



## **Licensing Sub Committee Hearing Panel**

Date: Thursday, 11 October 2018

Time: 10.00 am

Venue: Room 132, Level 1, Town Hall, Manchester

Everyone is welcome to attend this committee meeting.

### **Access to the Town Hall**

Public access to the Town Hall is via the access ramp next to the Lloyd Street entrance. Members of the public should report to the reception desk.

## **Membership of the Licensing Sub Committee Hearing Panel**

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**Councillors** – Ludford (Chair), Jeavons and McHale.

## Agenda

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**1. Urgent Business**

To consider any items which the Chair has agreed to have submitted as urgent.

**2. Appeals**

To consider any appeals from the public against refusal to allow inspection of background documents and/or the inclusion of items in the confidential part of the agenda.

**3. Interests**

To allow Members an opportunity to [a] declare any personal, prejudicial or disclosable pecuniary interests they might have in any items which appear on this agenda; and [b] record any items from which they are precluded from voting as a result of Council Tax/Council rent arrears; [c] the existence and nature of party whipping arrangements in respect of any item to be considered at this meeting. Members with a personal interest should declare that at the start of the item under consideration. If Members also have a prejudicial or disclosable pecuniary interest they must withdraw from the meeting during the consideration of the item.

**4. Application for a New Premises Licence for Co-operative Store, 12-15 Gateway House, Piccadilly Station Approach, Manchester M1 2GH**

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## Information about the Committee

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The Licensing and Appeals Committee fulfills the functions of the Licensing Authority in relation to the licensing of taxi drivers.

A procedure has been agreed which governs how the Panel will consider such applications.

Decisions made by the Panel will be under delegated authority and will not require to be referred to the Council for approval. Meetings are controlled by the Chair, who is responsible for seeing that the business on the agenda is dealt with properly.

Copies of the agenda are published on the Council's website. Some additional copies are available at the meeting from the Governance Support Officer.

The Council is concerned to ensure that its meetings are as open as possible and confidential business is kept to the strict minimum. When confidential items are involved these are considered at the end of the meeting at which point members of the public are asked to leave.

Smoking is not allowed in Council buildings.

Joanne Roney OBE  
Chief Executive  
Level 3, Town Hall Extension,  
Albert Square,  
Manchester, M60 2LA

## Further Information

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For help, advice and information about this meeting please contact the Committee Officer:

Beth Morgan  
Tel: 0161 234 3043  
Email: [b.morgan@manchester.gov.uk](mailto:b.morgan@manchester.gov.uk)

This agenda was issued on **Wednesday, 3 October 2018** by the Governance and Scrutiny Support Unit, Manchester City Council, Level 6, Town Hall Extension (Mount Street Elevation), Manchester M60 2LA

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**MANCHESTER**  
CITY COUNCIL

## Licensing Act 2003 (Hearings) Regulations 2005

**Reference:** 217755  
**Name:** Co-op  
**Address:** 12-15 Gateway House, Piccadilly Station Approach,  
Manchester, M1 2GH  
**Ward:** Piccadilly

**Hearing Date: 11/10/2018**

**Application Type:** Premises Licence (new)  
**Name of Applicant:** Co-operative Group Food Limited  
**Date of application:** 22/08/2018

### Summary of application

**Proposed hours and licensable activities:**

Provision of late night refreshment:  
Mon to Sun 2300 to 0000

The supply of alcohol for consumption off the premises only:  
Mon to Sun 0600 to 0000

Opening hours:  
Mon to Sun 0600 to 0000

### Representations Received

Responsible Authority	Grounds For Representation
<ul style="list-style-type: none"> <li>Licensing &amp; Out of Hours Compliance</li> </ul>	<ul style="list-style-type: none"> <li>Public Nuisance, Public Safety, Crime and Disorder &amp; Protection of Children from Harm</li> </ul>

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## **Considerations**

In determining the application, the Sub-Committee must give appropriate weight to:

- a) the steps that are appropriate to promote the licensing objective(s);
- b) the representations (including supporting information) presented by all the parties;

In determining the application, the Sub-Committee must also have regard to:

- c) the s182 Guidance to the Licensing Act 2003 by the Home Secretary;
- d) Manchester City Council's Statement of Licensing Policy
- e) The Licensing Act 2003 and the regulations made there under
- f) Licensing Objectives

Reasons should be given for any departure from c and d above.

