

**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 The Original Bowling Company Limited

(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 Puttstars Unit LU1 First and Second Floor Levels Queensgate Centre			
Post town	Peterborough	Postcode	PE1 1NT

Telephone number at premises (if any)	n/a
Non-domestic rateable value of premises	£ Not Rated

Part 2 - Applicant details

Please state whether you are applying for a premises licence as appropriate Please tick as appropriate

- | | | |
|--|-------------------------------------|-----------------------------|
| a) an individual or individuals * | <input type="checkbox"/> | please complete section (A) |
| b) a person other than an individual * | | |
| i as a limited company/limited liability partnership | <input checked="" 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 <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
Date of birth over		I am 18 years old or <input type="checkbox"/> Please tick yes			
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
Date of birth over		I am 18 years old or		<input type="checkbox"/>	Please tick yes
Nationality					
Current residential 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 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 The Original Bowling Company Limited
Address Focus 31, West Wing Cleveland Road Hemel Hempstead HP2 7BW
Registered number (where applicable) 05163827
Description of applicant (for example, partnership, company, unincorporated association etc.) Company
Telephone number (if any) n/a
E-mail address (optional) n/a

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
A	S	A P

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)
An indoor mini golf centre within the Queensgate Centre complex.

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

n/a

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) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input checked="" type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input checked="" 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 checked="" type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input checked="" type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input checked="" type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/> |

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

Supply 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 7)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 5)		
Thur					
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 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	<input checked="" type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) Music "videos" and sporting "videos" and similar shown on screens located within the premises <u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5) <u>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</u> (please read guidance note 6)			
Mon	00:00	01:00				
	10:00	00:00				
Tue	00:00	01:00				
	10:00	00:00				
Wed	00:00	01:00				
	10:00	00:00				
Thur	00:00	01:00				
	10:00	00:00				
Fri	00:00	01:00				
	10:00	00:00				
Sat	00:00	01:00				
	10:00	00:00				
Sun	00:00	01:00				
	10:00	00:00				

C

Indoor sporting events Standard days and timings (please read guidance note 7)			Please give further details (please read guidance note 4) Indoor mini golf competitions and other similar competitive events that can be held within the venue.	
Day	Start	Finish		
Mon	00:00	01:00	State any seasonal variations for indoor sporting events (please read guidance note 5)	
	10:00	00:00		
Tue	00:00	01:00		
	10:00	00:00		
Wed	00:00	01:00		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 6)
	10:00	00:00		
Thur	00:00	01:00		
	10:00	00:00		
Fri	00:00	01:00		
	10:00	00:00		
Sat	00:00	01:00		
	10:00	00:00		
Sun	00:00	01:00		
	10:00	00:00		

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	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
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)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) Occasional Karaoke					
Mon	00:00	01:00						
	10:00	00:00						
Tue	00:00	01:00						
	10:00	00:00						
Wed	00:00	01:00				<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)		
	10:00	00:00						
Thur	00:00	01:00						
	10:00	00:00						
Fri	00:00	01:00						
	10:00	00:00						
Sat	00:00	01:00						
	10:00	00:00						
Sun	00:00	01:00						
	10:00	00:00						

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) Recorded music played for the entertainment of patrons of the premises					
Mon	00:00	01:00						
	10:00	00:00						
Tue	00:00	01:00						
	10:00	00:00						
Wed	00:00	01:00				<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
	10:00	00:00						
Thur	00:00	01:00						
	10:00	00:00						
Fri	00:00	01:00						
	10:00	00:00						
Sat	00:00	01:00						
	10:00	00:00						
Sun	00:00	01:00						
	10:00	00:00						

G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) This is completed as the premises will occasionally 1) put on performances of dance and/or 2) provide music and an appropriate area for their customers to dance.		
Mon	00:00	01:00			
	10:00	00:00			
Tue	00:00	01:00			
	10:00	00:00			
Wed	00:00	01:00			
	10:00	00:00			
Thur	00:00	01:00			
	10:00	00:00			
Fri	00:00	01:00			
	10:00	00:00			
Sat	00:00	01:00			
	10:00	00:00			
Sun	00:00	01:00			
	10:00	00:00			

