

**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 Mr Joe Maddock & Miss Anna Tutton

*(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 <b>Unit 2b Kampus Aytoun Street</b>			
<b>Post town</b>	Manchester	<b>Postcode</b>	M1 3DA

Telephone number at premises (if any)	██████████
Non-domestic rateable value of premises	£0 Under Construction

**Part 2 - Applicant details**

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

- a) an individual or individuals \*  please complete section (A)
- b) a person other than an individual \*
  - i as a limited company/limited liability partnership  please complete section (B)
  - ii as a partnership (other than limited liability)  please complete section (B)
  - iii as an unincorporated association or  please complete section (B)
  - iv other (for example a statutory corporation)  please complete section (B)
- c) a recognised club  please complete section (B)
- d) a charity  please complete section (B)

- e) the proprietor of an educational establishment  please complete section (B)
- f) a health service body  please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales  please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England  please complete section (B)
- h) the chief officer of police of a police force in England and Wales  please complete section (B)

\* If you are applying as a person described in (a) or (b) please confirm (by ticking yes to one box below):

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a
  - statutory function or
  - a function discharged by virtue of Her Majesty's prerogative

**(A) INDIVIDUAL APPLICANTS** (fill in as applicable)

Mr <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b> Maddock			<b>First names</b> Joe		
<b>Date of birth</b> [REDACTED]		I am 18 years old or over <input checked="" type="checkbox"/>		Please tick yes	
<b>Nationality</b> British					
Current residential address if different from premises address		[REDACTED]			
Post town	[REDACTED]	Postcode	[REDACTED]		
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>		[REDACTED]			
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 15 for information)					

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input checked="" type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b> Tutton			<b>First names</b> Anna		
<b>Date of birth</b> [REDACTED]		I am 18 years old or <input checked="" type="checkbox"/> Please tick yes over			
<b>Nationality</b> British					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service: (please see note 15 for information)					
Current residential address if different from premises address		[REDACTED]			
Post town	[REDACTED]	Postcode	[REDACTED]		
<b>Daytime contact telephone number</b>		[REDACTED]			
<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
Address
Registered number (where applicable)

Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD	MM	YYYY
1	0	1 2 2 0 2 1

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

DD	MM	YYYY

<p>Please give a general description of the premises (please read guidance note 1)</p> <p>We will be operating as wine bar in the evening and cafe in the day time, selling small plates of food throughout the day. There will be a small bar area selling alcohol to our customers, 30 seats inside and 15 outside on our balcony (table service throughout). Our sales will consist mostly of wine and food, pushing towards an older market in the city centre. We are a small site just over 1000 (sqft) looking out onto the New Kampus development, with residents above and commercial property underneath, 24 hour security.</p>
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If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

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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)                             | <input type="checkbox"/>   |
| b) films (if ticking yes, fill in box B)                             | <input type="checkbox"/>   |
| c) indoor sporting events (if ticking yes, fill in box C)            | <input type="checkbox"/>   |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/>   |
| e) live music (if ticking yes, fill in box E)                        | <input type="checkbox"/>   |

- 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"/>
Day	Start	Finish			
Mon			<b><u>Please give further details here</u></b> (please read guidance note 4)		
Tue					
Wed			<b><u>State any seasonal variations for performing plays</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 plays at different times to those listed in the column on the left, please list</u></b> (please read guidance note 6)		
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								
Thur								
Fri								
Sat								
Sun								
						<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 5)		
						<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)		

# 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			
Tue			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 5)
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"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
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"/>
Day	Start	Finish			
Mon			<b><u>Please give further details here</u></b> (please read guidance note 4)		
Tue					
Wed			<b><u>State any seasonal variations for the performance of live music</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 live music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 6)		
Sat					
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 checked="" type="checkbox"/>
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 4)			
Mon	09:00	24:00				
Tue	09:00	24:00				
			<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 5)			
Wed	09:00	24:00				
Thur	09:00	24:00				
			<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)			
Fri	09:00	24:00				
Sat	09:00	24:00				
Sun	10:00	24:00				

