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 | Edge Restaurants (NW) Limited |
|--------------|---|
| pren appl | (Insert name(s) of applicant) y for a premises licence under section 17 of the Licensing Act 2003 for the hises described in Part 1 below (the premises) and I/we are making this ication to you as the relevant licensing authority in accordance with section 12 e Licensing Act 2003 |

Part 1 - Premises details

| Postal address of premises or, if none, ordnance survey map reference or description | | | | | | |
|--|--|--|--|--|--|--|
| McDonald's Restaurants 10 Queens Road Manchester Fort Shopping Park | | | | | | |
| Post townManchesterPostcodeM8 8UF | | | | | | |

| Telephone number at premises (if | | | |
|----------------------------------|---|---------|--|
| any) | | | |
| Non-domestic rateable value of | c | 137.000 | |
| premises | 2 | 137,000 | |

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) | ар | erson other than an individual * | | |
| | i | as a limited company/limited liability partnership | X | 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):

- \bullet 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 | N | Ms | Other Title (for example, Rev) | |
|--|--|----------|---|----------|--------------------------------|--|
| Surname | | | | First na | nmes | |
| Date of bir | th | I am 18 | I am 18 years old or over Please tick yes | | | |
| Nationality | / | | | | | |
| Current res address if of from premis address | differen | | | | | |
| Post town | | | | | Postcode | |
| Daytime co | ontact t | elephone | | | | |
| E-mail add (optional) | Iress | | | | | |
| work check | if demonstrating a vice), the 'share of 5 for information) | ode' pr | | | | |

Second individual applicant (if applicable)

| Mr | Mrs | Miss | Miss N | | | ner Title rexample, v) | |
|---|----------|------|--------|----------|-----|------------------------------|--------------|
| Surname | | | | First n | ame | s | |
| Date of bir or over | rth | | I am | 18 years | old | Plea | ase tick yes |
| Nationality | / | | | | | | |
| Current res address if of from premi address | differen | • | | | | | |
| Post town | | | | | | Postcode | |
| Daytime co | | | | | | | |
| E-mail add (optional) | | | | | | | |
| Where applicable (if demonstrating a work checking service), the 'share co (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 Edge Restaurants (NW) Limited | | | | | | | |
|---|--|--|--|--|--|--|--|
| Address | | | | | | | |
| McDonald's Restaurant West One Retail Park Gilda Brook Road Salford M50 1ZD | | | | | | | |
| Registered number (where applicable) 09535061 | | | | | | | |
| Description of applicant (for example, partnership, company, unincorporated association etc.) Company | | | | | | | |
| Telephone number (if any) | | | | | | | |
| E-mail address (optional) | | | | | | | |

Part 3 Operating Schedule

| Wh | When do you want the premises licence to start? DD MM YYYY 2 1 1 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? | | | | | | | | | | |
| Ple | ase give a general description of the premises (please rea | ıd anie | dance note 1) | | | | | | | | |
| Res | staurant selling hot food and non alcoholic drink for consumises. | • | , | | | | | | | | |
| at ar | 000 or more people are expected to attend the premises my one time, please state the number expected to attend. Ilicensable activities do you intend to carry on from the presented to the carry on from the carry of t | emise | .5? | | | | | | | | |
| | se see sections 1 and 14 and Schedules 1 and 2 to the Li | | | | | | | | | | |
| Pro 2) | vision of regulated entertainment (please read guidance n | ote | 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 | x D) | | | | | | | | | |
| e) | live music (if ticking yes, fill in box E) | | | | | | | | | | |
| f) | recorded music (if ticking yes, fill in box F) | | | | | | | | | | |
| g) | 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>Pro</u> | Provision of late night refreshment (if ticking yes, fill in box I) X | | | | | | | | | | |
| <u>Su</u> p | Supply of alcohol (if ticking yes, fill in box J) | | | | | | | | | | |

