

Blackpool Application for a premises licence Licensing Act 2003

For help contact licensing@blackpool.gov.uk

Telephone: 01253 478397

* required information

Section 1 of 19		
You can save the form at any	time and resume it later. You do not need to	be logged in when you resume.
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference	TC 13035-1	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
Are you an agent acting on b • Yes	ehalf of the applicant?	Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.
Applicant Details		
* First name	PRABAHARAN	
* Family name	THIRUNAVUKKARASU	
* E-mail	trevor@colebournes.co.uk	
Main telephone number	07825707272	Include country code.
Other telephone number		
☐ Indicate here if the app	olicant would prefer not to be contacted by te	elephone
Is the applicant:		
Applying as a businessApplying as an individe	or organisation, including as a sole trader ual	A sole trader is a business owned by one person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.
Applicant Business		
* Is the applicant's business registered in the UK with Companies House?		
* Is the applicant's business		
registered outside the UK?		
registered outside the UK? * Business name	PRABAHARAN THIRUNAVUKKARASU	If the applicant's business is registered, use its registered name.

Continued from previous page		
* Legal status	Sole Trader	
* Applicant's position in the business	Proprietor	
Home country	United Kingdom	The country where the applicant's headquarters are.
Applicant Business Address		If the applicant has one, this should be the
* Building number or name	KP Store 326	applicant's official address - that is an address required of the applicant by law for
* Street	Talbot Road	receiving communications.
District		
* City or town	Blackpool	
County or administrative area	Lancashire	
* Postcode	FY1 3QS	
* Country	United Kingdom	
Agent Details		
* First name	Trevor	
* Family name	Colebourne	
* E-mail	trevor@colebournes.co.uk	
Main telephone number	01253293195	Include country code.
Other telephone number		
☐ Indicate here if you wou	ld prefer not to be contacted by telephone	
Are you:		
An agent that is a busine	ess or organisation, including a sole trader	A sole trader is a business owned by one person without any special legal structure.
A private individual action	ng as an agent	person without any special legal structure.
Agent Business		
* Is your business registered in the UK with Companies House?	YesNo	
* Registration number	7674338	
* Business name	COLEBOURNES SOLICITORS & ADVOCATES LTD	If your business is registered, use its registered name.
* VAT number GB	944526313	Put "none" if you are not registered for VAT.

Continued from previous page		
* Legal status	Private Limited Company	
* Your position in the business	Director	
Home country	United Kingdom	The country where the headquarters of your business is located.
Agent Registered Address		Address registered with Companies House.
* Building number or name	77	
* Street	Adelaide Street	
District		
* City or town	Blackpool	
County or administrative area		
* Postcode	FY1 4LP	
* Country	United Kingdom	
Section 2 of 19		
PREMISES DETAILS		
	ply for a premises licence under section 17 of the premises) and I/we are making this application the Licensing Act 2003.	
Premises Address		
Are you able to provide a posta	al address, OS map reference or description of t	he premises?
AddressOS map	o reference O Description	
Postal Address Of Premises		
Building number or name	KP Store 326	
Street	Talbot Road	
District		
City or town	Blackpool	
County or administrative area		
Postcode	FY1 3QS	
Country	United Kingdom	
Further Details		
Telephone number		

	-domestic rateable e of premises (£)	3,950	
Secti	on 3 of 19		
APPL	ICATION DETAILS		
In wh	nat capacity are you applyi	ng for the premises licence?	
\boxtimes	An individual or individua	als	
	A limited company		
	A partnership		
	An unincorporated assoc	iation	
	A recognised club		
	A charity		
	The proprietor of an educ	cational establishment	
	A health service body		
		ed under part 2 of the Care Standards Act n independent hospital in Wales	
	Social Care Act 2008 in re	ed under Chapter 2 of Part 1 of the Health and spect of the carrying on of a regulated ing of that Part) in an independent hospital in	
	The chief officer of police	of a police force in England and Wales	
	Other (for example a stat	utory corporation)	
Con	firm The Following		
\boxtimes	I am carrying on or propo the use of the premises for	osing to carry on a business which involves or licensable activities	
	I am making the applicat	ion pursuant to a statutory function	
	I am making the applicat virtue of Her Majesty's pr	ion pursuant to a function discharged by erogative	
Secti	on 4 of 19		
INDI	VIDUAL APPLICANT DET	AILS	
	licant Name e name the same as (or sin	nilar to) the details given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as required.
•	Yes	○ No	Select "No" to enter a completely new set of details.
First	name	PRABAHARAN	
Fam	ily name	THIRUNAVUKKARASU	

