APPENDIX 1



Chesterfield Application for a premises licence Licensing Act 2003

For help contact licensing@chesterfield.gov.uk Telephone: 01246 345345

* required information

Section 1 of 19			
You can save the form at any time and resume it later. You do not need to be logged in when you resume.			
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.	
Your reference		You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.	
Are you an agent acting on be Yes N	half of the applicant? Io	Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.	
Applicant Details			
* First name	Stephen		
* Family name	Eyre		
* E-mail	sceyre@btinternet.com		
Main telephone number	07838375647	Include country code.	
Other telephone number			
Indicate here if you would prefer not to be contacted by telephone			
Are you:			
 Applying as a business of 	or organisation, including as a sole trader	A sole trader is a business owned by one	
 Applying as an individual 		person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.	

Continued from previous page			
Your Address		Address official correspondence should be	
* Building number or name	6	sent to.	
* Street	Stanford Way]	
District	Walton		
* City or town	Chesterfield]	
County or administrative area]	
* Postcode	S42 7NH		
* Country	United Kingdom]	
Section 2 of 19			
PREMISES DETAILS			
	ply for a premises licence under section 17 of t he premises) and I/we are making this applicat of the Licensing Act 2003.		
Premises Address			
Are you able to provide a post	al address, OS map reference or description of	the premises?	
Address	p reference O Description		
Postal Address Of Premises			
Building number or name	5]	
Street	Breckland Road		
District	Walton]	
City or town	Chesterfield]	
County or administrative area	Derbyshire		
Postcode	S40 3LJ		

Country

Further Details

Telephone number	
Non-domestic rateable value of premises (£)	5,300

United Kingdom

Section 3 of 19			
APPL	ICATION DETAILS		
In wh		ing for the premises licence?	
	An individual or individuals		
	A limited company		
	A partnership		
	An unincorporated assoc	ciation	
	A recognised club		
	A charity		
	The proprietor of an edu	cational establishment	
	A health service body		
		ed under part 2 of the Care Standards Act an independent hospital in Wales	
	A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England		
	The chief officer of police of a police force in England and Wales		
	Other (for example a statutory corporation)		
Confirm The Following			
\square	I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities		
	I am making the application pursuant to a statutory function		
	 I am making the application pursuant to a function discharged by virtue of Her Majesty's prerogative 		
Secti	on 4 of 19		
INDI	VIDUAL APPLICANT DET	AILS	
	licant Name e name the same as (or sir	nilar to) the details given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as required
•			Select "No" to enter a completely new set of
First	First name Stephen		
Fami	amily name Eyre		
ls the	Is the applicant 18 years of age or older?		

Yes

⊖ No

Continued from previous page			
Applicant Postal Address			
	similar to) the address given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as	
Yes	○ No	required. Select "No" to enter a completely new set of details.	
Building number or name	6		
Street	Stanford Way		
District	Walton		
City or town	Chesterfield		
County or administrative area			
Postcode	S42 7NH		
Country	United Kingdom		
Applicant Contact Details			
••	ne as (or similar to) those given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as	
• Yes	⊖ No	required. Select "No" to enter a completely new set of details.	
E-mail	sceyre@btinternet.com		
Telephone number	07838375647		
Other telephone number			
	Add another applicant]	
Section 5 of 19			
OPERATING SCHEDULE			
When do you want the premises licence to start?	15 / 04 / 2017 dd mm yyyy		
If you wish the licence to be valid only for a limited period, when do you want it to end dd mm yyyy			
Provide a general description of 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.			
Micropub selling alcoholic and	soft drinks.		

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If 5,000 or more people are	
expected to attend the premises at any one time,	
state the number expected to	
attend	
Section 6 of 19	
PROVISION OF PLAYS	
Will you be providing plays?	
·	No
Section 7 of 19	
PROVISION OF FILMS	
Will you be providing films?	
⊖ Yes (No
Section 8 of 19	
PROVISION OF INDOOR SPORT	TING EVENTS
Will you be providing indoor sp	orting events?
⊖ Yes (No
Section 9 of 19	
PROVISION OF BOXING OR WR	ESTLING ENTERTAINMENTS
Will you be providing boxing or	wrestling entertainments?
⊖ Yes (• No
Section 10 of 19	
PROVISION OF LIVE MUSIC	
Will you be providing live music	?
⊖ Yes (No
Section 11 of 19	
PROVISION OF RECORDED MU	SIC
Will you be providing recorded	music?
⊖ Yes (No
Section 12 of 19	
PROVISION OF PERFORMANCE	S OF DANCE
Will you be providing performation	nces of dance?
⊖ Yes (No
Section 13 of 19	
PROVISION OF ANYTHING OF A	A SIMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF
Will you be providing anything performances of dance?	similar to live music, recorded music or
	No