### **New premises licence**

The Sub-Committee must take such of the steps under section 17(4) of the Licensing Act 2003 (if any), that it considers appropriate for the promotion of the licensing objectives. The steps are:

1. To grant the licence subject to:
  - a) the conditions consistent with the operating schedule accompanying the application, modified to such extent as the authority considers appropriate for the promotion of the licensing objectives, and
  - b) any mandatory conditions that must be included in the licence
2. To exclude from the scope of the licence any of the licensable activities to which the application relates;
3. To refuse to specify the person proposed in the application as the designated premises supervisor;
4. To reject the application.

The conditions of the licence are modified if any of them is altered or omitted or any new condition is added. Modification of the condition of the premises licence includes restricting the times at which licensable activities authorised by the licence can take place.

Where the Sub-Committee consider that none of the above steps are appropriate for the promotion of the licensing objectives, the application should be granted in the terms applied for.

## **Summary of representations**

Please be advised that the below is a summary of representations received only. Copies of the representations are included at the back of this document for members and other interested parties to refer to as necessary.

The Licensing Compliance and Out of Hours Team

The Licensing Compliance and Out of Hours Team believes the application requires amendments to proposed conditions and the addition of conditions for the application to up hold the licensing objectives.





Co-op  
12-15 Gateway House, Piccadilly Station Approach,  
Manchester, M1 2GH

Premises Licensing  
Manchester City Council

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Ordnance Survey 100019568.



<b>PREMISE NAME:</b>	Co-op
<b>PREMISE ADDRESS:</b>	12-15 Gateway House, Piccadilly Station Approach, Manchester, M1 2GH
<b>WARD:</b>	Piccadilly
<b>HEARING DATE:</b>	11/10/2018

**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 Co-operative Group Food 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 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			
Co-op 12-15 Gateway House Piccadilly Station Approach			
Post town	Manchester	Postcode	M1 2GH

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£119,000

**Part 2 - Applicant details**

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

- |  |                                     |                             |
|--|-------------------------------------|-----------------------------|
| a) an individual or individuals *                    | <input type="checkbox"/>            | please complete section (A) |
| b) a person other than an individual *               |                                     |                             |
| i as a limited company/limited liability partnership | <input checked="" 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                                 | <input type="checkbox"/>            | please complete section (B) |
| d) a charity   | <input type="checkbox"/>            | 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 <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
<b>Date of birth</b>		I am 18 years old or over <input type="checkbox"/> Please tick yes			
<b>Nationality</b>					
Current residential address if different from premises address					
Post town				Postcode	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**SECOND INDIVIDUAL APPLICANT** (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		

<b>Date of birth</b>		I am 18 years old or over <input type="checkbox"/> Please tick yes	
<b>Nationality</b>			
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 Co-operative Group Food Limited
Address Dept 10227 1 Angel Square Manchester M60 0AG
Registered number (where applicable) 26715R
Description of applicant (for example, partnership, company, unincorporated association etc.) Company
Telephone number (if any) 0843 751 4188
E-mail address (optional) licensing@coop.co.uk

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

If you wish the licence to be valid only for a limited period, when do you want it to end?

