appendix 1

## shoosmiths

Dudley Metropolitan Borough Council Licensing Office 5 Ednam Road Dudley DY1 1HL The Lakes Northampton NN4 7SH DX 712280 Northampton

T 08700 863000 F 08700 863001

Elaine.Willis@shoosmiths.co.uk T Direct Dial : 08700 863086

Delivered: by post

Your Ref

Our Ref

EXW 130024.944

( PLEASE QUOTE ON ALL CORRESPONDENCE)

Date

5th February 2008

Dear Sirs

ASHNET 2000 LIMITED T/A MCDONALD'S 69 KENT STREET UPPER GORNAL DUDLEY WEST MIDLANDS DY3 1UX APPLICATION FOR A PREMISES LICENCE

We act on behalf of Ashnet 2000 Limited. Please find enclosed:-

- Application for the grant of a Premises Licence;
- Plans;
- Cheque in the sum of £315.00.

We should be grateful if you would acknowledge safe receipt.

Yours faithfully

Shoosmithe

0



LIVE

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

Dudley Metropolitan Borough Council 5 Ednam Road Dudley DY1 1HL

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.

WWe Ashnet 2000 Limited
 (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 ∦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

| McDo<br>69 1 | tal address of premises or, if none, ordnance survey conald's Restaurants Kent Street er Gornal                                       | map re | eterence or description  |           |
|--------------|---|--------|--|-----------|
| Post         | ttown Dudley  | Po     | st code DY3 1UX  |           |
| Tele         | phone number at premises (if any)   |        | 01902 674273   |           |
| Non-         | -domestic rateable value of premises  |        | £  | 55,000.00 |
|              | t 2 - Applicant Details se state whether you are applying for a premises licence  |        | se tick <b>✓ Yes</b>   |           |
| a)           | an individual or individuals*   |        | please complete section  | on (A)    |
| b)           | i. as a limited company ii. as a partnership iii. as an unincorporated association or iv. other (for example a statutory corporation) | /      | please complete section<br>please complete section<br>please complete section<br>please complete section | on (B)    |
| c)           | a recognised club   |        | please complete section  | on (B)    |
| d)           | a charity   |        | please complete section  | on (B)    |
| e)           | the proprietor of an educational establishment  |        | please complete section  | on (B)    |

| f)           | a health service body   | please complete section (B)            |
|--------------|---|--|
| g)           | a person who is registered under Part 2 of the<br>Care Standards Act 2000 (c14) in respect of a<br>independent hospital | please complete section (B)            |
| h)           | the chief officer of police of a police force in England and Wales  | please complete section (B)            |
| *If yo       | ou are applying as a person described in (a) or (b  | ) please confirm: Please tick ✓ Yes    |
|              | <ul> <li>I am carrying on or proposing to carry on a<br/>premises for licensable activities; or</li> </ul>              | business which involves the use of the |
|              | I am making the application pursuant to a   |  |
|              | <ul> <li>statutory function or</li> </ul>   |  |
|              | <ul> <li>a function discharged by virtue of He</li> </ul>   | r Majesty's prerogative                |
| Mr<br>Surr   | Mrs Miss mame   | Ms Other title (for example, Rev)      |
|              |   |  |
|              |   | Please tick ✓ Yes                      |
| l am         | 18 years old or over  |  |
| add<br>if di | rent postal<br>ress<br>fferent from<br>nises address  |  |
| Pos          | t Town  | Postcode                               |
|              |   |  |
| Day          | time contact telephone number   |  |

| SECOND INDIVIDU   | JAL APPLICANT (                             | ii applicable)     |                        |  |
|---|---|--------------------|------------------------|--|
| Mr  | Mrs   | Miss               | Ms                     | Other title (for example, Rev)                                   |
| Surname   |   |                    | First names            |  |
|   |   |                    |                        |  |
|   |   |                    |                        |  |
|   |   |                    |                        | Please tick 🗸 Yes  |
| I am 18 years old o   | or over                                     |                    |                        |  |
| Current postal<br>address<br>if different from<br>premises address  |   |                    |                        |  |
| Post Town   |   |                    | Postcode               |  |
| Daytime contact to  | elephone number                             |                    |                        |  |
| E-mail address (optional)   |   |                    |                        |  |
|   | ne and registered a<br>e of a partnership o |                    |                        | riate please give any registered orporate), please give the name |
| Name<br>Ashnet 2000 Lin   |   |                    |                        |  |
| Address 9 Castle Court 2 Castlegate Wa Dudley West Midlands DY1 4RD | ay  |                    |                        |  |
| Registered number<br>04061526                                       | (where applicable)                          |                    |                        |  |
| Description of applic   |   | partnership, compa | ny, unincorporated ass | sociation etc)   |
| Telephone number  | (if any)                                    | The politic        |                        |  |
| E-mail address (opt   | ional)                                      |                    |                        | to high set in neutron   |