Section 14 of 19	
LATE NIGHT REFRESHMENT	
Will you be providing late night refreshment?	
○ Yes	
Section 15 of 19	
SUPPLY OF ALCOHOL	
Will you be selling or supplying alcohol?	
Standard Days And Timings	
MONDAY Give timings in 24 hour clock.	
Start 11:00 End (e.g., 16:00) and only give details for the	
Start End 22:30 of the week when you intend the prem	ises
TUESDAY	
Start 11:00 End	
Start End 22:30	
WEDNESDAY	
Start 11:00 End	
Start End 22:30	
THURSDAY	
Start 11:00 End	
Start End 22:30	
FRIDAY	
Start 11:00 End	
Start End 22:30	
SATURDAY	
Start 11:00 End	
Start End 22:30	
SUNDAY	
Start 11:00 End	
Start End 22:00	

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Continued from previous page		If the cale of alcohol is for consumpti	on on
Will the sale of alcohol be for c	 Off the premises Off the premises Bo 	If the sale of alcohol is for consumption the premises select on, if the sale of a is for consumption away from the pre- select off. If the sale of alcohol is for consumption on the premises and av from the premises select both.	alcohol emises
State any seasonal variations			
For example (but not exclusive	ely) where the activity will occur o	n additional days during the summer months.	
Non-standard timings. Where column on the left, list below	the premises will be used for the s	supply of alcohol at different times from those listed i	in the
For example (but not exclusive	ely), where you wish the activity to	go on longer on a particular day e.g. Christmas Eve.	
From 11:00 hrs Christmas Eve to 01:00 hrs Christmas Day From 11:00 hrs New Years Eve to 02:00 hrs New Years Day			
State the name and details of the individual whom you wish to specify on the licence as premises supervisor			
Name			
First name	Not known at present - likely to	oe applicant	
Family name			
Enter the contact's address			
Building number or name			
Street			
District			
City or town			
County or administrative area			
Postcode			
Country	United Kingdom		
Personal Licence number (if known)			
Issuing licensing authority (if known)			

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PROPOSED DESIGNATE	D PREMISES SU	PERVISOR CONSENT		
How will the consent for be supplied to the author		ed designated premises	supervisor	
• Electronically, by the	he proposed des	ignated premises superv	isor	
○ As an attachment t	to this applicatio	n		
Reference number for co form (if known)	onsent			If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.
Section 16 of 19				
ADULT ENTERTAINMEN	IT			
Highlight any adult enter premises that may give i			entertainmer	nt or matters ancillary to the use of the
rise to concern in respec	t of children, reg		ntend childre	to the use of the premises which may give n to have access to the premises, for example gambling machines etc.
None				
Section 17 of 19				
HOURS PREMISES ARE	OPEN TO THE P	JBLIC		
Standard Days And Tin	nings			
MONDAY				Give timings in 24 hour clock.
	Start 11:00	End		(e.g., 16:00) and only give details for the days
	Start	End	22:35	of the week when you intend the premises to be used for the activity.
TUESDAY				
	Start 11:00	End		
	Start	End	22:35	
WEDNESDAY	L			
	Start 11:00	End		
	Start Start	End	22:35	
			22.33	
THURSDAY	0			
	Start 11:00	End		
	Start	End	22:35	
FRIDAY				
	Start 11:00	End		
	Start	End	22:35	