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please give a general description of the premises (please read guidance note 1)

Convenience store open seven days a week, selling groceries, sundry items and alcohol for consumption off the premises

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)

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

**B**

<b>Films</b> Standard days and timings (please read guidance note 7)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 4)		
Mon					
Tue					
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 5)		
Thur					
Fri			<b>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</b> (please read guidance note 6)		
Sat					
Sun					



C

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 7)			<b><u>Please give further details</u></b> (please read guidance note 4)
Day	Start	Finish	
Mon			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 5)
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 6)
Thur			
Fri			
Sat			
Sun			

**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 7)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish		Both	<input type="checkbox"/>
Mon			<b><u>Please give further details here</u></b> (please read guidance note 4)		
Tue					
Wed			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 5)		
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 6)		
Sat					
Sun					

**E**

<b>Live music</b> Standard days and timings (please read guidance note 7)			<b><u>Will the performance of live music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 4)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for the performance of live music</u></b> (please read guidance note 5)		
Thur					
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 6)		
Sun					

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 7)			<b><u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 4)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 5)		
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 6)		
Sat					
Sun					

**G**

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

**H**

<p><b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 7)</p>			<p>Please give a description of the type of entertainment you will be providing</p>		
Day	Start	Finish	<p><b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><b><u>Please give further details here</u></b> (please read guidance note 4)</p>		
Wed					
Thur			<p><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 5)</p>		
Fri					
Sat			<p><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 6)</p>		
Sun					

**I**

<b>Late night refreshment</b> Standard days and timings (please read guidance note 7)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>			
Mon	23:00	00:00	<b><u>Please give further details here</u></b> (please read guidance note 4)		
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 5)		
Thur	23:00	00:00			
Fri	23:00	00:00	<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 6)		
Sat	23:00	00:00			
Sun	23:00	00:00			

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b>Will the supply of alcohol be for consumption</b> – <b>please tick</b> (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)		
Mon	06:00	00:00			
Tue	06:00	00:00			
Wed	06:00	00:00			
Thur	06:00	00:00			
Fri	06:00	00:00			
Sat	06:00	00:00			
Sun	06:00	00:00			
			<b>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</b> (please read guidance note 6)		

**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 Jacqueline Taylor	
Date of birth [REDACTED]	
Address [REDACTED]	
Postcode	[REDACTED]
Personal licence number (if known) PA0779	
Issuing licensing authority (if known) Rochdale MBC	



□□□□

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

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 7)			<b>State any seasonal variations</b> (please read guidance note 5)
Day	Start	Finish	
Mon	06:00	00:00	
Tue	06:00	00:00	
Wed	06:00	00:00	
Thur	06:00	00:00	
Fri	06:00	00:00	
Sat	06:00	00:00	
Sun	06:00	00:00	
<b>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</b> (please read guidance note 6)			

**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)**

The applicant has given thought to the potential impact of the grant of this application on the four licensing objectives and, having regarding to the locality and following pre-submission talks with the Police, considers that the following conditions are appropriate.

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

1. The premises shall maintain a CCTV system which gives coverage of all entry and exit points. The system shall continually record whilst the premises are open and conducting licensable activities. All recordings shall be stored for a minimum period of 28 days and shall be capable of being easily downloaded. Recordings shall be made available upon the receipt of a request by an authorised Officer of the Police or the Local Authority.

2. There shall be "CCTV in Operation" signs prominently displayed at the premises.

3. An incident log (whether kept in a written or electronic form) shall be retained at the premises and made available to an authorised Officer of the Police or the Local Authority.

4. The premises shall operate a proof of age scheme, such as a Challenge 25, whereby the only forms of acceptable identification shall be either a photographic driving licence, a valid passport, military identification or any other recognised form of photographic identification incorporating the PASS logo, or any other form of identification from time to time approved by the secretary of the state.

5. The premises will be fitted with a burglar alarm system

6. The premises will be fitted with a panic button system for staff to utilise in the case of an emergency.

**c) Public safety**

The premises licence holder shall ensure that the appropriate fire safety, and health and safety regulations are applied at the premises.

**d) The prevention of public nuisance**

A complaints procedure will be maintained, details of which will be made available in store and upon request.

