

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 Regeat Negasi
(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 | | | |
| Beilul Lounge First Floor 100 Wilmslow Road | | | |
| Post town | Manchester | Postcode | M14 5AJ |

| | |
|---|-----------------|
| Telephone number at premises (if any) | |
| Non-domestic rateable value of premises | £ 22,500 |

Part 2 - Applicant details

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

| | | | |
|----|--|-------------------------------------|-----------------------------|
| a) | an individual or individuals * | <input checked="" type="checkbox"/> | please complete section (A) |
| b) | a person other than an individual * | <input type="checkbox"/> | |
| | i as a limited company/limited liability partnership | <input 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 | | 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) | |
| Surname Negasi | | | First names Regeat | | |
| Date of birth [REDACTED] | | I am 18 years old or over | | Please tick yes <input checked="" type="checkbox"/> | |
| Nationality [REDACTED] | | | | | |
| Current residential address if different from premises address | | [REDACTED] | | | |
| Post town | [REDACTED] | Postcode | [REDACTED] | | |
| Daytime contact telephone number | | [REDACTED] | | | |
| E-mail address (optional) | | | | | |
| Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service (please see note 15 for information) | | | | | |

| |
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| |
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Second individual applicant (if applicable)

| | | | | | |
|--|-----|-------------------|--------------------|--------------------------------------|--|
| Mr | Mrs | Miss | Ms | Other Title (for example, Rev) | |
| Surname | | | First names | | |
| Date of birth or over | | I am 18 years old | | Please tick yes | |
| Nationality | | | | | |
| Current residential address if different from premises address | | | | | |
| Post town | | | | Postcode | |
| Daytime contact telephone number | | | | | |
| E-mail address (optional) | | | | | |
| Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service: (please see note 15 for information) | | | | | |

(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 | 1 | 0 1 2 0 2 3 |

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) |
| Restaurant and lounge. |

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) | |
| 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) | |

| | |
|---|---|
| <u>Provision of late night refreshment</u> (if ticking yes, fill in box I) | ✓ |
| <u>Supply of alcohol</u> (if ticking yes, fill in box J) | ✓ |

In all cases complete boxes K, L and M

A

| Plays Standard days and timings (please read guidance note 7) | | | Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|--|-------|--------|--|---|--|
| Day | Start | Finish | | Outdoors | |
| Mon | | | | Please give further details here (please read guidance note 4) | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for performing plays (please read guidance note 5) | | |
| Thur | | | | | |
| Fri | | | 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 (please read guidance note 6) | | |
| Sat | | | | | |
| Sun | | | | | |

B

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

C

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

D

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

E

| Live music Standard days and timings (please read guidance note 7) | | | Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|--|-------|--------|---|----------|--|
| Day | Start | Finish | | Outdoors | |
| | | | | Both | |
| Mon | | | Please give further details here (please read guidance note 4) | | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the performance of live music (please read guidance note 5) | | |
| Thur | | | | | |
| Fri | | | 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) | | |
| Sat | | | | | |
| Sun | | | | | |

F

| Recorded music Standard days and timings (please read guidance note 7) | | | Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3) | |
|--|-------|--------|---|--------------------------|
| Day | Start | Finish | Indoors | Outdoors |
| | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> |
| Mon | 23:00 | 00:00 | Please give further details here (please read guidance note 4) | |
| | | | | |
| Tue | 23:00 | 00:00 | State any seasonal variations for the playing of recorded music (please read guidance note 5) | |
| | | | | |
| Wed | 23:00 | 00:00 | | |
| | | | | |
| Thur | 23:00 | 00:00 | | |
| | | | | |
| Fri | 23:00 | 01:00 | 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 (please read guidance note 6) | |
| Sat | 23:00 | 01:00 | | |
| Sun | 23:00 | 00:00 | | |

G

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

H

| | | | | | |
|--|-------|--------|--|----------|--|
| Anything of a similar description to that falling within (e), (f) or (g) 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 | <u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3) | Indoors | |
| Mon | | | | Outdoors | |
| | | | | Both | |
| Tue | | | <u>Please give further details here</u> (please read guidance note 4) | | |
| Wed | | | | | |
| Thur | | | <u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5) | | |
| Fri | | | | | |
| Sat | | | <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> (please read guidance note 6) | | |
| Sun | | | | | |

I

| Late night refreshment Standard days and timings (please read guidance note 7) | | | Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | X |
|--|-------|--------|---|----------|---|
| Day | Start | Finish | | Outdoors | |
| | | | | Both | |
| Mon | 23:00 | 00:00 | <u>Please give further details here</u> (please read guidance note 4) | | |
| Tue | 23:00 | 00:00 | | | |
| Wed | 23:00 | 00:00 | <u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5) | | |
| Thur | 23:00 | 00:00 | | | |
| Fri | 23:00 | 01:00 | <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 | 23:00 | 01:00 | | | |
| Sun | 23:00 | 00:00 | | | |