# 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"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon			<b><u>Please give further details here</u></b> (please read guidance note 4)		
Tue			<b><u>Please give further details here</u></b> (please read guidance note 4)		
Wed			<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 5)		
Thur			<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 5)		
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			<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)		
Sun			<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)		

# H

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 4)		
Wed					
Thur			<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)		
Fri					
Sat			<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)		
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 type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)		
Mon	11:00	24:00			
Tue	11:00	24:00			
Wed	11:00	24:00			
Thur	11:00	24:00			
Fri	11:00	24:00			
Sat	11:00	24:00			
Sun	11:00	24:00			

**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):**

<b>Name</b> Mr Joe Maddock	
<b>Date of birth</b> ██████████	
<b>Address</b> ██████████ ████████████████████ ██████████	
<b>Postcode</b>	██████████
<b>Personal licence number (if known)</b> ██████████	
<b>Issuing licensing authority (if known)</b> Manchester City Council	

## 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).

N/A

## L

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 7)			<b><u>State any seasonal variations</u></b> (please read guidance note 5)
Day	Start	Finish	
Mon	09:00	24:00	<p><b><u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u></b> (please read guidance note 6)</p>
Tue	09:00	24:00	
Wed	09:00	24:00	
Thur	09:00	24:00	
Fri	09:00	24:00	
Sat	09:00	24:00	
Sun	10:00	24:00	



# 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)**

See next page

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

**c) Public safety**

**d) The prevention of public nuisance**

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

## Staff training (alcohol and vulnerability welfare)

- All staff authorised to sell alcohol shall be trained in (delete as appropriate):
  - Relevant age restrictions in respect of products
  - Prevent underage sales
  - Prevent proxy sales
  - Maintain the refusals log
  - Enter sales correctly on the tills so the prompts show as appropriate
  - Recognising signs of drunkenness and vulnerability
  - How overservice of alcohol impacts on the four objectives of the Licensing Act 2003
  - How to refuse service
  - The premises 'duty of care policy, understanding and dealing with situations involving vulnerable people, and incidents of harassment; and how to report issues of modern slavery and trafficking
  - Action to be taken in the event of an emergency, including the preservation of a crime scene and reporting an incident to the emergency services
  - The conditions in force under this licence.
  -
- Training must include evidence that the trainee has gained knowledge and understanding of the training, which may consist of a test or quiz, completed by the trainee.
- Documented records of training completed shall be kept for each member of staff. Training shall be regularly refreshed and at no greater than 6 [Insert: or specify] monthly intervals. Training records shall be made available for inspection upon request by a police officer or an authorised officer of Manchester City Council.

## Preventing and dealing with drunkenness and vulnerability

- The premises shall have a documented Duty of Care policy for managing intoxicated and vulnerable customers and

dealing with incidents of harassment at the premises. The policy shall also include provision for persons refused entry to the premises who are also considered vulnerable by staff.

- The premises shall display prominent signage indicating [Insert: at any point of sale, at the entrance to the premises, in all areas where alcohol is located] that it is an offence to sell alcohol to anyone who is drunk.
- A Personal Licence holder must be present at the premises to supervise all sales of alcohol.
- A minimum of [Insert: specify number] persons must be employed and on duty at the premises between [Insert: specify days/hours] who are specifically tasked to maintain the safety of customers who may be vulnerable, ill or in distress as a result of alcohol and/or drug-related intoxication. Such persons must be trained on drunkenness, vulnerability, and drugs awareness in the night-time economy; and responding to these matters.
- The premises shall provide facilities for customers to securely recharge their mobile phones.

## **The prevention of crime and disorder**

- alleged crimes reported to the venue or by the venue to the police
- ejections of patrons
- complaints received
- incidents of disorder
- seizures of drugs, offensive weapons, fraudulent ID or other items
- faults in the CCTV system, searching equipment or scanning equipment
- refusal of the sale of alcohol
- visit by a responsible authority or emergency service
- the times on duty, names and the licence numbers of all licensed door supervisors employed by the premises.
- suspicious behaviour by patrons or members of the public close to a venue.
- Incident logs (which may be kept electronically) must be kept at the premises for at least six months and made available on request to the police or an authorised officer of the licensing authority.