Continued from previous page		
Is the applicant 18 years of age	or older?	
Yes	○ No	
Applicant Postal Address Is the address the same as (or s	similar to) the address given in section one?	If "Yes" is selected you can re-use the details
Yes	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
Building number or name	KP Store 326	
Street	Talbot Road	
District		
City or town	Blackpool	
County or administrative area	Lancashire	
Postcode	FY1 3QS	
Country	United Kingdom	
Applicant Contact Details		
	ne as (or similar to) those given in section one?	If "Yes" is selected you can re-use the details
Yes	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
E-mail	trevor@colebournes.co.uk	
Telephone number	07825707272	
Other telephone number		
	Add another applicant	
Section 5 of 19		
OPERATING SCHEDULE		
When do you want the premises licence to start?	02 / 08 / 2014 dd mm yyyy	
If you wish the licence to be valid only for a limited period, when do you want it to end	dd mm yyyy	
Provide a general description of	of the premises	
licensing objectives. Where you	ses, its general situation and layout and any oth ur application includes off-supplies of alcohol a olies you must include a description of where th	nd you intend to provide a place for
Retail shop premises operated descriptions to be sold at a cou	as a general food convenience store. Ground flo Inter point of sale	oor only premises with alcohol of all

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, , , , , , , , , , , , , , , , , , ,	
If 5,000 or more people are expected to attend the premises at any one time, state the number expected to attend	
Section 6 of 19	
PROVISION OF PLAYS	
Will you be providing plays?	
○ Yes	No
Section 7 of 19	
PROVISION OF FILMS	
Will you be providing films?	
○ Yes	• No
Section 8 of 19	
PROVISION OF INDOOR SPORT	ING EVENTS
Will you be providing indoor sp	orting events?
○ Yes	No
Section 9 of 19	
PROVISION OF BOXING OR WR	ESTLING ENTERTAINMENTS
Will you be providing boxing or	wrestling entertainments?
○ Yes	No
Section 10 of 19	
PROVISION OF LIVE MUSIC	
Will you be providing live music	?
○ Yes	No
Section 11 of 19	
PROVISION OF RECORDED MU	SIC
Will you be providing recorded	music?
○ Yes	No
Section 12 of 19	
PROVISION OF PERFORMANCE	S OF DANCE
Will you be providing performan	nces of dance?
○ Yes (No
Section 13 of 19	
PROVISION OF ANYTHING OF A	A SIMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF
Will you be providing anything performances of dance?	similar to live music, recorded music or

Continued from previous	page		○ Yes	No
Section 14 of 19				
LATE NIGHT REFRESHN	ЛЕNT			
Will you be providing la	te night refreshment?			
○ Yes	No			
Section 15 of 19				
SUPPLY OF ALCOHOL				
Will you be selling or su	pplying alcohol?			
Yes	○ No			
Standard Days And Tir	mings			
MONDAY	Start 07:00	End 23:00 End		nly give details for the days you intend the premises
TUESDAY				-
	Start 07:00	End 23:00 End		
WEDNESDAY				
	Start 07:00	End 23:00		
	Start	End		
THURSDAY				
	Start 07:00	End 23:00		
	Start	End		
FRIDAY				
	Start 07:00	End 23:00	\neg	
	Start	End	=	
SATURDAY				
	Start 07:00	End 23:00		
	Start	End	\exists	
SUNDAY				
JONDAN	Start 07:00	End 23:00	\neg	
	Start 07.00	End End		
	Start	EHU		

