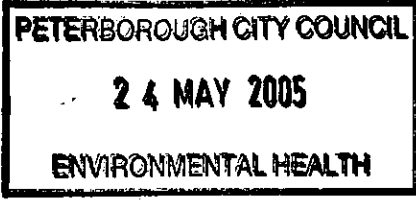


LT1



Peterborough City Council, Licensing Section, Bridge House,  
Town Bridge, Peterborough, PE1 1HU

**(Part A) Application for an existing licence to be converted to a premises licence under the Licensing Act 2003 and (Part B) application to vary the premises licence simultaneously**

**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 [ K. PARROT ] apply to convert an existing licence to a premises licence under Schedule 8 to the Licensing Act 2003 for the premises described in Part A1 below

**Part A1 - Premises Details**

Postal address of premises or, if none, ordnance survey map reference or description <u>22 HERWARD CENTER PETERBOROUGH</u>	
Post town <u>PETERBOROUGH</u>	Post code <u>PE1</u>

Telephone number of premises (if any) 01733 560657

Non-domestic rateable value of premises £23,750

**Part A2 - Applicant Details**

Please state the capacity in which you are applying to convert your existing licence

- Please tick ✓
- a) An individual or individuals  please complete section (A)
  - b) a person other than an individual
    - i. as a limited company  please complete section (B)
    - ii. as a partnership  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  please complete section (B)
- h) the chief officer of police of a police force in England and Wales  please complete section (B)

**(A) INDIVIDUAL APPLICANTS (fill in as applicable)**

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**Current postal address if different from premises address**

**Post Town**

**Postcode**

**Daytime contact telephone number**

**E-mail address (optional)**

**(B) OTHER APPLICANTS**

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint nature (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 A3 - Operating Schedule**

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

General description of premises (please read guidance note 1)

FISH & CHIPS SHOP  
RESTAURANT  
NONE RESIDENTIAL  
11.30 AM - 6 PM, MON - SAT  
SUNDAY CLOSED

Please tick Yes

**What existing licensable activities are authorised by your existing licence(s)?**

**Provision of regulated entertainment**

- a) plays
- b) films
- c) indoor sporting events
- d) boxing or wrestling entertainment
- e) live music
- f) recorded music
- g) performances of dance
- h) anything of a similar description to that falling within (e), (f) or (g)

**Provision of entertainment facilities for:**

- i) making music
- j) dancing
- k) entertainment of a similar description to that falling within (i) or (j)

Describe the conditions subject to which your existing licence(s) has/have been granted (please read guidance note 2):

a) General – all four licensing objectives (b,c,d,e)

b) The prevention of crime and disorder

DO NOT ALLOW DRUNKS

c) Public safety

HEALTH & SAFETY POLICY

d) The prevention of public nuisance

NONE RESIDENTIAL  
AREA

e) The protection of children from harm

JUST ADULTS

Please tick - Yes

- I have made or enclosed payment of the fee
- I have enclosed my existing licence(s) or a certified copy of each licence
- I have enclosed a plan of the premises
- I have sent copies of this application to the chief officer of police (please read guidance note 3)
- I have enclosed the consent form completed by the proposed premises supervisor, if relevant
- I have enclosed the consent of the justices' licence holder to my application, if relevant
- 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**

E-mail address (optional)	
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**IF YOU WISH TO APPLY SIMULTANEOUSLY FOR A VARIATION OF THE PREMISES LICENCE IF IT IS CONVERTED FROM YOUR EXISTING LICENCE(S) UNDER SECTION 34 OR 37 OF THE LICENSING ACT 2003, NOW COMPLETE PART B OF THIS FORM.**

**IF YOU DO NOT WISH TO APPLY SIMULTANEOUSLY FOR A VARIATION OF THE PREMISES LICENCE IF IT IS CONVERTED FROM YOUR EXISTING LICENCE(S), YOU SHOULD LEAVE PART B BLANK.**

**PART B - Application to vary a premises licence under the Licensing Act 2003**

**I/We.....[Insert name of applicant] being the proposed premises licence holder of an existing licence to be converted under the terms of Schedule 8 to the Licensing Act 2003 apply to vary it under section 34/section 37 of the Licensing Act 2003 (delete as applicable) for the premises described in Part A above.**

**Part B1 - Variation**

Please tick

Do you want the proposed variation to have effect from the second appointed day?

