

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 Bereket Amanuel

(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			
Sam Off Licence 20A Swan Street Manchester			
Post town	Manchester	Postcode	M4 5JW

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£ 4,100

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 Bereket			First names Amanuel		
Date of birth [REDACTED]		I am 18 years old or over		Please tick yes ✓	
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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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
3	1	0 5 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)
Off Licence

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

What licensable activities do you intend to carry on from the premises?

(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)	Please tick all that apply
a) plays (if ticking yes, fill in box A)	
b) films (if ticking yes, fill in box B)	
c) indoor sporting events (if ticking yes, fill in box C)	
d) boxing or wrestling entertainment (if ticking yes, fill in box D)	

e)	live music (if ticking yes, fill in box E)	
f)	recorded music (if ticking yes, fill in box F)	
g)	performances of dance (if ticking yes, fill in box G)	
h)	anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)	

<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)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Thur					
Fri			<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> (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	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 5)		
Thur					
Fri			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 (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)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Day	Start	Finis h		Outdoors	
Mon				Both	
			<u>Please give further details here</u> (please read guidance note 4)		
			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
			<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> (please read guidance note 6)		

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	
				Outdoors	
Day	Start	Finish		Both	
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

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	
				Off the premises	✓
				Both	
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Mon	09:00	01:00			
Tue	09:00	01:00			
Wed	09:00	01:00			
Thur	09:00	01:00			
Fri	09:00	01:00			
Sat	09:00	01:00			
Sun	09:00	01:00			
			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	Bereket Amanuel
Date of birth	██████████
Address	██████████ ██████████
Postcode	██████████
Personal licence number (if known)	██████████
Issuing licensing authority (if known)	Manchester City Council

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.

CCTV images will be kept for 31 days

b) The prevention of crime and disorder

A Challenge 25 policy will be strictly followed by all staff. No member of staff shall be permitted to sell alcohol until trained in the operation of the Challenge 25 policy. Any person who appears to be under the age of 25 who attempts to buy alcohol shall be challenged to provide age verification in the form of a passport, photo driving licence or PASS accredited card. Where proper verification is not provided the sale shall be refused. A record of the refusal shall be kept in the refusals log, identifying the member of staff who refused the sale. The refusal log will be always kept on the premises and made available to responsible authorities upon request.

The premises shall display prominent signage indicating at any point of sale, that the Challenge 25 scheme is in operation.

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.

The premises licence holder must ensure that: CCTV cameras are located within the premises to cover all public areas including all entrances and exits.

The system records clear images permitting the identification of individuals. 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 31days. The CCTV system operates at all times while the premises are open for licensable activities. All equipment must have a constant and accurate time and date generation. The CCTV system is fitted with security functions to prevent recordings being tampered with, i.e. password protected. There must be at least one member 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). CCTV hard drive needs to be replaced the previous / old hard drive will be kept on site for a minimum of 31 days and made immediately available to any of the responsible authorities on request.

A refusals record will 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 by an officer of a Responsible Authority

All staff other than personal license holders must receive training regarding the: -

- Four licensing principles contained in the Licensing Act 2003
- Responsible retailing of alcohol, and the law
- The conditions attached to the premises 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 monthly intervals. Training records shall be made available for inspection upon request by a police officer or an authorised officer of Manchester City Council.

A minimum of 2 persons must be employed and on duty at the premises between 22:00 and 01:00 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.

All staff will receive training on proxy sale of alcohol and other age restricted products. Training will be documented and made available to responsible authorities upon request.

All spirits and expensive alcohol will be kept behind the counter and out of reach of customers.

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 7pm to control noise nuisance.

In conjunction 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.

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
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	<p>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).</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	██████████
Date	02/05/2023
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>████████████████████ ████████████████</p>			
Post town	██████████	Postcode	██████████
Telephone number (if any)	████████████████████		
<p>If you would prefer us to correspond with you by e-mail, your e-mail address (optional)</p> <p>████████████████████</p>			

Consent of individual to being specified as premises supervisor

I **Bereket Amanuel**

[full name of prospective premises supervisor]

of



[home address of prospective premises supervisor]

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

Premises Licence

[type of application]

by

Bereket Amanuel

[name of applicant]

relating to a premises licence

[number of existing licence, if any]

for

**Sam Off Licence
20a Swan Street
Manchester
M4 5JW**

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

and any premises licence to be granted or varied in respect of this application made by

Bereket Amanuel

[name of applicant]

concerning the supply of alcohol at

Sam Off Licence
20a Swan Street
Manchester
M4 5JW

[name and address of premises to which application relates]

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

Personal licence number

268953

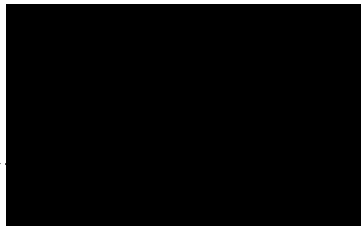
[insert personal licence number, if any]

Personal licence issuing authority

Manchester City Council

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed



Name (please print)

BEREKET AMANUEL

Date

9/2/23