	✓
<input type="checkbox"/>	I have sent copies of this application and the plan to responsible authorities and others where applicable.	
<input type="checkbox"/>	I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.	
<input checked="" type="checkbox"/>	I understand that I must now advertise my application.	✓

AWAITING RATEABLE VALUE

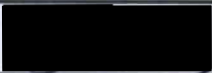
<ul style="list-style-type: none"> • I understand that if I do not comply with the above requirements my application will be rejected. • [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15). 		 ✓ ✓
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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.

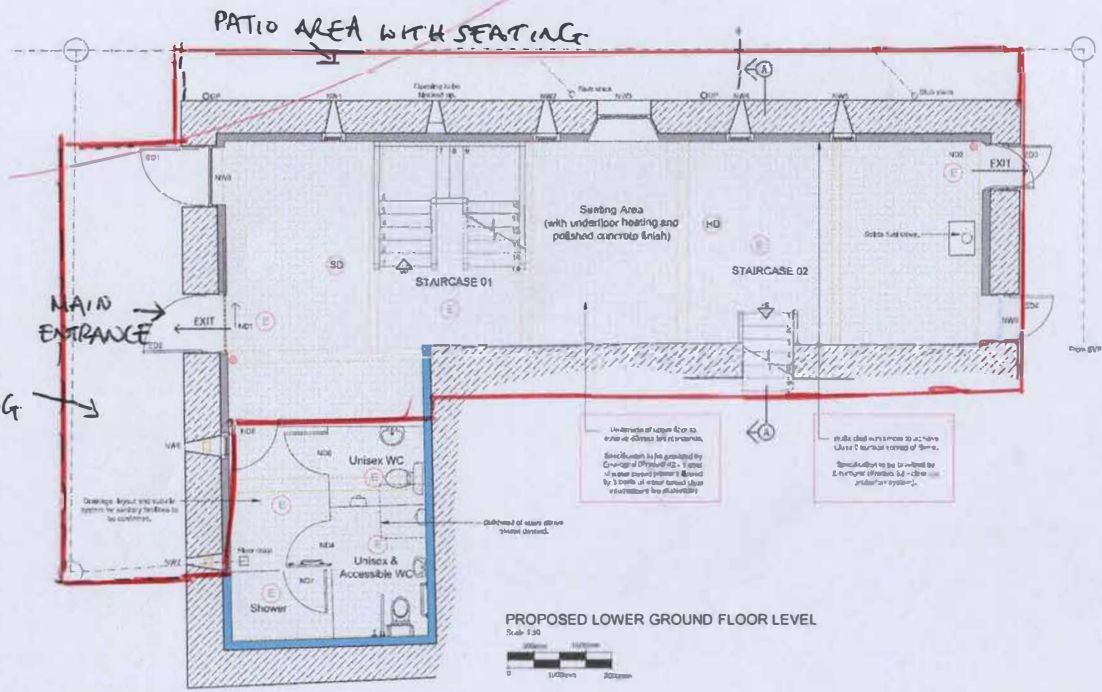
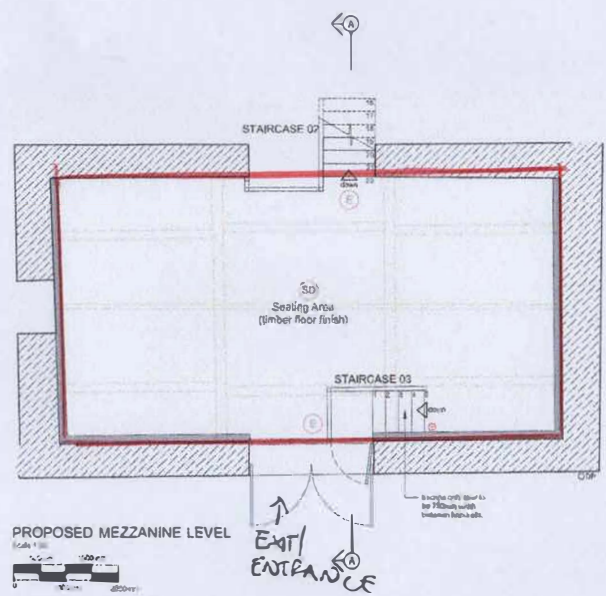
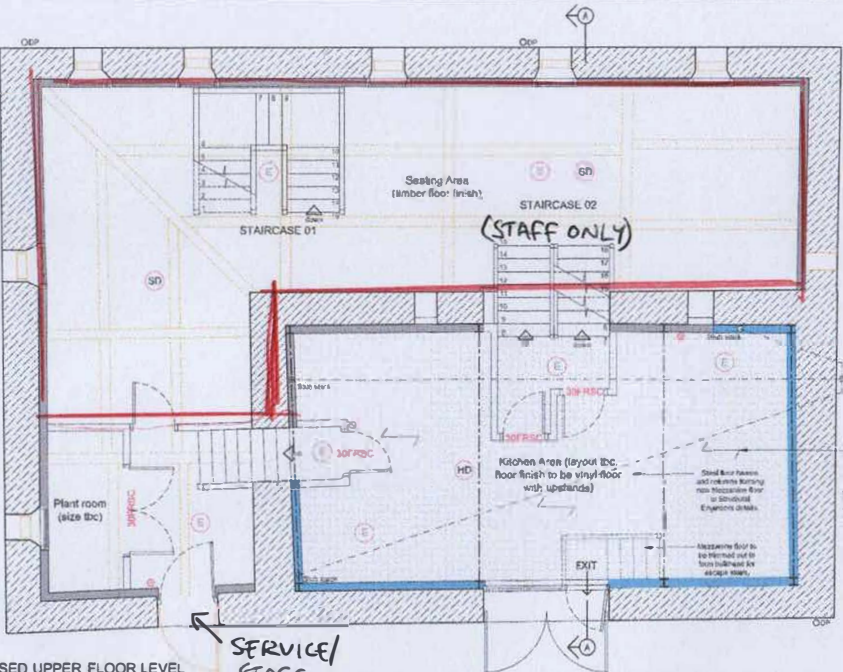
It is an offence under Section 24b of the Immigration Act 1971 for a person to work when they know, or have reasonable cause to believe, that they are disqualified from doing so by reason of their immigration status. Those who employ an adult without leave or who is subject to conditions as to employment 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, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)
Signature	
Date	10/5/23
Capacity	

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.**



Licensable area

11	Fire protection requirements	20/7/21
12	Fire risk assessments	24/6/21
13	Building Control issues	22/6/21
A	Cost issues	22/2/21
14	Reasonable	1/1/21

Site location
Grove Farm Barn
 Stockghyll Lane
 Ambleside
 Cumbria
 LA22 9LG

Project
 Proposed conversion of barn into Cafe.

Drawing title
 Proposed floor plans.

MVC Design Ltd
 ARCHITECTURAL DESIGN

Proj No.	MVC615-02	Date	
Date	22/2/21	Sheet	D
Scale	As shown at A1		