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 are 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 read guidance note 8)**

## Part B2 - Operating Schedule

Please complete those parts of the operating schedule which would be subject to change if this application to vary were successful.

What licensable activities do you now intend to conduct on the premises and/or at what varied times do you intend to conduct them?

(please see section 1 of the Licensing Act 2003 and Schedule 1 to the Licensing Act 2003)

### Provision of regulated entertainment

Please tick Yes

- |  |                          |
|--|--------------------------|
| a) plays (if ticking yes, fill in box A)   | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B)   | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C)  | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D)   | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E)  | <input type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F)  | <input type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G)   | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g)<br>(if ticking yes, fill in box H) | <input type="checkbox"/> |

### Provision of entertainment facilities:

- |  |                          |
|--|--------------------------|
| i) making music (if ticking yes, fill in box I)  | <input type="checkbox"/> |
| j) dancing (if ticking yes, fill in box J)   | <input type="checkbox"/> |
| k) entertainment of a similar description to that falling within (i) or (j)<br>(if ticking yes, fill in box K) | <input type="checkbox"/> |

**Provision of late night refreshment** (if ticking yes, fill in box L)

**Sale by retail of alcohol** (if ticking yes, fill in box M)

**Please complete Part B3 on this form.**



# A

<b>Plays</b> Standard days and timings (please read guidance note 8)			<b>Will the performance of a play take place indoors or outdoors or both – please tick [?]</b> (please read guidance note 9)	Indoors		
				Outdoors		
Day	Start	Finish		Both		
Mon			<b>Please give further details here</b> (please read guidance note 10)			
Tue						
Wed				<b>State any seasonal variations for performing plays</b> (please read guidance note 11)		
Thur						
			<b>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</b> (please read guidance note 12)			
Fri						
Sat						
Sun						

# B

<b>Films</b> Standard days and timings (please read guidance note 8)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick [?](please read guidance note 9)</b>		Indoors	
					Outdoors	
Day	Start	Finish			Both	
Mon			<b>Please give further details here (please read guidance note 10)</b>			
Tue						
Wed			<b>State any seasonal variations for the exhibition of films (please read guidance note 11)</b>			
Thur						
Fri			<b>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 12)</b>			
Sat						
Sun						

**C**

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 8)			Please give further details (please read guidance note 10)
Day	Start	Finish	
Mon			
Tue			State any seasonal variations for indoor sporting events (please read guidance note 11)
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 read guidance note 12)
Fri			
Sat			
Sun			

# D

<b>Boxing or wrestling entertainment</b> Standard days and timings (please read guidance note 8)			<b>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick [?](please read guidance note 9)</b>	Indoors		
				Outdoors		
Day	Start	Finish		Both		
Mon			<b>Please give further details here (please read guidance note 10)</b>			
Tue						
Wed				<b>State any seasonal variations for boxing or wrestling entertainment (please read guidance note 11)</b>		
Thur						
Fri			<b>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 12)</b>			
Sat						
Sun						

# E

<b>Live music</b> Standard days and timings (please read guidance note 8)			<b>Will the performance of live music take place indoors or outdoors or both – please tick [?](please read guidance note 9)</b>		Indoors	
					Outdoors	
Day	Start	Finish			Both	
Mon			<b>Please give further details here (please read guidance note 10)</b>			
Tue						
Wed			<b>State any seasonal variations for the performance of live music (please read guidance note 11)</b>			
Thur						
Fri			<b>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 12)</b>			
Sat						
Sun						

# F

<b>Recorded music</b> Standard days and timings (please read guidance note 8)			<b>Will the playing of recorded music take place indoors or outdoors or both – please tick [?]</b> (please read guidance note 9)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			<b>Please give further details here</b> (please read guidance note 10)		
Tue					
Wed			<b>State any seasonal variations for playing recorded music</b> (please read guidance note 11)		
Thur					
Fri			<b>Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 12)		
Sat					
Sun					

