

**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 Mayfield Development Partnership LP  
*(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>Mayfield Park, Baring Street,</b>			
<b>Post town</b>	Manchester	<b>Postcode</b>	M1 2PY

Telephone number at premises (if any)	N/A
Non-domestic rateable value of premises	£ nil

**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)X**
  - 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	Mrs	Miss	Ms	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
<b>Date of birth</b>		I am 18 years old or over		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>					
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	Mrs	Miss	Ms	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
<b>Date of birth</b>		I am 18 years old or over		Please tick yes	
<b>Nationality</b>					
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					
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 Mayfield Development Partnership LP
Address <b>7a Howick Place London SW1P 1DZ</b>
Registered number (where applicable) <b>LP017769</b>
Description of applicant (for example, partnership, company, unincorporated association etc.) <b>Limited Partnership</b>
Telephone number (if any)

E-mail address (optional)

### Part 3 Operating Schedule

When do you want the premises licence to start?

DD MM YYYY  
0 1 0 8 2 0 2 2

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

DD MM YYYY  
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

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

A new 6.5 acre city centre park situated in Manchester City Centre. The premises will operate as park 365 days per year and it is intended that events of various size will use the park from time to time.

These will vary from small community events to larger film screening and concerts. Not all events will feature regulated entertainment. When alcohol is to be served at these events temporary bars will be erected within the park.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

max 4999 inc staff

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)	
Day	Start	Finish	Indoors	
			Outdoors	
			Both	X
Mon	0900	2300	<b><u>Please give further details here</u></b> (please read guidance note 4)	
Tue	0900	2300		
Wed	0900	2300	<b><u>State any seasonal variations for performing plays</u></b> (please read guidance note 5)	
Thur	0900	2300		
Fri	0900	2300	<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	0900	2300		
Sun	0900	2300		

**B**

Films Standard days and timings (please read guidance note 7)			Will the exhibition of films take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Day	Start	Finish		Outdoors	
				Both	X
Mon	0900	2300	<b><u>Please give further details here</u></b> (please read guidance note 4)		
Tue	0900	2300			
Wed	0900	2300	<b><u>State any seasonal variations for the exhibition of films</u></b> (please read guidance note 5)		
Thur	0900	2300			
Fri	0900	2300	<b><u>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</u></b> (please read guidance note 6)		
Sat	0900	2300			
Sun	0900	2300			

**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	0900	2300	
Tue	0900	2300	<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 5)
Wed	0900	2300	
Thur	0900	2300	<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)
Fri	0900	2300	
Sat	0900	2300	
Sun	0900	2300	



**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	
				Outdoors	
Day	Start	Finish		Both	X
Mon	0900	23:00	<b><u>Please give further details here</u></b> (please read guidance note 4)		
Tue	0900	23:00			
Wed	0900	23:00	<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 5)		
Thur	0900	23:00			
Fri	0900	23:00	<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	0900	23:00			
Sun	0900	23:00			

**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	
Day	Start	Finish		Outdoors	
Mon	0900	2300			
Tue	0900	2300			
Wed	0900	2300			
Thur	0900	2300			
Fri	0900	2300			
Sat	0900	2300			
Sun	0900	2300			X

<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	
Day	Start	Finish		Outdoors	
Mon	0900	2300			
Tue	0900	2300			
Wed	0900	2300			
Thur	0900	2300			
Fri	0900	2300			
Sat	0900	2300			
Sun	0900	2300			X

<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	
Day	Start	Finish		Outdoors	
Mon	0900	2300			
Tue	0900	2300			
Wed	0900	2300			
Thur	0900	2300			
Fri	0900	2300			
Sat	0900	2300			
Sun	0900	2300			X

<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	
Day	Start	Finish		Outdoors	
Mon	0900	2300			
Tue	0900	2300			
Wed	0900	2300			
Thur	0900	2300			
Fri	0900	2300			
Sat	0900	2300			
Sun	0900	2300			X