Continued from previous page			
SATURDAY			
Start 11:00 End			
Start End 22:35			
SUNDAY			
Start 11:00 End			
Start End 22:00			
State any seasonal variations			
For example (but not exclusively) where the activity will occur on additional days during the summer months.			
Non standard timings. Where you intend to use the premises to be open to the members and guests at different times from those listed in the column on the left, list below			
For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.			
Opening times in line with Christmas and New Year sale of alcohol			
Section 18 of 19			
LICENSING OBJECTIVES			
Describe the steps you intend to take to promote the four licensing objectives:			
a) General – all four licensing objectives (b,c,d,e)			
List here steps you will take to promote all four licensing objectives together.			
The premises will cater for middle aged drinkers in an atmosphere of quiet surroundings. With no late opening hours there will be little chance that the premises will attract any crime or disorder. The premises will be well run and staff will have sufficient training to enable them to prevent any incidents in or around the premises.			
b) The prevention of crime and disorder			
c) Public safety			
Notices will be posted reminding patrons to be quiet on leaving the premises.			

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d) The prevention of public nuisance

Glass bottles will only be transferred to external bins between 9am and 5pm. Smokers will be directed to use the rear yard.

e) The protection of children from harm

No children under the age of 18 will enter the premises unless accompanied by an adult. The premises will run an under 21 age policy

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PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

Premises Licence Fees are determined by the non domestic rateable value of the premises. To find out a premises non domestic rateable value go to the Valuation Office Agency site at http://www.voa.gov.uk/ business_rates/index.htm

Band A - No RV to £4300	£100.00
Band B - £4301 to £33000	£190.00
Band C - £33001 to £87000	£315.00
Band D - £87001 to £125000	£450.00*
Band E - £125001 and over	£635.00*

*If the premises rateable value is in Bands D or E and the premises is primarily used for the consumption of alcohol on the premises then your are required to pay a higher fee

Band D - £87001 to £125000	£900.00
Band E - £125001 and over	£1,905.00

There is an exemption from the payment of fees in relation to the provision of regulated entertainment at church halls, chapel halls or premises of a similar nature, village halls, parish or community halls, or other premises of a similar nature. The costs associated with these licences will be met by central Government. If, however, the licence also authorises the use of the premises for the supply of alcohol or the provision of late night refreshment, a fee will be required.

Schools and sixth form colleges are exempt from the fees associated with the authorisation of regulated entertainment where the entertainment is provided by and at the school or college and for the purposes of the school or college.

If you operate a large event you are subject to ADDITIONAL fees based upon the number in attendance at any one time

Capacity 5000-9999	£1,000.00
Capacity 10000 -14999	£2,000.00
Capacity 15000-19999	£4,000.00
Capacity 20000-29999	£8,000.00
Capacity 30000-39999	£16,000.00
Capacity 40000-49999	£24,000.00
Capacity 50000-59999	£32,000.00
Capacity 60000-69999	£40,000.00
Capacity 70000-79999	£48,000.00

<i>Continued from previous page</i> Capacity 80000-89999	£56,000.00		
Capacity 90000 and over	£64,000.00		
* Fee amount (£)	190.00		
DECLARATION			
	nce liable on conv	viction to a fine up to level 5 o	n the standard scale, under section 158 of the
		n or in connection with this ap	
Ticking this box indica	tes you have read	and understood the above de	eclaration
This section should be comple behalf of the applicant?"	eted by the applica	ant, unless you answered "Yes	s" to the question "Are you an agent acting on
* Full name	Stephen Eyre]
* Capacity	Applicant]
* Date	13 / 03 /	2017	
	dd mm	уууу	
	bbA	another signatory	1
			1
Once you're finished you need 1. Save this form to your comp			
, j	, ,		terfield/apply-1 to upload this file and continue
with your application.		· · · · · · · · · · · · · · · · · · ·	
Don't forget to make sure you	nave all your supp	porting documentation to hal	na.
			CEEDING LEVEL 5 ON THE STANDARD ALSE STATEMENT IN OR IN CONNECTION
WITH THIS APPLICATION	OF THE LICENSII	NG ACT 2003, TO WARE A PP	ALSE STATEMENT IN OR IN CONNECTION
OFFICE USE ONLY			
Applicant reference number]
Fee paid			
Payment provider reference]
ELMS Payment Reference			
Payment status]
Payment authorisation code]
Payment authorisation date]
Date and time submitted			
Approval deadline			
Error message			
Is Digitally signed			

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