### Part 3 - Operating Schedule

|           |  | D      | ay    | Mo     | nth    | Ye     | ear    |      |    |
|-----------|--|--------|-------|--------|--------|--------|--------|------|----|
| Whe       | n do you want the premises licence to start?   | 0      | 6     | 0      | 3      | 2      | 0      | 0    | 8  |
|           |  |        |       |        |        |        |        |      |    |
|           |  | D      | ay    | Мо     | nth    | Ye     | ear    |      |    |
|           | u wish the licence to be valid only for a limited period, when do want it to end?                                    |        |       |        |        |        |        |      |    |
| you v     | want it to end?  |        |       |        |        |        |        |      |    |
| If 5,0    | 000 or more people are expected to attend the premises at any one  | time,  | pleas | se sta | ate th | e      |        |      |    |
| numi      | ber expected to attend.  |        | 74    |        |        |        |        |      |    |
| Dies      | as give a general description of the promises (please read suidens   | o note | 1)    |        | _      | _      |        |      |    |
| 7.37.37.3 | se give a general description of the premises (please read guidance premises will operate as a restaurant selling fo |        |       | on-a   | alco   | holi   | ic d   | rink | cs |
|           | consumption on and off the premises.   |        |       |        |        |        |        |      |    |
|           |  |        |       |        |        |        |        |      |    |
|           |  |        |       |        |        |        |        |      |    |
|           |  |        |       |        |        |        |        |      |    |
|           |  |        |       |        |        |        |        |      |    |
|           |  |        |       |        |        |        |        |      |    |
|           |  |        |       |        |        |        |        |      |    |
|           |  |        |       |        |        |        |        |      |    |
|           |  |        |       |        |        |        |        |      |    |
| \/\ha     | at licensable activities do you intend to carry on from the premises?  |        |       |        |        |        |        |      |    |
| (Plea     | ase see sections 1 and 14 of the Licensing Act 2003 and Schedule   | 1 and  | 2 to  | the L  | icens  | sing / | Act 2  | 003) |    |
|           |  |        |       |        |        | Plea   | se tio | ck 🗸 | Ye |
| Brox      | vision of regulated entertainment  |        |       |        |        |        |        |      |    |
| FIOV      | vision of regulated entertainment  |        |       |        |        |        |        |      | _  |
| a)        | plays (if ticking yes, fill in box A)  |        |       |        |        |        |        |      |    |
| b)        | films (if ticking yes, fill in box B)  |        |       |        |        |        |        | L    |    |
| c)        | indoor sporting events (if ticking yes, fill in box C)   |        |       |        |        |        |        | L    |    |
| 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) $$          |        |       |        |        |        |        |      |    |
| Prov      | vision of entertainment facilities for:  |        |       |        |        |        |        |      |    |
| i)        | making music (if ticking yes, fill in box I)   |        |       |        |        | 152    |        |      |    |
| j)        | dancing (if ticking yes, fill in box J)  |        |       |        |        |        |        |      |    |
| k)        | entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box $K$ )          |        |       |        |        |        |        |      |    |
| Prov      | vision of late night refreshment (if ticking yes, fill in box L)   |        |       |        |        |        |        | /    |    |
| Sup       | ply of alcohol (if ticking yes, fill in box M)   |        |       |        |        |        |        |      |    |
| In al     | Il cases complete boxes N, O and P   |        |       |        |        |        |        |      |    |