# G

<b>Performances of dance</b> Standard days and timings (please read guidance note 8)			<b>Will the performance of dance take place indoors or outdoors or both – please tick [?]</b> (please read guidance note 9)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			<b>Please give further details here</b> (please read guidance note 10)		
Tue					
Wed			<b>State any seasonal variations for the performance of dance</b> (please read guidance note 11)		
Thur					
Fri			<b>Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 12)		
Sat					
Sun					

# H

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 8)			<b><u>Please give a description of the type of entertainment you will be providing</u></b>	
Day	Start	Finish	<b>Will this entertainment take place indoors or outdoors or both – please tick [?] (please read guidance note 9)</b>	Indoors
Mon				Outdoors
				Both
Tue			<b><u>Please give further details here</u></b> (please read guidance note 10)	
Wed				
Thur			<b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 11)	
Fri				
Sat			<b><u>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</u></b> (please read guidance note 12)	
Sun				



<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 8)			Please give a description of the facilities for making music you will be providing		
			<b>Will the facilities for making music be indoors or outdoors or both – please tick [?]</b> (please read guidance note 9)		Indoors
			Outdoors		
			Both		
Day	Start	Finish	Please give further details here (please read guidance note 10)		
Mon					
Tue					
Wed			State any seasonal variations for the provision of facilities for making music (please read guidance note 11)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for provision of facilities for making music entertainment at different times to those listed in the column on the left, please list (please read guidance note 12)		
Sat					
Sun					

# J

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 8)			<b>Will the facilities for dancing be indoors or outdoors or both – please tick [?]</b> (see guidance note 9)		Indoors	
					Outdoors	
Day	Start	Finish			Both	
Mon			<b>Please give further details here</b> (please read guidance note 10)			
Tue						
Wed			<b>State any seasonal variations for providing dancing facilities</b> (please read guidance note 11)			
Thur						
Fri			<b>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 12)			
Sat						
Sun						

# K

<b>Provision of facilities for entertainment of a similar description to that falling within I or J</b> Standard days and timings (please read guidance note 8)			Please give a description of the type of entertainment facility you will be providing		
Day	Start	Finish	<b>Will the entertainment facility be indoors or outdoors or both – please tick [?]</b> (please read guidance note 9)	Indoor	
Mon				Outdoor	
				Both	
Tue			<b>Please give further details here</b> (please read guidance note 10)		
Wed					
Thur			<b>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within I or J</b> (please read guidance note 11)		
Fri					
Sat			<b>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times to those listed in the column on the left, please list</b> (please read guidance note 12)		
Sun					

**L**

<b>Late night refreshment</b> Standard days and timings (please read guidance note 8)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick [?]</b> (please read guidance note 9)		Indoors	
					Outdoors	
Day	Start	Finish			Both	
Mon			<b>Please give further details here (please read guidance note 10)</b>			
Tue						
			<b>State any seasonal variations for the provision of late night refreshment (please read guidance note 11)</b>			
Wed						
Thur			<b>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 read guidance note 12)</b>			
Fri						
Sat						
Sun						

# M

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 8)			<b>Will the supply of alcohol be for consumption</b> (Please tick box ?) (please read guidance note 13)	On the premises		
Day	Start	Finish		Off the premises		
Mon				<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 11)	Both	
Tue						
Wed						
Thur			<b>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</b> (please read guidance note 12)			
Fri						
Sat						
Sun						

**IN ALL CASES PLEASE COMPLETE BOXES N, O, P and Q below**

# N

<p><b>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</b> (please read guidance note 14)</p>
---

**O**

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 8)			<b>State any seasonal variations (please read guidance note 11)</b>
Day	Start	Finish	
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

**Non standard timings. Where you intend to use 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 12)**

**P**

Please identify any of the conditions, terms or restrictions currently imposed on the converted licence which you believe could be removed as a consequence of the proposed variation you are seeking

**Q**

Please describe any additional steps that you intend to take in order to promote the four licensing objectives if the proposed variation is granted:

**a) General – all four licensing objectives (b, c, d, e) (please read guidance note 15)**

**b) The prevention of crime and disorder**

**c) Public safety**

**d) The prevention of public nuisance**

**e) The protection of children from harm**

**Part B3 – Premises Supervisor**

**Full name of proposed designated premises supervisor**

**Address of proposed designated premises supervisor**

**Personal licence number of proposed designated premises supervisor, if any, and issuing authority of the personal licence, if applicable**