<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	
Day	Start	Finish		Outdoors	
Mon	0900	2300			
Tue	0900	2300			
Wed	0900	2300			
Thur	0900	2300			
Fri	0900	2300			
Sat	0900	2300			
Sun	0900	2300			X

<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	
Day	Start	Finish		Outdoors	
Mon	0900	2300			
Tue	0900	2300			
Wed	0900	2300			
Thur	0900	2300			
Fri	0900	2300			
Sat	0900	2300			
Sun	0900	2300			X

**Please give further details here** (please read guidance note 4)

**State any seasonal variations for the performance of live music**  
(please read guidance note 5)

**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** (please read guidance note 6)

**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	
				Outdoors	
Day	Start	Finish		Both	X
Mon	0900	2300	<b><u>Please give further details here</u></b> (please read guidance note 4)		
Tue	0900	2300			
Wed	0900	2300	<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 5)		
Thur	0900	2300			
Fri	0900	2300	<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	0900	2300			
Sun	0900	2300			

# G

Performances of dance 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	
Day	Start	Finish		Outdoors	
					Both
Mon	0900	2300	<b><u>Please give further details here</u></b> (please read guidance note 4)		
	-----	-----			
Tue	0900	2300			
	-----	-----			
Wed	0900	2300	<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 5)		
	-----	-----			
Thur	0900	2300			
	-----	-----			
Fri	0900	2300	<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	0900	2300			
	-----	-----			
Sun	0900	2300			
	-----	-----			

# 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	
Mon				Outdoors	
				Both	
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					

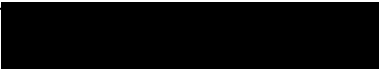
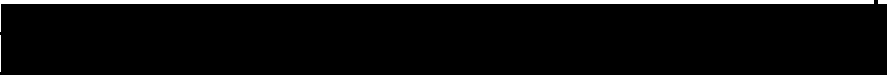
# I

<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	
				Outdoors	
Day	Start	Finish		Both	
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 provision of late night refreshment</u></b> (please read guidance note 5)		
Thur					
Fri			<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					
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	X
				Off the premises	
				Both	
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)		
Mon	1100	2300			
Tue	1100	2300			
Wed	1100	2300			
Thur	1100	2300			
Fri	1100	2300			
Sat	1100	2300			
Sun	1100	2300			
			<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):

<b>Name</b>	Jonathan Paul Drape
<b>Date of birth</b>	
<b>Address</b>	
<b>Postcode</b>	
<b>Personal licence number (if known)</b>	705
<b>Issuing licensing authority (if known)</b>	Bury

**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>State any seasonal variations</b> (please read guidance note 5)
Day	Start	Finish	
Mon	0001	0000	<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)
Tue	0001	0000	
Wed	0001	0000	
Thur	0001	0000	
Fri	0001	0000	
Sat	0001	0000	
Sun	0001	0000	



## 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)**

1. No more than 4999 customers and staff will be permitted on the premises at any one time.
2. The premises licence holder shall ensure a suitable method of calculating the number of people present during licensable activities is in place.
3. The premises licence holder must ensure that:
  - (i) CCTV cameras are located within the premises to cover all public areas including all entrances and exits
  - (ii) The system records clear images permitting the identification of individuals.
  - (iii) The CCTV system is able to capture a minimum of 24 frames per second and all recorded footage must be securely retained for a minimum of 28 days.
  - (iv) The CCTV system operates at all times while the premises are open for licensable activities [or specify timings].
  - (v) All equipment must have a constant and accurate time and date generation.
  - (vi) The CCTV system is fitted with security functions to prevent recordings being tampered with, i.e. password protected.
  - (vii) There are members of trained staff at the premises during operating hours able to provide viewable copies on request to police or authorised local authority officers as soon as is reasonably practicable in accordance with the Data Protection Act 1998 (or any replacement legislation). Preventing illegal drug use
4. 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 the police or an authorised officer of the licensing authority, which will record the following incidents including pertinent details (delete as appropriate): (i) All alleged crimes reported to the venue or by the venue to the police (ii) All ejections of patrons (iii) Any complaints received (iv) Any incidents of disorder (v) Seizures of drugs, offensive weapons, fraudulent ID or other items (vi) Any faults in the CCTV system, searching equipment or scanning equipment (vii) Any refusal of the sale of alcohol (viii) Any faults in the CCTV system, searching equipment or scanning equipment (ix) Any visit by a responsible authority or emergency service (x) The times on duty, names and the licence numbers of all licensed door supervisors employed by the premises. Staff training training raining raining(alcohol (alcohol (alcohol& vulnerability welfare vulnerability welfare)
5. All staff authorised to sell alcohol shall be trained in:
  - (i) Relevant age restrictions in respect of products
  - (ii) Prevent underage sales