**e) The protection of children from harm**

1. All staff will receive comprehensive training in relation to age restricted products and in particular the sale of alcohol. No member of staff will be permitted to sell age restricted products until such time as they have successfully completed the aforementioned training.
2. An age till prompt system will be utilised at the premises in respect of age restricted products.
3. A refusals register (whether kept and written or electronic form) will be maintained at the premises and will be made available for inspection upon request by an authorised Officer of the Police or the Local Authority

**Checklist:****Please tick to indicate agreement**

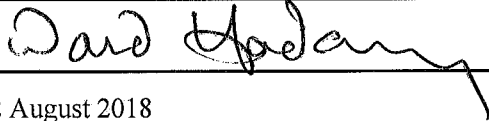
- I have made or enclosed payment of the fee.
- I have enclosed the plan of the premises.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, 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.
- [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 (please read note 15).

**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.**

<b>Declaration</b>	<ul style="list-style-type: none"> <li>• [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).</li> <li>• 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, if appropriate (please see note 15)</li> </ul>
Signature	
Date	22 August 2018
Capacity	Solicitors for the Applicant

**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 13). **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 14)

Miss Jasmine Mann  
Ward Hadaway  
Sandgate House  
102 Quayside

Post town	Newcastle upon Tyne	Postcode	NE1 3DX
-----------	---------------------	----------	---------

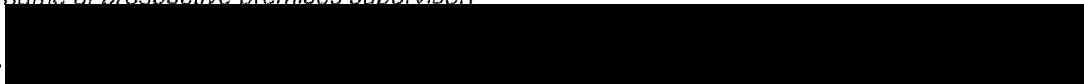
Telephone number (if any)	0191 204 4491
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If you would prefer us to correspond with you by e-mail, your e-mail address (optional)  
jasmine.mann@wardhadaway.com

DPS Consent Form

Consent of individual to being specified as premises supervisor

I, JACQUELINE TAYLOR  
[full name of prospective premises supervisor]

of... 

.....  
[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

**Designated Premises Supervisor Variation by The Co-operative Group Food Limited**

relating to a premises licence .....[store's Premises Licence number]  
for

12-15 GATEWAY HOUSE  
PICCADILLY STATION APPROACH  
MANCHESTER M1 2GH.

.....  
[name and address of store premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by **The Co-operative Group Food Limited** concerning the supply of alcohol at


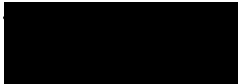

.....  
AS ABOVE

.....  
[name and address of store premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.  
[please tick to confirm]

Personal licence number PA 0799.  
.....  
[insert personal licence number]

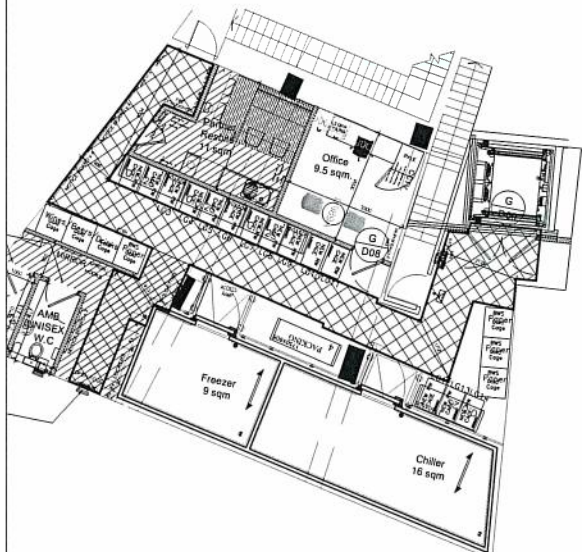
Personal licence issuing authority ROCHDALE COUNCIL.  
.....  
[insert name of personal licence issuing authority]

 .....Signed  .....Date of Birth  
JACQUELINE TAYLOR Name (please print)  .....Place of Birth  
28-6-18 .....Dated BRITISH .....Nationality

