

Premises Licensing Team
Telephone: +44 (0)161 234 5004
premises.licensing@manchester.gov.uk
Level 1 Town Hall Extension, Albert
Square, PO Box 532, M60 2LA

Application Variation of a Sex Establishment Licence pursuant to Schedule 3, Local Government (Miscellaneous Provisions) Act 1982

This form should be completed and forwarded to the Manchester City Council Premises Licensing Team at the above address with the required fee. Cheques, etc. should be made payable to the Manchester City Council. Payment may also be made by credit or debit card upon request.

Important Notes

- 1. All questions must be answered, save where otherwise stated. If relevant questions are not answered, the application will be deemed incomplete and returned to the Applicant.**
- 2. Any person who, in connection with an application for a grant, renewal or transfer of a sex establishment licence makes a false statement which he knows to be false in any material respect of which he does not believe to be true is guilty of an offence and liable on summary conviction to a fine not exceeding £20,000.**

Part 1 – Premises Details

I/We FAC251 Ltd t/as WHISKEY DOWN (Manchester)
(Insert name(s) of applicant)

apply for the Variation of a Sex Establishment Licence as described below.

1. This variation application is for a:

- Sex Shop
- Sex Cinema
- Sexual Entertainment Venue

Please state the Licence Number of the Sex Establishment premises to be varied	205546
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Name and Postal address of premises			
Whiskey Down (Manchester) 18-22 Lloyd Street			
Post town	Manchester	Post code	M2 5WA

Telephone number	
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Part 2 – Applicant details

Applicant Name	Fac251 Ltd
Address	1 City Road East Manchester M15 4PN
Registered number	06161539
Telephone number	[REDACTED]
E-mail address	[REDACTED]

Part 3 – Variation Details

3	Please describe the nature of the proposed variation
	<p>Changes to Operating Hours to match those of other SEV venues. Amendments to licensed plan Removal of Jacuzzi conditions 52 though 60 no longer present.</p>

3a	Are you seeking to vary the operating hours?		Mark as appropriate	
	Yes		<input checked="" type="checkbox"/>	
	No		<input type="checkbox"/>	
	<i>If Yes, please provide details of the proposed changes:</i>			
		Start	Finish	
	Monday	11:00	06:30	
	Tuesday	11:00	06:30	
	Wednesday	11:00	06:30	
	Thursday	11:00	06:30	
	Friday	11:00	06:30	
Saturday	11:00	06:30		
Sunday	11:00	06:30		

3b	Are you seeking to alter the internal layout of the premises?	Mark as appropriate
	Yes	<input checked="" type="checkbox"/>
	No	<input type="checkbox"/>
	<i>If Yes, please provide details of the proposed changes:</i> Amendments to Licensed Plans removing hot tub and forming 3 new booths	

3c	Are you seeking to remove, or amend, any conditions in Annex 1?	Mark as appropriate
	Yes	<input checked="" type="checkbox"/>
	No	<input type="checkbox"/>
	<i>If Yes, please provide details:</i> Removal of conditions relating to hot tub no longer needed	

Part 4 – Further Information

Please tick yes (as applicable)

I have enclosed the sex establishment licence

I have enclosed the relevant part of the sex establishment licence

If you have not ticked one of the above, please fill in reasons for not including the licence, or part of it, below

Reasons why I have failed to enclose the premises licence or relevant part of premises licence

Please include any further information which you wish the authority to take into account here.

Part 5 – Checklist and Declaration


Checklist	Mark as appropriate
I have completed all relevant section of the application	<input checked="" type="checkbox"/>
I declare that a public notice advertising this application shall be displayed upon the premises where it may be conveniently read by the public and shall remain displayed for a period of no less than 21 consecutive days. A copy of the notice and completed statutory declaration shall be provided to the Licensing Unit.	<input checked="" type="checkbox"/>
I declare that within seven days of the date of this application a public notice advertising this application will be publicised in the legal notices column of the Manchester Evening News and an original copy of the published advertisement shall be forwarded to the Licensing Unit at Manchester City Council forthwith.	<input checked="" type="checkbox"/>
I understand that if I do not comply with the requirements above that my application shall be rejected.	<input checked="" type="checkbox"/>
I declare I have served a copy of this application on Greater Manchester Police.	<input checked="" type="checkbox"/>
I have enclosed the relevant fee	<input checked="" type="checkbox"/>

Declaration & Signature

The following declaration must be signed in all cases

Should the information provided in relation to this application form cease to be correct, or if there are any changes in the information provided in the application form between the date the application is submitted and the date it is determined, the Applicant must advise the licensing authority immediately. Failure to do so may result in any licence issued being revoked.

I/We certify to the best of our/my knowledge and belief that the information given in this application is complete and correct in every respect. I/We agree to notify the Licensing Authority should any of the information given in this application change.

Name	A Mellor
Position in organisation	Managing Director
Date	5 th January 2022
Signature	

Contact Details

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)			
Post town		Post code	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail your e-mail address (optional)			

DOCUMENTS EVIDENCING PUBLIC NOTICE AND SERVICE *(for office use only)*

Complete copy of newspaper circulating in this area of the authority, containing advertisement of this application to be provided upon publication	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Copy of notice of application displayed on or near the premises	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Copy of affidavit or statutory declaration that notice has been displayed as required by Schedule 3 paragraph 10(10) Local Government (Miscellaneous Provisions) Act 1982.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Evidence of service of this application form and all enclosures upon <i>Licensing Partnership Office at Bootle Street Police Station, Bootle Street, Manchester, M2 5GU</i> within 7 days after the date of this application.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

When the application is made electronically, including all enclosures, the licensing authority will serve the Chief Officer of Police.

DOCUMENTS SUPPLIED WITH THIS APPLICATION

(Only include such documents that are subject to change as part of the variation):

A site scale plan (1:1250)	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Drawings showing the front elevation as existing	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Drawings showing the front elevation as proposed including signage, advertising and window display.	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Scale layout plan of premises Note, the requirements of the layout plan are set out below	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Planning Permission	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Certificate of lawful use or development	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
If the Applicant is a company, copies of Memorandum and Articles of Association of the Company	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
If the Applicant is a partnership, a certified copy of the Partnership Deed	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
A copy of any other licences for the premises, vehicle, vessel or stall	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Code of Practice for Performers	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Rules for Customers	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Policy for Welfare of Performers.	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

REQUIREMENTS FOR LAYOUT PLAN:

The layout plan must show;

1. The layout of the premises including, e.g. stage, bars, cloakroom, WCs, performance area, dressing rooms.
2. The extent of the boundary of the premises outlined in red
3. The extent of the public areas outlined in blue.
4. Uses of different area in the premises, e.g. performance areas, reception.
5. Structures or objects (including furniture) which may impact on the ability of individuals to use exits or escape routes without impediment.

6. Location of points of access to and egress from the premises.
7. Any parts used in common with other premises.
8. Position of CCTV cameras.
9. Where the premises includes a stage or raised area, the location and height of each stage or area relative to the floor.
10. Where the premises includes any steps, stairs, elevators or lifts, the location of the same.
11. The location of any public conveniences, including disabled WCs.
12. The position of any ramps, lifts or other facilities for the benefit of disabled people.
13. Any level changes at the entrance to or within public parts of the premises which may be inaccessible to disabled people.
14. The location and type of any fire safety and any other safety equipment.
15. The location of any kitchen on the premises.
16. The location of emergency exits.