Continued from previous page			
Will the sale of alcohol be for c	onsumption:		If the sale of alcohol is for consumption on the premises select on, if the sale of alcohol
On the premises	Off the premises) Both	is for consumption away from the premises select off. If the sale of alcohol is for consumption on the premises and away from the premises select both.
State any seasonal variations			
For example (but not exclusive	ly) where the activity will oc	cur on additional da	ys during the summer months.
none			
Non-standard timings. Where to column on the left, list below	the premises will be used for	r the supply of alcoh	ol at different times from those listed in the
For example (but not exclusive	ly), where you wish the activ	vity to go on longer	on a particular day e.g. Christmas Eve.
none			
State the name and details of t licence as premises supervisor	he individual whom you wis	sh to specify on the	
Name			
First name	PRABAHARAN		
Family name	THIRUNAVUKKARASU		
Enter the contact's address			
Building number or name	326A		
Street	Talbot Road		
District			
City or town	Blackpool		
County or administrative area			
Postcode	FY1 3QS		
Country	United Kingdom		
Personal Licence number (if known)	LN 7024		
Issuing licensing authority (if known)	Harrow Council PO Box 18	Station Road	

Continued from previous	page		
Harrow HA1 2UT			
DDODOSED DESIGNAT	ED PREMISES SUPERVISO	D CONSENT	
	orm of the proposed design		
be supplied to the auth		atea premises supervise.	
C Electronically, by	the proposed designated p	remises supervisor	
As an attachment	to this application		
Reference number for of form (if known)	consent		If the consent form is already submitted, ask the proposed designated premises
			supervisor for its 'system reference' or 'your reference'.
Section 16 of 19			
ADULT ENTERTAINME	NT		
0 0 ,	tertainment or services, acti e rise to concern in respect o		ent or matters ancillary to the use of the
rise to concern in respe		whether you intend child:	ry to the use of the premises which may give ren to have access to the premises, for example c gambling machines etc.
None			
Section 17 of 19			
HOURS PREMISES ARE	OPEN TO THE PUBLIC		
Standard Days And Ti	mings		
MONDAY			
	Start 07:00	End 23:30	Give timings in 24 hour clock. (e.g., 16:00) and only give details for the days
			of the week when you intend the premises
	Start	End	to be used for the activity.
TUESDAY			_
	Start 07:00	End 23:30	
	Start	End	
WEDNESDAY			
	Start 07:00	End 23:30	
	Start	End	
	Start	LIIU	
THURSDAY			
	Start 07:00	End 23:30	
	Start	End	

Continued from previous page			
FRIDAY			
Start	07:00	End	23:30
Start	07.00	End	
Start		LIIU	
SATURDAY			
Start	07:00	End	23:30
Start		End	
SUNDAY			
Start	07:00	End	23:30
Start		End	
State any seasonal variations			
-	ely) where the activity will occi	ur on a	dditional days during the summer months.
Ter example (Buttlet exclusive			additional days daming the sammer mentile.
		s to be	open to the members and guests at different times from
those listed in the column on t	the left, list below		
For example (but not exclusive	ely), where you wish the activit	ty to g	o on longer on a particular day e.g. Christmas Eve.
Section 18 of 19			
LICENSING OBJECTIVES			
Describe the steps you intend	to take to promote the four lie	censin	g objectives:
a) General – all four licensing o	objectives (b,c,d,e)		
List here steps you will take to	promote all four licensing obj	jectives	s together.

These retail shop premises are situated on a main road in an area comprising of residential and commercial/industrial premises. The area generally is not well served by premises selling alcohol for off premises consumption and therefore demonstrates a need in this particular locality. The premises are well run and managed by an experienced retailer. The premises previously had the benefit of a Premises Licence for off premises sale of alcohol but that Licence was revoked by the Authority due to poor management and various Statutory breaches. The current applicant is unconnected with previous owners and can demonstrate that he has applied a "clean brush" to the premises and will be able to promote all the licensing objectives to a very high standard, the details of which appear below. The granting of the application (with conditions) will not add to existing cumulative impact.