In all cases complete boxes K, L and M $\,$

Α

| Plays Standard days and timings (please read | | | Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|---|----------|------------|--|---------------|------|
| | nce note | | , — (i | Outdoors | |
| Day | Start | Finis h | | Both | |
| Mon | | | Please give further details here (please read) | ad guidance r | note |
| Tue | | | | | |
| Wed | | | State any seasonal variations for perform (please read guidance note 5) | ning plays | |
| Thur | | | | | |
| Fri | | | Non standard timings. Where you intend premises for the performance of plays at to those listed in the column on the left. | different tim | nes_ |
| Sat | | | (please read guidance note 6) | | |
| Sun | | | | | |

В

| Films Standard days and timings (please read | | | Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|--|----------|------------|--|---------------------|------|
| | ncë note | | , | Outdoors | |
| Day | Start | Finis h | | Both | |
| Mon | | | Please give further details here (please re 4) | ad guidance r | note |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the exh (please read guidance note 5) | ibition of fil | ms_ |
| Thur | | | | | |
| Fri | | | Non standard timings. Where you intend premises for the exhibition of films at dif those listed in the column on the left, ple | <u>ferent times</u> | |
| Sat | | | read guidance note 6) | | |
| Sun | | | | | |

C

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

D

| Boxing or wrestling entertainments Standard days and | | ts | Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please | Indoors | |
|--|---------------------------------------|------------|---|---------------|------|
| timing | timings (please read guidance note 7) | | read guidance note 3) | Outdoors | |
| Day | Start | Finis h | | Both | |
| Mon | | | Please give further details here (please read) | ad guidance r | note |
| Tue | | , | | | |
| Wed | | | State any seasonal variations for boxing entertainment (please read guidance note s | | - |
| Thur | | | | | |
| Fri | | | Non standard timings. Where you intend premises for boxing or wrestling entertaid different times to those listed in the column to the column | nment at | eft, |
| Sat | | | please list (please read guidance note 6) | | |
| Sun | | | | | |

Ε

| Live music Standard days and timings (please read | | | Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|---|----------|------------|---|------------------------|-------------|
| | ncë note | | , | Outdoors | |
| Day | Start | Finis h | | Both | |
| Mon | | | Please give further details here (please re 4) | ad guidance r | note |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the perimusic (please read guidance note 5) | formance of | <u>live</u> |
| Thur | | | | | |
| Fri | | | Non standard timings. Where you intend premises for the performance of live mustimes to those listed in the column on the | <u>sic at differer</u> | |
| Sat | | | (please read guidance note 6) | | |
| Sun | | | | | |

F

| Recorded music Standard days and timings (please read | | and | Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|---|----------|------------|---|----------------|------------|
| | nce note | | , | Outdoors | |
| Day | Start | Finis h | | Both | |
| Mon | | | Please give further details here (please re 4) | ad guidance r | note |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the play music (please read guidance note 5) | ing of recor | <u>ded</u> |
| Thur | | | | | |
| Fri | | | Non standard timings. Where you intend premises for the playing of recorded mustimes to those listed in the column on the | sic at differe | |
| Sat | | | (please read guidance note 6) | | |
| Sun | | | | | |

G

| Performances of dance Standard days and | | | Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | |
|---|--|------------|--|------------------------|------|
| | timings (please read guidance note 7) | | , | Outdoors | |
| Day | Start | Finis h | | Both | |
| Mon | | | Please give further details here (please re 4) | ad guidance r | note |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the per dance (please read guidance note 5) | formance of | |
| Thur | | | | | |
| Fri | | | Non standard timings. Where you intend premises for the performance of dance at to those listed in the column on the left, | <u>t different tir</u> | nes_ |
| Sat | | | (please read guidance note 6) | | |
| Sun | | | | | |