- (iii) Prevent proxy sales
  - (iv) Maintain the refusals log
  - (v) Enter sales correctly on the tills so the prompts show as appropriate
  - (vi) Recognising signs of drunkenness and vulnerability
  - (vii) How overservice of alcohol impacts on the four objectives of the Licensing Act 2003 (
  - viii) How to refuse service
  - (ix) The premises' duty of care policy, understanding and dealing with situations involving vulnerable people, and incidents of harassment
6. A Personal licence Holder must be present at the premises to supervise all sales of alcohol.
  7. Drinks must only be served in polycarbonate/plastic containers upon reasonable notice by Greater Manchester Police.
  8. The premises shall display prominent signage indicating [at any point of sale] [at the entrance to the premises] [in all areas where alcohol is located] that the Challenge [25] scheme is in operation.
  9. 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, a description of the customer, 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.  
Alcohol deliveries
  10. The premises shall notify Manchester City Council in writing at least 28 days prior to use of the license for an event with more than 2000 persons in attendance at any one time.
  11. The licence will only be in effect for the area at times when any licensable activity is taking place in the park.

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

1. Door supervisors shall be employed by the premises based upon a risk assessment carried out in relation to the following factors: (i) Size of the venue (ii) Expected attendance (iii) Type of event taking place (iv) Location of the premises (v) Time of year (vi) Special occasion (New Year, Halloween, Local events etc.) (vii) Premises License
2. All door supervisors, and other persons engaged at the premises for the purpose of supervising or controlling queues or customers, must wear [high visibility jackets or vests or armbands].
3. Door supervisors must be provided with radios to enable them to contact each other and the duty manager at the premises.
4. Where SIA registered door supervisors are used at the premises, a record must be kept of their SIA registration number and the dates and times when they are on duty.

**c) Public safety**

1. At all times that the premises are open to the public for licensable activities, all staff on-duty at the premises and all on-duty managers must have completed ACT:Awareness training. In addition, a minimum of 1 on-duty manager must also have completed the ACT:Operational or ACT:Strategic training.
2. The Designated Premises Supervisor must complete the ACT:Awareness training and ACT:Operational or ACT:Strategic training course within 28 days of the grant or variation of the licence. Should the Designated Premises Supervisor named on the licence change, the new Designated Premises Supervisor must complete those courses within 28 days of being named on the licence.
3. Within 28 days of the grant or variation of the licence, a documented security vulnerability assessment, which must incorporate counter terrorism measures, must be undertaken for the premises to include all areas in which licensable activities takes place and which the public will have access and/or transit through. The assessment shall be routinely reviewed and must be reviewed following the elevation of the change of the national threat level. All reviews shall be documented.
4. The designated queuing area shall be enclosed within appropriate barriers and ensure that a minimum width of 1.8m [or specify if greater] is maintained on the footway to allow safe passage by pedestrians.
5. Any special effects or mechanical installations shall be arranged and stored so as to minimise any risk to the safety of those using the premises. The following special effects will only be used if 10 days' prior notice is given to the licensing authority where consent has not previously been given: (i) Dry ice and cryogenic fog (ii) Smoke machines and fog generators (iii) Pyrotechnics, including fireworks (iv) Firearms (eg. Blank firing pistols) (v) Lasers (vi) Explosives and highly flammable substances (vii) Real flame (viii) Strobe lighting.
6. The premises licence holder shall ensure that at all times when the 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 treatment.