Α

| Plays<br>Standard days and timings<br>(please read guidance note 6) |       | nings  | Will the performance of a play take place indoors or  | Indoors Outdoors             |  |
|---|-------|--------|---|------------------------------|--|
|   |       |        | outdoors or both - please tick ✓ (please read guidance note 2)  |                              |  |
| Day   | Start | Finish |   | Both                         |  |
| Mon   |       |        | Please give further details here (please read guidance no   | te 3)                        |  |
| Tue   |       |        |   |                              |  |
| Wed   |       |        | State any seasonal variations for performing plays (plea  | se read guidance note 4)     |  |
|   |       |        |   | or route gardenies in its 17 |  |
| Thur  |       |        |   | ,                            |  |
| Thur  |       |        | Non standard timings. Where you intend to use the premof plays at different times to those listed in the column | nises for the performance    |  |
|   |       |        | Non standard timings. Where you intend to use the prem  | nises for the performance    |  |

### В

| Films Standard days and timings (please read guidance note 6)  Day Start Finish |  | Will the exhibition of films take place indoors or outdoors or both - please tick ✓ (please read guidance | Indoors  |  |  |
|---|--|---|--|--|--|
|   |  | note 2)   | Outdoors   |  |  |
|   |  |   | Both   |  |  |
|   |  | Please give further details here (please read guidance note 3)  |  |  |  |
|   |  |   |  |  |  |
|   |  | State any seasonal variations for the exhibition of films (please read guida note 4)                      |  |  |  |
|   |  |   |  |  |  |
|   |  | Non standard timings. Where you intend to use the pre   |  |  |  |
|   |  | (please read guidance note 5)   |  |  |  |
|   |  |   |  |  |  |
|   |  |   | Start Finish  Please give further details here (please read guidance not  State any seasonal variations for the exhibition of film note 4)  Non standard timings. Where you intend to use the pre- |  |  |

C

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

D

| Boxing or wrestling<br>entertainment<br>Standard days and timings<br>(please read guidance note 6) |       | g      | Will the boxing or wrestling entertainment take place indoors or outdoors or both - please tick ✓ (please    | Indoors<br>Outdoors |           |
|--|-------|--------|--|---------------------|-----------|
|  |       |        | read guidance note 2)  |                     |           |
| Day  | Start | Finish |  | Both                |           |
| Mon  |       |        | Please give further details here (please read guidance no  | ote 3)              |           |
| Tue  |       |        |  |                     |           |
| Wed  |       |        | State any seasonal variations for boxing or wrestling e guidance note 4)                                     | entertainment (pl   | ease read |
| Thur   |       |        |  |                     |           |
|  |       |        |  |                     |           |
| Fri  |       |        | Non standard timings. Where you intend to use the wrestling entertainment at different times to those lister |                     |           |
| Fri<br>Sat   |       |        |  |                     |           |

# Е

| Live music<br>Standard days and timings<br>(please read guidance note 6) |       | minae  | Will the performance of live music take place indoors or outdoors or both - please tick ✓ (please read guidance note 2)                             | Indoors  |
|--|-------|--------|---|----------|
|  |       |        |   | Outdoors |
| Day  | Start | Finish |   | Both     |
| Mon  |       |        | Please give further details here (please read guidance no   | ote 3)   |
| Tue  |       |        |   |          |
| Wed  |       |        | State any seasonal variations for the performance of live music (please guidance note 4)  |          |
| Thur   |       |        |   |          |
| Fri  |       |        | Non standard timings. Where you intend to use the prer of live music at different times to those listed in the column (please read guidance note 5) |          |
| Sat  |       |        | (prease read guidance note 3)   |          |
| Sun  |       |        |   |          |
|  |       |        |   |          |

## F

| Recorded music<br>Standard days and timings<br>(please read guidance note 6) |       | nings     | Will the playing of recorded music take place indoors or outdoors or both - please tick ✓ (please read guidance | Indoors Outdoors          |  |
|--|-------|-----------|---|---------------------------|--|
|  |       | e note 6) | note 2)   |                           |  |
| Day  | Start | Finish    |   | Both                      |  |
| Mon  |       |           | Please give further details here (please read guidance not  | e 3)                      |  |
| Tue  |       |           |   |                           |  |
| Wed  |       |           | State any seasonal variations for playing recorded mus note 4)  | sic (please read guidance |  |
|  |       |           |   |                           |  |
| Thur   |       |           |   |                           |  |
| Thur<br>Fri  |       |           | Non standard timings. Where you intend to use the pre   |                           |  |
|  |       |           |   |                           |  |