Please return to: **DPS Changes, Dept. 10227 – Licensing, The Co-operative Group, 1 Angel Square, Manchester M60 0AG**

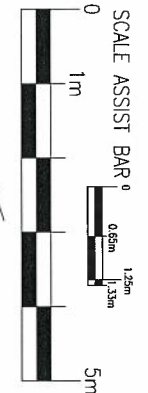
ORDNANCE SURVEY MAP (NTS)

Page 30 ELEVATIONS



BACK OF HOUSE - 1:100

SHOP FLOOR - 1:50



SCALE ASSIST BAR 0 1.25m  
 0 1m 0.5m 1.25m 5m

BWS CAPACITY BLM  
 (Scottish stores only)  
 FLOOR BWS: 00.00m<sup>2</sup>  
 KIOSK BWS: 00.00m<sup>2</sup>  
 TOTAL BWS: 00.00m<sup>2</sup>

**FIRE SAFETY**  
 Fire Exit  
 Fire Alarm  
 Fire Signage  
 Fire Extinguisher  
 Fire Blanket  
 Fire Hose  
 Fire Risk Assessment  
 Fire Drill  
 Fire Warden  
 Fire Marshal  
 Fire Evacuation Route  
 Fire Escape Route  
 Fire Exit Sign  
 Fire Exit Door  
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BAY COUNT:79	
SURVEY OVERLAID	
MANCHESTER, PICCADILLY	
12-15 Gate Way House Piccadilly Approach Greater Manchester M12 6H	
Store Phone No: TBC	Hub Number: TBC
Format: EC URBAN	Drawing Information
Back of House Information	Drawing Information
Back of House	2047 Sq.Ft.
Back Up Chilled	168 Sq.Ft.
Back Up Frozen	63 Sq.Ft.
Drawn By: EW	Scale: 1:50
Email: ellie.williams@coop.co.uk	Job Originated By: Acquisition Programme 2018
Meetings	Drawing No: PICCADILLY-P1
Drawing Review	Fixture Rev: F16
Sign Off Meeting	Macro Rev: M0
Drawing Status Stage 3: 2nd Review CAD	The Co-Op 1 Angel Square, Manchester, M12 6AG