## **Preventing underage sales**

- The Challenge 25 scheme must be operated to ensure that any person who appears to be under the age of 25 shall provide documented proof that he/she is over 18 years of age. Proof of age shall only comprise a passport, photo card driving licence, an EU/EEA national ID card or similar document, an HM Forces warrant card, a card bearing the PASS hologram, or any electronic or biometric age verification technology approved by the licensing authority.
- The premises shall display prominent signage indicating [Insert either: at any point of sale, at the entrance to the

premises, or in all areas where alcohol is located] that the Challenge 25 scheme is in operation.

- The premises shall display prominent signage indicating [Insert either: at any point of sale, at the entrance to the premises, or in all areas where alcohol is located] that it is an offence to buy or attempt to buy alcohol for a person who is under 18 and for a person under the age of 18 to buy or attempt to buy alcohol.
- A refusals record must be kept at the premises which details all refusals to sell alcohol. This record must include the date and time of the incident, the name of the staff member who refused the sale, and the reason the sale was refused. All entries must be made within 24 hours of the refusal. The record must be made available for inspection and copying within specify days / hours or a reasonable time of a request by an officer of a Responsible Authority.

### c) Public safety

- Being alert to suspicious behaviours and activity in and around your site, such as people loitering or displaying an unusual level of interest in asking questions, or filming or photographing. Note that you and your staff are well placed to know what is “normal” in your environment, and hence what may be suspicious. Where it feels safe to do so, consider engaging the person in a welcoming and helpful manner; if you have any concerns, consider reporting them to the police. Similarly, you and your colleagues should be alert to abandoned bags and other left items, and report any you deem suspicious to the police.
- Being security-minded in your communications, particularly online. Wherever possible, include positive general messages demonstrating your commitment to ensuring the security and safety of visitors and staff. Avoid providing specific information that could help a terrorist plan an attack, for example floor plans containing more detail than is necessary to assist customers with planning their visit, or details of where and when security patrols do (and don't) take place.
- Encouraging and enabling a security culture in the workplace, for example ensuring that any concerns can easily be reported and will be acted upon and ensuring that managers lead by example and avoid giving mixed messages.

### d) The prevention of public nuisance

## Preventing noise and other public nuisances

- All external windows and doors must be kept shut at all times when regulated entertainment is being provided. Doors may be opened for normal entrance and egress of people but must be shut immediately thereafter.
- No noise shall emanate from the premises nor vibration be transmitted through the structure of the premises that gives rise to a nuisance.
- A noise limiting device must be installed and must operate at all times regulated entertainment takes place at the premises. The device must be of a type, in a location and set at a level [Insert: specify if known or approved in writing by the appropriate officer of the Council].
- The location and orientation of loudspeakers must be as specified on the attached premises plan.
- / acoustic door / acoustic curtains / acoustic door seals
- There shall be no noise or odours caused by the kitchen extraction equipment that gives rise to a nuisance.

### e) The protection of children from harm

- 
- Where children are allowed on the premises, information shall be displayed in office on what to do if there is a cause for concern regarding a child's welfare. This shall include reporting to Manchester City Council via its Contact Centre on 0161 234 5000 or [mcsreply@manchester.gov.uk](mailto:mcsreply@manchester.gov.uk), or the NSPCC on 0808 800 5000 (free 24-hour service) or dialling 999 in the event of an immediate threat.

### Checklist:

**Please tick to indicate agreement**

I have made or enclosed payment of the fee.

I have enclosed the plan of the premises. /

**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 or my share code issued by the Home Office online right to work checking service (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</li></ul>
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	service which confirmed their right to work (please see note 15)
Signature	Joe
Date	18/10/21
Capacity	owner

**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	Anna
Date	18/10/21
Capacity	Owner

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			