# G

| Performances of dance Standard days and timings (please read guidance note 6)  Day Start Finish |       | nings     | Will the performance of dance take place indoors or outdoors or both - please tick ✓ (please read guidance note 2)   | Indoors |
|---|-------|-----------|--|---------|
|   |       |           |  | Both    |
| Mon   | Start | 1 1111311 | Please give further details here (please read guidance not   |         |
| Tue   |       |           |  |         |
| Wed   |       |           | State any seasonal variations for the performance of dance (please read note 4)  |         |
| Thur  |       |           |  |         |
| Fri   |       |           | Non standard timings. Where you intend to use the prem of dance entertainment at different times to those listed please list (please read guidance note 5) |         |
| Sat   |       |           | piedoc not (piedoc read guidance note o)   |         |
| Sun   |       |           |  |         |

# Н

| descrip<br>within (<br>Standard | g of a simi<br>tion to that<br>e), (f) or (g)<br>days and tine<br>ead guidance | falling<br>)<br>nings | 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 2)   | Indoors                     |  |  |  |
| Mon                             |  |                       |  | Outdoors                    |  |  |  |
| 141011                          |  |                       |  | Both                        |  |  |  |
| Tue                             |  |                       | Please give further details here (please read guidance no  | (6.5)                       |  |  |  |
| Thur                            |  |                       | State any seasonal variations for entertainment of a s falling within (e), (f) or (g) (please read guidance note 4)  | imilar description to that  |  |  |  |
| Fri                             |  |                       |  |                             |  |  |  |
| Sat                             |  |                       | Non standard timings. Where you intend to use the prem of similar description to that falling within (e), (f) or (g) a listed in the column on the left, please list (please read or | at different times to those |  |  |  |
| Sun                             | listed in the column on the left, please list (please read guidance note 5)    |                       |  |                             |  |  |  |

١

| Provision of facilities for<br>making music<br>Standard days and timings<br>(please read guidance note 6) |       | nings  | Please give a description of the facilities for making must   | sic you will be p | roviding |
|---|-------|--------|---|-------------------|----------|
|   |       |        | Will the facilities for making music be indoors or  | Indoors           |          |
|   |       |        | outdoors or both - please tick ✓ (please read guidance note 2)  | Outdoors          |          |
| Day   | Start | Finish |   | Both              |          |
| Mon   |       |        | Please give further details here (please read guidance note 3)  |                   |          |
| Tue   |       |        | State any seasonal variations for the provision of factorial (please read guidance note 4)  | ilities for makir | ng music |
| Thur  |       |        |   |                   |          |
| Fri   |       |        | Non standard timings. Where you intend to use the premises for provision of facilities for making music entertainment at different times to those listed in the column on the left, please list (please read guidance note 5) |                   |          |
| Sat   |       |        | Solution on the left, please list (please lead guidance note  | 0)                |          |
|   |       |        |   |                   |          |

J

| Provision of facilities for dancing Standard days and timings |              | Will the facilities for dancing be indoors or outdoors   | Indoors   |  |
|---|--------------|--|---|--|
|   |              | or both - please tick ✓ (see guidance note 2)  | Outdoors  |  |
|   |              |  | Both  |  |
| Start   | Finish       | Please give a description of the facilities for dancing ye   | ou will be providing  |  |
|   |              |  |   |  |
|   |              | Please give further details here (please read guidance note 3)   |   |  |
|   |              |  |   |  |
|   |              | N 400 L C. L. C. L |   |  |
|   |              | State any seasonal variations for providing dancing faci   | lities (please read guidance  |  |
|   |              | note 4)  |   |  |
|   |              |  |   |  |
|   |              | Non standard timings. Where you intend to use the pre  |   |  |
|   |              | facilities for dancing entertainment at different times to on the left, please list (please read guidance note 5)  | those listed in the column  |  |
|   |              |  |   |  |
|   | days and tir | days and timings<br>ead guidance note 6)   | or both - please tick  (see guidance note 2)  Start Finish  Please give a description of the facilities for dancing years  Please give further details here (please read guidance note 4)  State any seasonal variations for providing dancing facilities for dancing guidance note 4)  Non standard timings. Where you intend to use the prefacilities for dancing entertainment at different times to |  |