<p><b>Description of Amends</b></p> <p>27.03.2018 Manchester, Piccadilly /Hub P1F1M0/EW                  -Draft</p> <p>27.03.2018 Manchester, Piccadilly /Hub P1F2M0/EW                  -Draft Option 2</p> <p>04/06/2018 Manchester, Piccadilly /Hub P1F3M0/EW                  -Full Draw</p> <p>06/06/2018 Manchester, Piccadilly /Hub P1F4M0/EW                  -Flowers increased to 1bay                  -Existing floor to be retained                  -Tensorol queuing added.                  -Amb produce end added.                  -Additional side racks added.</p>	<p>11/06/2018 Manchester, Piccadilly /Hub P1F5M0/EW                  -Redeveloping draft option 1</p> <p>14/06/2018 Manchester, Piccadilly /Hub P1F6M0/EW                  -FTG Reorganised                  -One Water tap added                  -Bakery reverted back to existing                  -Counter top added.                  -All blocks altered to new 500mm shelves                  -Community screen added.                  -Internal ATM added</p> <p>19/06/2018 Manchester, Piccadilly /Hub P1F7M0/EW                  -FTG Zone reorganised.                  -FTG framing removed as doesn't fit.                  -Indicative community notice board added.                  -Dots Donuts added.</p>	<p>-Flowers relocated                  -Amb bays increased by 5m -Fruit side rack added.</p> <p>20/06/2018 Manchester, Piccadilly /Hub P1F8M0/CW                  Kiosk door flipped to opposite side.                  Small brand wall added                  Maxi and flowers relocated.</p> <p>06/07/2018 Manchester, Piccadilly /Hub P1F12M0/EW                  -Offshelf added.</p> <p>13/07/2018 Manchester, Piccadilly /Hub P1F13M0/EW                  -FTG redrawn                  -Till removed from bakery                  -Community triangle removed                  -Iscon increased to 10                  -FTG counters increased                  -Costa altered to seatless                  -Labels added to FTG counter</p>	<p>26/06/2018 Manchester, Piccadilly /Hub P1F11M0/EW                  -Chilled produce added                  -Amb Produced altered to 1m bay.                  -BWS chillers swapped to new                  -Two 0.5 bays removed from middle AMB gondola                  -Existing chillers repositioned</p> <p>16/07/2018 Manchester, Piccadilly /Hub P1F14M0/EW                  -Bakery Area reorganised</p> <p>16/07/2018 Manchester, Piccadilly /Hub P1F15M0/EW                  -Bakery fixtures split                  -FTG counter put on a angle                  -Heights</p> <p>16/07/2018 Manchester, Piccadilly /Hub P1F16M0/EW                  -Fire equipment added                  -Fire panel added</p>	<p><b>Standard Notes</b>                  Please refer to the Asset Planning Standard Notes for applicable information.                  All dimensions to be checked on site and any discrepancy to be verified with the co-operative group or its agents, before proceeding with the work. This prime purpose of this plan is for retail sales floorplan fitting. For further detail regarding this project refer to retail book or drawing portal.</p> <p><b>Learning Application Process Statement:</b> We will comply with our statutory requirements. All box outs to be to the ceiling unless otherwise stated.                  Existing ceiling plans for lifts are available on request.</p> <p><b>Management of Asbestos</b>                  As part of our compliance with the Management of Asbestos Regulations, service providers must comply with the Co-operative Groups Management of Asbestos Containing Materials policy and processes. Service providers are to access the Co-operative Group's web-based asbestos register, www.365online.co.uk, prior to undertaking any work. Any difficulty in obtaining asbestos information must be brought to our immediate attention and is not an excuse for working without this.