- b) The prevention of crime and disorder
- 1. State of the art CCTV is installed with multi-screen remote live access and instant memory access. Multi cameras cover all public areas of the shop premises, including the entry/exit door. The system internal memory records for a period of at least 31 days. The DPS and all staff are fully trained to operate the system.

Continued from previous page...

2. An incident book will record any incidents of crime and disorder, any refused sales, any person refused admission or asked to leave and details of any occasions when the Police are called to the premises.

c) Public safety

The premises maintain a high standard of safety compliance and will continue to carry out regular Health & Safety checks in respect of all parts of the building structure, isles and walkways, electrical compliance and a record will be kept of all maintenance issues and risk assessments.

d) The prevention of public nuisance

A clear, legible and conspicuous notice will remind all patrons to respect local residents and to curtail noise or behavior likely to lead to disturbance

e) The protection of children from harm

The licence holder will support and rigorously enforce Challenge 25 Proof of age policy. All staff will be fully trained on under age sales, and compliance with the other licensing objectives, and a full training record will be kept on the premises, and be available for inspection by an appropriate official. Staff training will be updated every 3 months. An authorised personnel list shall be kept, signed and dated by the DPS. No sales of alcohol will be made by any person under age 18 and all sales of alcohol will be made or authorised by a personal licence holder. A refusals register will be maintained fully up to date at the premises and made available for appropriate inspection.

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PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

Premises Licence Fees are determined by the non domestic rateable value of the premises.

To find out a premises non domestic rateable value go to the Valuation Office Agency site at http://www.voa.gov.uk/business_rates/index.htm

Band A - No RV to £4300	£100.00
Band B - £4301 to £33000	£190.00
Band C - £33001 to £87000	£315.00
Band D - £87001 to £125000	£450.00*
Band E - £125001 and over	£635.00*

*If the premises rateable value is in Bands D or E and the premises is primarily used for the consumption of alcohol on the premises then your are required to pay a higher fee

Band D - £87001 to £12500 £900.00 Band E - £125001 and over £1,905.00

There is an exemption from the payment of fees in relation to the provision of regulated entertainment at church halls, chapel halls or premises of a similar nature, village halls, parish or community halls, or other premises of a similar nature. The costs associated with these licences will be met by central Government. If, however, the licence also authorises the use of the premises for the supply of alcohol or the provision of late night refreshment, a fee will be required.

Schools and sixth form colleges are exempt from the fees associated with the authorisation of regulated entertainment where the entertainment is provided by and at the school or college and for the purposes of the school or college.

If you operate a large event you are subject to ADDITIONAL fees based upon the number in attendance at any one time

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Capacity 5000-9999	£1,000.00
Capacity 10000 -14999	£2,000.00
Capacity 15000-19999	£4,000.00
Capacity 20000-29999	£8,000.00
Capacity 30000-39000	£16,000.00
Capacity 40000-49999	£24,000.00
Capacity 50000-59999	£32,000.00
Capacity 60000-69999	£40,000.00
Capacity 70000-79999	£48,000.00
Capacity 80000-89999	£56,000.00
Capacity 90000 and over	£64,000.00
* Fee amount (£)	100.00

DECLARATION

- I/we understand 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.
- I understand that the information I have provided, will be held by the Council on both computerised and manual files.
- This data may be made available on a public register if so required by relevant legislation. The data may also be disclosed to other departments within the Council and other organisations, but only in order to ensure compliance with relevant legislation, for identification purposes or to prevent or detect fraud or a crime.
- ☐ Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

* Full name

* Capacity

* Date

Trevor Colebourne

Solicitor for Applicant

04 / 07 / 2014

dd mm yyyyy

Add another signatory

Once you're finished you need to do the following:

- 1. Save this form to your computer by clicking file/save as...
- 2. Go back to https://www.gov.uk/apply-for-a-licence/premises-licence/blackpool/apply-1 to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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

OFFICE USE ONLY	
Applicant reference number	TC 13035-1
Fee paid	
Payment provider reference	
ELMS Payment Reference	
Payment status	
Payment authorisation code	
Payment authorisation date	
Date and time submitted	
Approval deadline	
Error message	
Is Digitally signed	
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