State any seasonal variations for the performance of dance (please read guidance note 5)

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 read guidance note 6)

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)</p>			<p>Please give a description of the type of entertainment you will be providing</p>		
Day	Start	Finish	<p><u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><u>Please give further details here</u> (please read guidance note 4)</p>		
Wed					
Thur			<p><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)</p>		
Fri					
Sat			<p><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)</p>		
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	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) Provision of hot food and hot non-alcoholic drinks at the management’s discretion.		
Mon	00:00	01:30			
	23:00	00:00			
Tue	00:00	01:30			
	23:00	00:00			
Wed	00:00	01:30			
	23:00	00:00			
Thur	00:00	01:30			
	23:00	00:00			
Fri	00:00	01:30			
	23:00	00:00			
Sat	00:00	01:30			
	23:00	00:00			
Sun	00:00	01:30			
	23:00	00:00			

State any seasonal variations for the provision of late night refreshment (please read guidance note 5)

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 6)

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	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Mon	00:00	01:00			
	10:00	00:00			
Tue	00:00	01:00			
	10:00	00:00			
Wed	00:00	01:00			
	10:00	00:00			
Thur	00:00	01:00			
	10:00	00:00			
Fri	00:00	01:00			
	10:00	00:00			
Sat	00:00	01:00			
	10:00	00:00			
Sun	00:00	01:00			
	10:00	00:00			
			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 TBC	
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).

There will be no adult entertainment of services at the premises. In common with all centres, it is intended that gaming machines be provided but appropriate steps will be taken in relation to supervision of the premises so that legal requirements and accepted industry practice in relation to gaming machines are followed.

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variations</u> (please read guidance note 5)	
Day	Start	Finish		
Mon	00:00	01:30		
	08:00	00:00		
Tue	00:00	01:30		
	08:00	00:00		
Wed	00:00	01:30		
	08:00	00:00		
Thur	00:00	01:30		<u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 6)
	08:00	00:00		
Fri	00:00	01:30		
	08:00	00:00		
Sat	00:00	01:30		
	08:00	00:00		
Sun	00:00	01:30		
	08:00	00:00		

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)

Please see attached.

b) The prevention of crime and disorder

Please see attached.

c) Public safety

Please see attached.

d) The prevention of public nuisance

Please see attached.

e) The protection of children from harm

Please see attached.

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 (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 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, if appropriate (please see note 15)
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Signature	[Redacted]	
Date		
Capacity		

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	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)

[Redacted]

Post town

[Redacted]

Telephone number

[Redacted]

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)

[Redacted]

The Original Bowling Company Limited
Puttstars
Unit LU1
First and Second Floor Levels,
Queensgate Centre,
Peterborough

Schedule of proposed opening hours and schedule of conditions

**SCHEDULE OF PROPOSED OPENING HOURS AND HOURS FOR
PROVISION OF LICENSABLE ACTIVITIES**

- Standard Opening hours
 - Monday to Sunday 0800 to 0130

- Standard Hours for the provision of licensable activities
 - The sale by retail of alcohol and the provision of regulated entertainment as follows;
Monday to Sunday 1000 to 0100
 - The provision of late-night refreshment as follows;
 - Monday to Sunday 2300 to 0130

SCHEDULE OF PROPOSED CONDITIONS

Close Circuit Television (CCTV)

1. The premises licence holder shall ensure the premises' digitally recorded CCTV system cameras shall continually record whilst the premises are open to the public:

- Recordings shall be kept for a minimum of 31 days with time and date stamping.
- The entire licensable area shall be covered by the CCTV. There shall be at least one camera positioned at each entry and exit point to monitor any external areas to the premises. This includes any areas designated for tables and chairs and/or a designated smoking area.
- Data recordings shall be made immediately available to an authorised officer of the Police or Council together with facilities for viewing upon request.
- Recorded images shall be of such quality as to be able to identify the recorded person in any light.
- At least one member of staff on the premises at any time during operating hours shall be trained to access and download material from the CCTV system.