7. The premises shall have a minimum 20m rescue throwline available on the premises for emergency use. All on-duty staff (including security) shall be knowledgeable of its location and the manufacturer's instructions for use.
8. A suitable fire risk assessment will be in place at all times licence is in operation.

**d) The prevention of public nuisance**

Any event featuring amplified music will prepare a noise management plan available for inspection

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

1. The premises shall display prominent signage indicating 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.
2. 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.
3. The premises shall display prominent signage indicating at any point of sale that the Challenge [25] scheme is in operation.

Checklist:

Please tick to indicate agreement

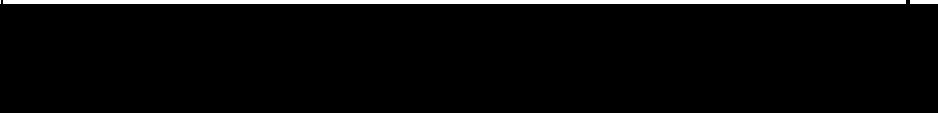
- I have made or enclosed payment of the fee. ✓
  - I have enclosed the plan of the premises. ✓
  - I have sent copies of this application and the plan to responsible authorities and others where applicable. **n/a electronic application**
  - I have enclosed the consent form completed by the individual 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>	
Signature	
Date	17 <sup>th</sup> June 2022
Capacity	Consultant to 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)	
[REDACTED]	
Post town	[REDACTED]
Telephone number (if any)	[REDACTED]
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)	
[REDACTED]	

**Notes for Guidance**

1. 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. In terms of specific regulated entertainments please note that:
  - Plays: no licence is required for performances between 08:00 and 23.00 on any day, provided that the audience does not exceed 500.
  - Films: no licence is required for 'not-for-profit' film exhibition held in community premises between 08.00 and 23.00 on any day provided that the audience does not exceed 500 and the organiser (a) gets consent to the screening from a person who is responsible for the premises; and (b) ensures that each such screening abides by age classification ratings.
  - Indoor sporting events: no licence is required for performances between 08.00 and 23.00 on any day, provided that the audience does not exceed 1000.

Web reference number 4828716

Have you been nominated as DPS on either: A new premises licence

Has the application nominating you as a DPS been submitted? : No

Full name : Jonathan Drape

Address including postcode :

Email :

Daytime telephone number:

Name of applicant that has nominated you to be the DPS: Mayfield Development Partnership

Premises licence number if applicable:

Name and address of the premises : Mayfield Park

Baring St

Manchester

M1 2PY

I hereby give consent..... : to be specified as DPS on the above premises licence and agree to be responsible for the supply of alcohol at the above named premises

And in respect of any premises licence to be granted or varied in respect of this application made by . . . (give name of applicant or premises licence holder) : Mayfield Development Partnership

7a Howick Place

London

SW1P 1DZ

Do you hold a personal licence: Yes

What is your personal licence number?: 705

Which local authority (name, address and telephone number) issued the personal licence?: Bury MBC

Licensing Service

The Town Hall

Knowsley Street

BL9 0SW

I 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

I understand that by submitting this application...: I consent to Manchester City Council passing on the data within this application and it's supporting documents to any authority or person that will assist it's determination of this application, or as required by law

I declare that... : the information provided is true to the best of my knowledge and belief

I understand that... : if any false information is provided I may be guilty of an offence and liable to prosecution

I understand that...: if the application is authorised I must inform the authority about any changes to circumstances that mean I no longer meet the conditions for the authorisation

Where a statutory declaration has been provided I understand...: it may be forwarded to Greater Manchester Police

Please confirm...: I have read fully and understood the contents of this form and any supporting information and agree to the terms and/or conditions set out within