</p>	<p><b>CDM Regulations 2015</b>                  The designer at the Co-operative wish to point out that the CDM Regulations 2015 apply to this work and the project may require notification to the HSE. Under their duty imposed by the CDM Regulations 2015 the designers have endeavored to eliminate hazards to be as reasonably practicable during design and where hazards could not be avoided the designers have reduced the risks associated. The remaining hazards and foreseeable risks that could not be designed out of the project have been identified as below:</p> <p>FALLS from heights during installation of suspended ceilings, taking down over track lighting bars, as a result of split level floors and steep HAZARDOUS MATERIALS (e.g. asbestos) - to be removed as necessary by specialist, see the Co-operative Groups Management of Asbestos Containing Materials policy and processes.</p> <p>EQUIPMENT: ensure there are controls and training in place regarding the use and safety of all equipment on site.</p> <p>MANUAL HANDLING: shelving, metal studs, boards etc.</p> <p>PROTECTION: site operatives and Co-operative Group employees are to be protected at all times. Some of the work is to be undertaken out of hours. Work areas are not to be used by Co-operative Group staff during the absences. The CDM coordinator is to be consulted with regard to the phasing of any work.</p> <p>SERVICES: lined services may exist under the floors and behind panels, with their exact position unknown. The contractor is to ascertain the location of all services prior to the commencement of works on site.</p> <p>PETROL STATIONS - RISK OF EXPLOSION OF PETROL FLAMES please refer to the Guidance For The Design, Construction, Modification and Maintenance of Petrol Filling Stations (The Blue Book) before undertaking any work.</p> <p>ADDITIONAL DESIGNER'S NOTES: any significant or unusual risks are highlighted in the drawing</p>	<p><b>Exceptions</b>                  Any areas of the proposal that are not in-line with the current model should be detailed here along with the reason and thinking behind it. To also include any by-laws or covenants.</p> <p><b>Store Demographic:</b>                  Striving: No</p> <p><b>Checklist Added:</b>                  Asset Planner: EW                  Date: 27/03/2018</p> <p><b>Risk Rating:</b>                  Planning: 1                  Lease:</p>	<p><b>Additional Equipment</b></p> <p>VND 1                  Magazines 1                  Cards 1                  Impulse Confect. 2                  Impulse CSN 2                  Pizza Space 2                  ISB 3                  BWS Prom 1                  Eden Bakery Stand 2                  Grocery Prom 2                  Electrical Shelving NA                  Roll Cages BOH 2                  Promo Plinths 2                  Steak Kit 1</p>	<p><b>Drawing Information</b></p> <table border="1"> <tr> <th></th> <th>Existing</th> <th>Proposed</th> </tr> <tr> <td>Gross Building Area (GBA)</td> <td>Sq.Ft.</td> <td>5306 Sq.Ft.</td> </tr> <tr> <td>Gross Sales Area (GSA)</td> <td>Sq.Ft.</td> <td>2861 Sq.Ft.</td> </tr> <tr> <td>Net Sales Area (NSA)</td> <td>Sq.Ft.</td> <td>2790 Sq.Ft.</td> </tr> </table> <p>Back of House Information</p> <table border="1"> <tr> <td>Back of House</td> <td>Sq.Ft.</td> <td>2047 Sq.Ft.</td> </tr> <tr> <td>Back Up Chilled</td> <td>Sq.Ft.</td> <td>168 Sq.Ft.</td> </tr> <tr> <td>Back Up Frozen</td> <td>Sq.Ft.</td> <td>63 Sq.Ft.</td> </tr> </table> <p>Drawn By: EW                  Scale: 1:50                  Email: ellie.williams@coop.co.uk</p> <p>Meetings</p> <table border="1"> <tr> <td>Drawing Review</td> <td>xx/xx/xxxx</td> </tr> <tr> <td>Sign Off Meeting</td> <td>xx/xx/xxxx</td> </tr> </table> <p>Drawing Status Stage 3: 2nd Review CAD</p>		Existing	Proposed	Gross Building Area (GBA)	Sq.Ft.	5306 Sq.Ft.	Gross Sales Area (GSA)	Sq.Ft.	2861 Sq.Ft.	Net Sales Area (NSA)	Sq.Ft.	2790 Sq.Ft.	Back of House	Sq.Ft.	2047 Sq.Ft.	Back Up Chilled	Sq.Ft.	168 Sq.Ft.	Back Up Frozen	Sq.Ft.	63 Sq.Ft.	Drawing Review	xx/xx/xxxx	Sign Off Meeting	xx/xx/xxxx
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Drawing Review	xx/xx/xxxx																																
Sign Off Meeting	xx/xx/xxxx																																