Н

| Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7) | | ption within and e read | Please give a description of the type of enterbe providing | rtainment you | will |
|--|-------|----------------------------------|--|--------------------------------|------------|
| Day | Start | Finis h | Will this entertainment take place indoors or outdoors or both – please | Indoors | |
| Mon | | | <u>tick</u> (please read guidance note 3) | Outdoors | |
| | | | | Both | |
| Tue | | | Please give further details here (please re 4) | ad guidance ı | note |
| Wed | | | | | |
| Thur | | | State any seasonal variations for entertal similar description to that falling within (please read guidance note 5) | inment of a e), (f) or (g) | |
| Fri | | | | | |
| Sat | | | Non standard timings. Where you intend premises for the entertainment of a simila that falling within (e), (f) or (g) at differen listed in the column on the left, please lis- guidance note 6) | r description t times to th | <u>ose</u> |
| Sun | | | | | |

I

| Late night refreshment Standard days and | | and | Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please | Indoors | |
|--|---------------------------------------|------------|---|---------------|----------|
| timing | timings (please read guidance note 7) | | read guidance note 3) | Outdoors | |
| Day | Start | Finis h | | Both | Х |
| Mon | 23:00 | 05:00 | Please give further details here (please re 4) | ad guidance ı | note |
| | | | , | | |
| Tue | 23:00 | 05:00 | | | |
| | | | | | |
| Wed | 23:00 | 05:00 | State any seasonal variations for the pro | | <u>e</u> |
| | | | night refreshment (please read guidance n | ote 5) | |
| Thur | 23:00 | 05:00 | | | |
| | | | | | |
| Fri | 23:00 | 05:00 | Non standard timings. Where you intend premises for the provision of late night re | | at |
| | | | different times, to those listed in the colu | | |
| Sat | 23:00 | 05:00 | please list (please read guidance note 6) | | |
| | | | | | |
| Sun | 23:00 | 05:00 | | | |
| | | | | | |

J

| Standa | upply of alcohol tandard days and nings (please read | | Will the supply of alcohol be for consumption – please tick (please read guidance note 8) | On the premises | |
|--------|--|------------|---|------------------|-----------|
| | nce note | | , | Off the premises | |
| Day | Start | Finis h | | Both | |
| Mon | | | State any seasonal variations for the sup (please read guidance note 5) | ply of alcoh | <u>ol</u> |
| Tue | | | | | |
| Wed | | | | | |
| Thur | | | Non standard timings. Where you intend premises for the supply of alcohol at diff those listed in the column on the left, ple | erent times t | |
| Fri | | | read guidance note 6) | | |
| Sat | | | | | |
| Sun | | | | | |

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 | | |
|--|--|--|
| Date of birth | | |
| Address | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Postcode | | |
| Personal licence number (if known) | | |
| | | |
| Issuing licensing authority (if known) | | |
| | | |

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).

The premises operates as an outlet of food and non-alcoholic drink and does not provide any adult entertainment or service that gives rise to a concern in respect of children.

ı

| Hours premises are open to the public Standard days and timings (please read guidance note 7) | | ublic and read | State any seasonal variations (please read guidance note 5) |
|---|-------|-----------------------------|---|
| Day | Start | Finis h | |
| Mon | 05:00 | 05:00 | |
| Tue | 05:00 | 05:00 | |
| Wed | 05:00 | 05:00 | |
| | | | Non standard timings. Where you intend the premises to be open to the public at different times from those listed |
| Thur | 05:00 | 05:00 | in the column on the left, please list (please read guidance note 6) |
| Fri | 05:00 | 05:00 | |
| | | | |
| Sat | 05:00 | 05:00 | |
| Sun | 05:00 | 05:00 | |

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)

This restaurant understands that in extending our opening hours we have a duty to the local community and that we continue to protect our staff and customers from danger and harm. We believe that the systems we have in place are robust, thorough and will, as far as reasonably practicable, secure the promotion of the four licensing objectives. It should be noted that no McDonald's restaurant within the United Kingdom serves alcohol and further none of our drinks or food are served to customers in glass receptacles.

