

20 MAR 2014

Blackpool Council

APPLICATION TO VARY A PREMISES LICENCE

Applicant Name(s):

DORBIERE LIMITED

Built Environment

Licensing Service
Blackpool Council
Municipal Buildings, PO Box 4
Blackpool, FY1 1NA

Contact

T: (01253) 47 8572 / 8589
F: (01253) 47 8372
www.blackpool.gov.uk



Application to vary a Premises Licence under the Licensing Act 2003

Please read the following instructions first:

Before completing this form please read the guidance notes at the end of this 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.

Full name/s of the premises licence holder/s:
1) DORBIERE LIMITED
2)
3)

I/We the premises licence holder/s named above, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1

Premises Licence number:	PL0607
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Part 1 – Premises Details

Premises Address	BOARS HEAD	
	38 PRESTON OLD ROAD, MARTON,	
	BLACKPOOL	Post Code FY39PL
Telephone Number of premises (if any)		
Non-domestic rateable value of premises		

Part 2 – Applicant details

Title:		Mrs		Ms	Other	Forename(s)		
Surname					Date of Birth	Day	Month	Year
Home address	DORBIERE LIMITED, UNIT 3 STAINBURN							
	ROAD, OPENSHAW							
	MANCHESTER	Post Code	M	1	1	2	0	N
Telephone Number	01617384060			Mobile Number				
E-Mail address	Becky.Driver@lwc-Drinks.co.uk							

DD.4086

SECOND INDIVIDUAL APPLICANT (If Applicable)

Title:		Mrs		Ms	Other	Forename(s)					
Surname					Date of Birth	Day	Month	Year			
Home address											
						Post Code					
Telephone Number					Mobile Number						
E-Mail address											

A. 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											
						Post Code					
Registered number											
Description of applicant (for example partnership, company, unincorporated association)											
Telephone number											
E-Mail address (optional)											

Part 3 – Variation

If yes please tick

Do you want the proposed variation to have effect as soon as possible?

If not, when do you want the variation to take effect from?

Day		Month		Year		

If your proposed variation would mean that 5,000 or more people could be expected to attend the premises at any one time, please state the number expected to attend

Please describe briefly the nature of the proposed variation (Please see guidance note 1)

TO EXTEND THE HOURS OF THE SALE OF ALCOHOL ON A FRIDAY + SATURDAY NIGHT FROM 00.00 TO 01.00

TO EXTEND THE CLOSING HOURS OF THE PREMISES ON A FRIDAY + SATURDAY NIGHT FROM 00.30 TO 01.30

TO LIFT THE CONDITION OF NOT HAVING AMPLIFIED MUSIC OFF THE LICENCE ALLOWING US TO PLAY AMPLIFIED MUSIC ON A FRIDAY + SATURDAY NIGHT UNTIL 00.30

TO ADHERE TO THE ABOVE CONDITION WE ARE HAVING ACOUSTIC GLAZED WINDOWS INSTALLED WHICH WILL KEEP NOISE TO A MINIMUM

Part 4 – Operating Schedule

Please complete those parts of the Operating Schedule below that would be subject to change if this application to vary is successful.

Provision of regulated entertainment:

If yes please tick

- a) A performance of a play (if ticking yes, fill in box A)
- b) An exhibition of a film (if ticking yes, fill in box B)
- c) An indoor sporting event (if ticking yes, fill in box C)
- d) Boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) A performance of live music (if ticking yes, fill in box E)
- f) Any playing of recorded music (if ticking yes, fill in box F)
- g) A performance of dance (if ticking yes, fill in box G)
- h) Entertainment 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)

Sale by retail of alcohol (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 6)			Will the performance of a play take place indoors, outdoors or both – please tick accordingly (Please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue					
Wed			State any seasonal variation for performing plays (please read guidance note 4)		
Thu					
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 see guidance note 5)		
Sat					
Sun					

C

Films Standard days and timings (please read guidance note 6)			Will the exhibition of films take place indoors, outdoors or both – please tick accordingly (Please read guidance note 2)	Indoors
Day	Start	Finish		Outdoors
Mon			Please give further details here (please read guidance note 3)	Both
Tue				
Wed			State any seasonal variation for the exhibition of films (please read guidance note 4)	
Thu				
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 see guidance note 5)	
Sat				
Sun				

C

Indoor sporting event Standard days and timings (please read guidance note 6)			Please give further details (Please see guidance note 3)
Day	Start	Finish	
Mon			
Tue			
Wed			State any seasonal variations for indoor sporting events (please read guidance note 3)
Thu			
Fri			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 see guidance note 5)
Sat			
Sun			

C
D

Boxing or wrestling entertainment Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors, outdoors or both – please tick accordingly (Please read guidance note 2)	Indoors	Outdoors
Day	Start	Finish		Both	
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variation for boxing or wrestling entertainment (please read guidance note 4)		
Thu					
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 see guidance note 5)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors, outdoors or both – please tick accordingly (Please read guidance note 2)	Indoors	Outdoors
Day	Start	Finish		Both	
Mon			Please give further details here (please read guidance note 3) TO HAVE LIVE MUSIC ON A FRIDAY + SATURDAY NIGHT UNTIL 00.30	<input checked="" type="checkbox"/>	
Tue					
Wed			State any seasonal variation for performance of live music (please read guidance note 4)		
Thu					
Fri	11.00	00.30	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 see guidance note 5)		
Sat	11.00	00.30			
Sun					