J

| Supply of alcohol Standard days and timings (please read guidance note 7) | | | Will the supply of alcohol be for consumption – please tick (please read guidance note 8) | On the premises | <input checked="" type="checkbox"/> |
|---|-------|--------|---|------------------|-------------------------------------|
| | | | | Off the premises | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Day | Start | Finish | State any seasonal variations for the supply of alcohol (please read guidance note 5) | | |
| Mon | 13:00 | 00:00 | | | |
| Tue | 13:00 | 00:00 | | | |
| Wed | 13:00 | 00:00 | | | |
| Thur | 13:00 | 00:00 | | | |
| Fri | 13:00 | 01:00 | | | |
| Sat | 13:00 | 01:00 | | | |
| Sun | 13:00 | 00:00 | | | |
| | | | Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 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 [REDACTED] | |
| Date of birth [REDACTED] | |
| Address [REDACTED] [REDACTED] | |
| Postcode | [REDACTED] |
| Personal licence number (if known) [REDACTED] | |
| Issuing licensing authority (if known) [REDACTED] | |

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

| | | | |
|---|-------|--------|--|
| <p>Hours premises are open to the public Standard days and timings (please read guidance note 7)</p> | | | <p>State any seasonal variations (please read guidance note 5)</p> |
| Day | Start | Finish | |
| Mon | 13:00 | 00:30 | |
| Tue | 13:00 | 00:30 | |
| Wed | 13:00 | 00:30 | |
| Thur | 13:00 | 00:30 | |
| Fri | 13:00 | 01:30 | |
| Sat | 13:00 | 01:30 | |
| Sun | 13:00 | 00:30 | |
| | | | <p>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 (please read guidance note 6)</p> |

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)

A Challenge 25 policy will be strictly followed by all staff.
Staffs are trained as appropriate in respect of relevant licensing law.
The open nature of the restaurant allows for good viewing coverage. CCTV cameras are installed.

b) The prevention of crime and disorder

The premises will operate Challenge 25 policy as a minimum in order to ensure that alcohol is sold only to persons of lawful age.
The Designated Premises Supervisor and their staff will at all times remain aware of their responsibilities for the prevention of crime and disorder on the premises and demonstrate a responsible attitude to the marketing and sale of alcohol.
Any person who appears drunk /aggressive will not be permitted on the premises.
CCTV recordings will be kept for at least 30 days and made available to responsible authorities.

c) Public safety

A fire alarm system will be installed to meet BS 5839 Part 1 current standards.
An emergency lighting system will be installed to meet BS 5266 current standards.
Firefighting equipment will be available in the premises to meet BS 5306 current standards.
Floor staff will conduct physical sweep inside the premises to remove hazardous objects/waste as deemed necessary by the management.
The Designated Premises Supervisor is aware of his responsibilities to the staff and customers in respect of public safety and will take all reasonable steps to ensure the maintenance of all provided safety arrangements and equipment in accordance with the requirements of current installations.

d) The prevention of public nuisance

Notices will be displayed at the exit of the premises asking patrons to leave the premises quietly.
All deliveries will be conducted prior to 6pm to control noise nuisance.
In conjunctions with the steps proposed for the prevention of crime and disorder objectives, the Licensees and staff will at all times remain responsible for the prevention of public nuisance in and around the premises.
The Designated Premises Supervisor will arrange to monitor levels of noise from both inside and outside the premises and remedial action will be taken as appropriate.
Doors and windows will be kept closed as deemed necessary by the Designated Premises Supervisor.

e) The protection of children from harm

The Designated Premises Supervisor and staff will at all times remain aware of their responsibilities under the objective, including that alcohol shall not be sold to anyone under the age of 18.

Staff on duty will be trained and made aware of a challenge 25 policy and the requirements and the need to demand an acceptable form of age id.

No adult entertainment is permitted at these 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.**

| | |
|--------------------|--|
| Declaration | <ul style="list-style-type: none"> [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 |
|--------------------|--|

| | |
|-----------|--|
| | <p>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).</p> <ul style="list-style-type: none"> 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, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15) |
| Signature | [REDACTED] |
| Date | 09/12/2022 |
| Capacity | Agent |

For joint applications, signature of 2nd applicant or 2nd 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 | |

| | | | |
|---|--------------------------|----------|------------|
| <p>Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)</p> <p>[REDACTED] [REDACTED]</p> | | | |
| Post town | [REDACTED] | Postcode | [REDACTED] |
| Telephone number (if any) | [REDACTED] | | |
| If you | [REDACTED] [REDACTED] | | |