We are eager to work in partnership with all responsible authorities to ensure the promotion of the four licensing objectives. We also seek to work with the local communities, whom we serve, in achieving a successful cohesion between our business operations and our neighbours.

b) The prevention of crime and disorder

This restaurant is keen to work in partnership with the local police service to prevent crime and disorder.

CCTV

McDonald's operates a robust CCTV Policy to ensure compliance with Data Protection Legislation and to assist the Police with the prevention and detection of crime. At all stores where CCTV is in operation appropriate signage reflecting this information is displayed.

McDonald's operate digital motion activated CCTV systems where images are retained on a hard drive system. All CCTV equipment is of a standard suitable to record images of a proper quality, it meets the industry standard and has LGC Forensics or Kalagate Certification. As part of the digital system an alarm will sound if the equipment is faulty or not recording, thereby alerting management for the need to intervene. The CCTV system is regularly serviced by qualified maintenance technicians.

Access to the CCTV system will be provided to Police Officers at their request where reasonable.

Staffsafe

A Staffsafe™ system with both audio and visual monitoring capability will be installed in the restaurant, this system, can be activated by either fixed or mobile panic buttons. Once activated the system links the restaurant to an external monitoring centre capable of intervening to resolve crime and disorder issues and/or provide the appropriate advice or instruction to support and protect the restaurant's staff and customers.

At this restaurant all shift managers have safety and security training; including Maybo SIA accredited Conflict Management Training.

c) Public safety

This restaurant is keen to work in partnership with the local Fire Service and Environmental Health Officer to ensure public safety.

This restaurant has safety systems in place to protect the safety of customers and staff at all times (such as Staffsafe). We work with the local Environmental Health Office and local Fire Service to ensure we are complying, as far as reasonably practicable, with relevant Health and Safety and Fire Safety Legislation. This restaurant is also subject to inspections from our own safety and security teams to ensure our systems are being maintained.

All of our restaurant staff receive comprehensive safety training to ensure that safe working methods are adopted and all staff are trained on the restaurant's evacuation procedure in the event of a fire or other dangerous occurrence.

This store operates a "No Open Alcohol Containers" policy to prevent persons carrying open alcohol into the in-store area.

d) The prevention of public nuisance

Litter

McDonald's were the first company in our sector to introduce litter patrols in the early 1980's. McDonald's is committed to carry out litter patrols collecting both McDonald's packaging and any other litter that has been carelessly discarded. We are happy to act on recommendations from the Environmental Health Officer should they feel that we should extend our patrol to a nearby area, as far as this is reasonably practicable.

All of McDonald's packaging displays the recycle symbol to encourage our customers to deal with their waste responsibly. Further details regarding McDonald's commitment to reducing waste and litter nuisance can be found at the "Our World" section of the McDonald's website:

https://www.mcdonalds.com/gb/en-gb/our-plan-for-change.html

Noise

Where it is practical to do so we are content to put measures in place to limit noise. All McDonald's restaurant doors are self-closing and we try to encourage our customers to be considerate to our neighbours and to limit noise both when ordering their food and on leaving the local area.

e) The protection of children from harm

McDonald's do not anticipate that unaccompanied children will use the restaurant in the extended hour's period covered by this licensing application. We do however take their safety extremely seriously and will continue to employ the same practices to ensure that they are protected from harm at all times when visiting the restaurant.

Checklist:

Please tick to indicate agreement

| | | X |
|---|--|---|
| • | I have made or enclosed payment of the fee. | |
| • | I have enclosed the plan of the premises. | X |
| • | 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. | X |
|---|--|---|
| • | I understand that if I do not comply with the above requirements my application will be rejected. | X |
| • | [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). | Λ |

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 | [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). |
|-------------|--|
| | 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 | 23 rd October 2023 |
| Capacity | Solicitors on behalf of the Applicant |

| 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) | | |
| | • | ` ' ' |
| | | |
| | | |