# K

| Provision of facilities for<br>entertainment of a<br>similar description to<br>that falling within I or J<br>Standard days and timings<br>(please read guidance note 6) |       | to<br>lor J | Please give a description of the type of entertainment fac  | cility you will be providing |
|---|-------|-------------|---|------------------------------|
| Day   | Start | Finish      | Will the entertainment facility be indoors or outdoors or both - please tick ✓ (please read guidance note 2)                        | Indoors                      |
| Mon   |       |             |   | Outdoors                     |
| WOTT  |       |             |   | Both                         |
| Tue   |       |             | Please give further details here (please read guidance no   |                              |
| Thur  |       |             | State any seasonal variations for the provision of facilities similar description to that falling within I or J (please re          |                              |
| Fri   |       |             | NACHE AND STREET STREET STREET  |                              |
|   |       |             | Non standard timings. Where you intend to use the pre   |                              |
| Sat   |       |             | facilities for entertainment of a similar description to to different times to those listed in the column on the leguidance note 5) |                              |
| Sun   |       |             |   |                              |

#### L

| days and ti   | minae                                     |  | Indoors   |  |  |
|---|---|--|---|--|--|
| Standard days and timings (please read guidance note 6) |   | indoors or outdoors or both - please tick ✓ (please read guidance note 2)  | Outdoors  |  |  |
| Start   | Finish                                    |  | Both  | /  |  |
| 23:00   | 05:00                                     | Please give further details here (please read guidance no  | te 3)   |  |  |
|   |   |  |   |  |  |
| 23:00   | 05:00                                     | and non-alcoholic drinks for consumption on and off premises.  |   |  |  |
| 23:00   | 05:00                                     | - CONTROL OF THE CONT | night refreshme   | nt (please   |  |
| 23:00   | 05:00                                     |  |   |  |  |
| 23:00   | 05:00                                     |  |   |  |  |
|   |   | please list (please read guidance note 5)  |   |  |  |
| 23:00   | 05:00                                     |  |   |  |  |
| 23:00   | 05:00                                     |  |   |  |  |
|   | 23:00<br>23:00<br>23:00<br>23:00<br>23:00 | 23:00 05:00<br>23:00 05:00<br>23:00 05:00<br>23:00 05:00<br>23:00 05:00  | 23:00 05:00  Please give further details here (please read guidance no The premises will operate as a restaurar and non-alcoholic drinks for consumption premises.  State any seasonal variations for the provision of late read guidance note 4)  23:00 05:00  Non standard timings. Where you intend to use the premate in the premise of the | Please give further details here (please read guidance note 3) The premises will operate as a restaurant selling fand non-alcoholic drinks for consumption on and off premises.  State any seasonal variations for the provision of late night refreshment read guidance note 4)  State any seasonal variations for the provision of late night refreshment read guidance note 4)  Non standard timings. Where you intend to use the premises for the proposition of late night entertainment at different times, to those listed in the column of please list (please read guidance note 5) |  |

M

| Supply of alcohol<br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the sale of alcohol be for consumption please tick ✓ (please read guidance note 7)  | On the premises Off the premises   |   |  |
|---|-------|--------|--|------------------------------------|---|--|
| Day   | Start | Finish |  | Both                               |   |  |
| Mon   |       |        | State any seasonal variations for the supply of alco   | ohol (please read guidance note 4) | ) |  |
| Tue   |       |        |  |                                    |   |  |
| Wed   |       |        |  |                                    |   |  |
| Thur  |       |        | 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 5) |                                    |   |  |
| Fri   |       |        | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |                                    |   |  |
| Sat   |       |        |  |                                    |   |  |
| Sun   |       |        |  |                                    |   |  |

| State the name and details of the individual whom you wish to specify on the licence as premises supervisor |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| Name  |  |  |  |  |  |  |
| Address   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| Postcode  |  |  |  |  |  |  |
| Personal Licence number (if known)  |  |  |  |  |  |  |
| Issuing licensing authority (if known)  |  |  |  |  |  |  |

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 8)

Children's parties will not be held during the licensed period.