**MANCHESTER  
CITY COUNCIL**

**Licensing & Out of Hours Compliance Team - Representation**

Name	Gemma Smith
Job Title	Neighbourhood Compliance Officer
Department	Licensing and Out of Hours Compliance Team
Address	Level 1, Town Hall Extension, Manchester, M60 2LA
Email Address	Gemma.smith2@gmail.com
Telephone Number	0161

<b>Premise Details</b>	
Application Ref No	217755
Name of Premises	Co-op
Address	12-15 Gateway House, Piccadilly Station Approach, Manchester, M1 2GH

<b>Representation</b>
<p>Outline your representation regarding the above application below. This representation should describe the likely effect of the grant of the licence/certificate on the licensing objectives and on the vicinity of the premises.</p> <p>Licensing and Out of Hours have assessed the likely impact of the grant of this application taking into account a number of factors, including the hours and activities applied for, the nature of the area in which the premises is located and any potential risk that granting the licence could undermine any of the four licensing objectives.</p> <p>The proposed site is located at 12-15 Gateway House, Piccadilly Station Approach a predominantly commercial area within the Piccadilly district of the city.</p> <p>The premises will operate as a convenience store selling groceries and sundry items with the intention to supply alcohol for consumption off the premises Monday to Sunday 0600 – 0000 and Late Night Refreshment Monday to Sunday 2300 – 0000. The premises will be open to the public Monday to Sunday 0600 – 0000.</p> <p>The Licensing and Out of Hours would be willing to agree the approval of this licence application with the following amendments to the proposed conditions. Further to this we propose additional conditions to support licensing objectives within the Licensing Act 2003 and in accordance with Manchester City Councils Statement of Licensing Policy 2016-2022:</p> <p><b>1. The prevention of crime and disorder</b></p> <p><b>Amend: An incident log (whether kept in a written or electronic form) shall be retained at the premises and made available to an authorised Officer of the Police or the Local Authority.</b></p> <p><b>To:</b> An incident log (which may be electronically recorded) shall be kept at the premises for at least six months, and made available on request to GMP or an authorised officer of the licensing authority which will record the following incidents:</p> <ul style="list-style-type: none"> <li>- All crimes reported to the venue, or by the venue to the Police;</li> <li>- All ejections of customers;</li> <li>- Any incidents of disorder;</li> <li>- Fraudulent ID or other items;</li> </ul>

- Any faults in the CCTV system;
- Any visit by a relevant authority or emergency services.

Add: Any person left in charge of the premises must be trained in the use of any such CCTV equipment, and be able to produce CCTV images to an officer from a responsible authority upon request.

Add: All staff shall be trained in: responsible alcohol sales including recognising signs of drunkenness, refusal skills and drugs awareness; managing and resolving conflict; actions to be taken in the event of an emergency; Fire Safety and Evacuation procedures; licence conditions; relevant obligations and offences under the Licensing Act 2003, including those associated with the sale of alcohol. Documented records of training completed shall be kept for each member of staff. Training shall be regularly refreshed and at no greater than 6 monthly intervals. Training records shall be made available for inspection upon request by a police officer or an authorised officer of Manchester City Council.

## **2. Public Safety**

Add: The premises licence holder shall ensure that at all times when public is present there is at least one competent person able to administer first aid, that an adequate and appropriate supply of first aid equipment and materials is available on the premises, and that adequate records are maintained in relation to the supply of any first aid.

## **3. Prevention of Public Nuisance**

**Add:** The premises and immediate area shall be kept clean and free from litter at all times the premises are open to the public. Litter bins shall be provided at the premises in sufficient capacity to ensure that customers can adequately dispose of any litter.

Add: Staff must ensure customers do not congregate outside the premises so as to cause a public nuisance.

## **4. The protection form children from harm**

**Amend:** The staff will receive comprehensive training in relation to age restricted products and in particular the sale of alcohol. No member of staff will be permitted to sell age restricted products until such time as they have successfully completed the aforementioned training.

To: Staff will receive comprehensive training in relation to age restricted products and in particular the sale of alcohol. The premises Licence holder shall ensure that all staff are trained to prevent under age sales, are aware of and prevent proxy sales, maintain the refusals log, enter sales correctly on the tills so prompts show as appropriate. No member of staff will be permitted to sell age restricted products until such time as they have successfully completed the aforementioned training.

**Amend:** A refusals register (whether kept and written or electronic form) will be maintained at the premises and will be made available for inspection upon request by an authorised Officer of the Police or the Local Authority.

To: A refusals log (which may be electronically recorded) shall be kept at the premises for at least six months, and made available on request to GMP or an authorised officer of the licensing authority.

Add: Documented records of all training completed shall be kept for each member of



staff and regularly refreshed no greater than six monthly intervals. Training records shall be made available for inspection upon request by GMP or an authorised officer of the licensing authority.

Add: The premises shall display prominent signage indicating that a proof of age scheme, such as a Challenge 25, is in operation.

Add: The premises shall display prominent signage indicating that it is an offence to buy or attempt to buy alcohol for a person who is under 18.

Add: All sales of alcohol for consumption off the premises shall be in sealed containers only, and shall not be consumed on the premises.

**Recommendation: Approve with Conditions (Outlined Above)**

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