C

NO charge required



Recorded music Standard days and timings (please read guidance note 6)			Will the performance of recorded music take place indoors, outdoors or both – please tick accordingly (Please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3) AMPLIFIERS AND SPEAKERS	Both	
Tue					
Wed					
Thu			State any seasonal variation for playing recorded music (please read guidance note 4)		
Fri	11:00	00:30			
Sat	11:00	00:30	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 see guidance note 5)		
Sun					

G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors, outdoors or both – please tick accordingly (Please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue					
Wed					
Thu			State any seasonal variation for the performance of dance (please read guidance note 4)		
Fri	11:00	00:30			
Sat	11:00	00:30	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 (please see guidance note 5)		
Sun					

↑ Not required - see attached email

C

Anything of a similar description to that falling within (E), (F) or (G) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing		
			Will this entertainment take place indoors, outdoors or both – please tick accordingly (Please read guidance note 2)		<input checked="" type="checkbox"/>
			Indoors		
			Outdoors		
			Both		
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue					
Wed			State any seasonal variation for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)		
Thu					
Fri	11:00	00:30	Non-standard timings. Where you intend to use the premises for the entertainment of similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list (please see guidance note 5)		
Sat	11:00	00:30			
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors, outdoors or both – please tick accordingly (Please read guidance note 2)		<input type="checkbox"/>
			Indoors		
			Outdoors		
			Both		
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue					
Wed			State any seasonal variation for the provision of late night refreshment (please read guidance note 4)		
Thu					
Fri			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 (please see guidance note 5)		
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the sale of alcohol for consumption be on the premises, off the premises or both (Please read guidance note 7)	On the Premises	<input checked="" type="checkbox"/>
Day	Start	Finish		Off the premises	<input type="checkbox"/>
Mon			State any seasonal variation for the supply of alcohol (please read guidance note 4)	Both	<input type="checkbox"/>
Tue					
Wed					
Thu					
Fri	11:00	1:00		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 see guidance note 5)	
Sat	11:00	1:00			
Sun					

K

Please highlight any adult entertainment or services, activities, other entertainment or matter ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8)

Hours premises are open to the public			State any seasonal variations (please read guidance note 4)
Standard days and timings (please read guidance note 6)			
Day	Start	Finish	Non-standard timings. Where you intend to use the premises to be open to the public at different times to those listed in the column on the left, please list (please see guidance note 5)
Mon			
Tue			
Wed			
Thu			
Fri	10:00	01:30	
Sat	10:00	01:30	
Sun			

Please identify those conditions currently imposed on the licence that you believe could be removed as a consequence of the proposed variation you are seeking

TO REMOVE THE CONDITION OF NO AMPLIFIED MUSIC OFF THE LICENSE

I have enclosed the existing premises licence and summary

If yes please tick

I have enclosed the relevant part of the premises licence

If you have not ticked one of these boxes you are required to give your reasons for not including the licence, or any part of it below.

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

M

Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

a) General – all four licensing objectives (b,c,d,e) (See guidance note 9)

WE WILL CONTINUE TO MAINTAIN THE CURRENT LICENSING OBJECTIVES IN THE OPERATING SCHEDULE

b) The prevention of crime and disorder

WE ARE WILLING TO HAVE DOOR STAFF TO PREVENT CRIME + DISORDER

c) Public Safety

WE WILL CONTINUE TO OPERATE IN LINE WITH THE CURRENT OPERATING SCHEDULE

d) The prevention of public nuisance

WE WILL CONTINUE TO OPERATE IN LINE WITH THE CURRENT OPERATING SCHEDULE

e) The protection of children from harm

WE WILL CONTINUE TO OPERATE IN LINE WITH THE CURRENT OPERATING SCHEDULE

If yes please tick

- I have made or enclosed payment of the fee
- I have sent copies of this application, a copy of the plan and a photocopy of the existing premises licence to responsible authorities and others where applicable
- I understand that I must advertise my application
- I have enclosed the premises licence or relevant part of it or an explanation why not
- I understand that if I do not comply with the above requirements my application will be rejected

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 5 – Signatures (please read guidance note 10)

Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (please read guidance note 11). If signing on the behalf of the applicant please state in what capacity.

Signed	<i>Becky Driver</i>
Print Name	Becky Driver
Capacity	Legal Assistant for the Applicant
Date	19/03/2014

Where the premises licence is jointly held signature of 2nd applicant (the current premises licence holder) or 2nd applicant's solicitor or other authorised agent (please read guidance note 12). If signing on behalf of the applicant please state in what capacity.

Signed	
Print Name	
Capacity	
Date	

Contact name (where not previously given) and address for correspondence associated with this application. (Please read guidance note 13)						
Title:	Mr	Mrs	Miss	Ms	Other	
Forenames				Surname		
Address for Correspondence associated with this application						
					Post Code	
Telephone Number				Mobile Number		
E-Mail Address						

Notes for Guidance

This application cannot be used to vary the licence so as to extend the period that the licence has effect or to vary substantially the premises to which it relates. If you wish to make that type of change to the premises licence, you should make a new premises licence application under section 17 of the Licensing Act 2003.

1. Describe the premises. For example the type of premises, it's general situation and layout and any other information that 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 is and its proximity to the premises.
2. Where taking place in the building or other structure please tick as appropriate. Indoors may include a tent.
3. For example state the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day, e.g. Christmas Eve.
6. Please give timings in 24-hour clock format (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on. If you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish for people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises that may give rise to concern in respect of children regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi nudity, films of restricted age groups, the presence of gaming machines.
9. Please list here the steps you will take to promote all four licensing objectives together.
10. The application must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, the applicants or their respective agents must sign the application form.
13. This is the address that we shall use to correspond with you about this application.