0

| Hours premises are open to the public Standard timings (please read guidance note 6) |  | State any seasonal variation (please read guidance note 4)  |
|--|--|---|
| Start  | Finish   |   |
| 05:00  | 05:00  |   |
| 05:00  | 05:00  |   |
| 05:00  | 05:00  |   |
| 05:00  | 05:00  | Non standard timings. Where you intend to use 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 5) |
| 05:00  | 05:00  |   |
| 05:00  | 05:00  |   |
| 05:00  | 05:00  |   |
|  | O the public d timings (ple dance note of the public d timings) (ple dance note of the public da | Othe public d timings (please dance note 6)    Start   Finish   |

| P Describe the steps you intend to take to promote the four licensing objectives:   |
|---|
| a) General - all four licensing objectives (b, c, d, e) (please read guidance note 9)   |
| The premises will operate as a restaurant selling food and non-alcoholic drinks for consumption on and off the premises.  |
| Ashnet 2000 Limited will manage the premises in accordance with good management principles to secure as far as possible the promotion of the four licensing objectives.   |
| b) The assumption of origina and discarder  |
| b) The prevention of crime and disorder   |
| Ashnet 2000 Limited will maintain a CCTV system in operation on the premises while open to the public. Immediate access to the CCTV system will be provided to Police Officers and Council Officers at their request  |
| c) Public safety  |
| Ashnet 2000 Limited will comply, as far as reasonably practicable, with relevant Health and Safety and Fire Safety Legislation. All required health and safety risk assessments and fire safety risk assessments will be undertaken in writing and reviewed on a regular basis. |
| d) The prevention of public nuisance  |
| Ashnet 2000 Limited will ensure that the footpath immediately outside the front of the Restaurant is kept clear of litter emanating from the premises.  |
|   |
| e) The protection of children from harm   |
| Children's parties will not be held during the licensed period.   |
|   |
|   |
|   |

|   | Please tie                           | ck ✓ Yes  |
|---|--------------------------------------|-----------|
| <ul> <li>I have made or enclosed payment of the fee</li> </ul>  |                                      | /         |
| <ul> <li>I have enclosed the plan of the premises</li> </ul>  |                                      | 7         |
| <ul> <li>I have sent copies of this application and the plan to respons<br/>applicable</li> </ul>   | sible authorities and others where   | /         |
| <ul> <li>I have enclosed the consent form completed by the individual if applicable</li> </ul>  | al I wish to be premises supervisor, |           |
| <ul> <li>I understand that I must now advertise my application</li> </ul>   |                                      | /         |
| <ul> <li>I understand that if I do not comply with the above requirement</li> </ul>   | ents my application will be rejected | /         |
| IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UNDER SECTION 158 OF THE LICENSING ACT 2003 T CONNECTION WITH THIS APPLICATION               |                                      |           |
| Part 4 - Signatures (please read guidance note 10)  |                                      |           |
| Signature of applicant or applicant's solicitor or other delif signing on behalf of the applicant please state in what ca                     |                                      | note 11). |
| Signature Shosmitts   |                                      |           |
| Date 5th February 2008  |                                      |           |
| Capacity Solicitor / Authorised Agent for the A   | pplicant                             |           |
| For joint applications signature of 2 <sup>nd</sup> applicant or 2 <sup>nd</sup> agent (please read guidance note 12). If signing on behalf o |                                      |           |
| Signature   |                                      |           |
| Date  |                                      |           |
| Capacity  |                                      |           |
| Contact name (where not previously given) and postal acthis application (please read guidance note 13) Shoosmiths The Lakes                   | ddress for correspondence associa    | ated with |
| Post town Northampton   | Post code NN4 7SH                    |           |
| Telephone number (if any) Direct Dial: 08700 8630   | 86                                   |           |
| If you would prefer us to correspond with you by e-mail yo  | ur e-mail address (optional)         | -         |

#### Notes for Guidance

- 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.
- 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.
- For example (but not exclusively), where you wish the activity to go on longer on a particular day, e.g. Christmas Eve.
- 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.
- If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. 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, the presence of gaming machines.
- Please list here steps you will take to promote all four licensing objectives together.
- 10. The application form must be signed.
- An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- Where there is more than one applicant, both applicants or their respective agents must sign the application form.
- 13. This is the address which we shall use to correspond with you about this application.

The second secon