2. Signs shall be placed in prominent positions on the premises notifying customers that CCTV is in operation.

DOOR SUPERVISORS

3. The provision of door supervisors on the premises shall be risk assessed, and in drafting the risk assessment will take in to account any advice from the Police.

4. A copy of the risk assessment shall be kept on the premises and made available for inspection by the Police and authorised officers of other responsible authorities on request.

4. The risk assessment shall be reviewed and updated at least once every 12 months.

5. Where door supervisors are employed on the premises the following conditions will apply:

(a) The licensed door supervisors shall be employed solely for vetting, regulating, controlling and supervising patrons whilst entering and whilst on the premises and to ensure the maintenance of good order, public safety and internal security.

(b) A register shall be kept at the premises to record the details of the door supervisors, the number of persons on the premises and any incidents. The register shall be produced to authorised officers of the Council or Police upon request.

(c) The register shall contain the following details:

- Full SIA registration number.
- Date and time that the Door Supervisor commenced duty, countersigned by the Designated Premises Supervisor or Duty Manager.
- Date and time that the Door Supervisor finished work, countersigned by the Designated Premises Supervisor or Duty Manager.
- Any occurrence or incident of interest involving crime and disorder or public safety must be recorded giving names of the Door Supervisor involved.
- Training records
- ID Photo and scan of SIA badge

- A record will be kept on site of all SIA checks, on the validity of all door staff licences.
- The name, home address and registration number of all door supervisors working at the premises;
- The door supervisor register must be kept at the premises and be available for inspection by authorised officers of the Council or the Police and shall be retained for a period of 1 Year.

INCIDENT REGISTER

6. All incidents which impact on any of the four licensing objectives shall be recorded in a register kept at the premises for this purpose. The names of the person recording the incident and those members of staff who deal with any incident shall also be recorded. Where known, any offenders name shall also be recorded

7. This record shall be available for inspection by an authorised officer from the Police or Council upon request and shall be retained for one year. The record shall be signed off by the DPS or nominated representative at the end of each trading session;

8. A weekly review of the incident register shall also be carried out by the DPS.

STAFF TRAINING

9. Staff employed to sell alcohol shall undergo training upon induction. This shall include, but not be limited to:

- The premises age verification policy
- The law relating to underage sales
- Dealing with refusal of sales
- Proxy purchasing

- Identifying attempts by intoxicated persons to purchase alcohol
- Identifying signs of intoxication
- Conflict management

10. Such training sessions are to be documented and refreshed every 12 months. All training sessions are to be documented in English. Records of training shall be kept for a minimum of one year and be made available to an authorised officer of the Council or Police upon request.

11. The Designated Premises Supervisor shall ensure they and staff who are authorised to sell alcohol, are able to converse with customers and representatives of Statutory Agencies to a level that they are able to satisfactorily meet the four licensing objectives as contained in the Licensing Act 2003.

- i. The Prevention of Crime and Disorder.
- ii. Public Safety.
- iii. Public Nuisance.
- iv. The Protection of Children from Harm.

AGE VERIFICATION

12. The Premises Licence holder shall display in a prominent position a copy of their policy on checking proof of age.

13. At all times that the premises is operating under this licence, the Premises Licence Holder shall ensure that its staff operate a Challenge 25 Policy (to minimise the risk of alcohol being sold to underage customers). This Policy shall provide that before any sale of alcohol any person who appears to be under the age of 25 will be required to produce photo ID in the form of a passport; driving licence, UK Military ID card; PASS (or similar) card to prove that he/she is over the age of 18

14. Posters advertising the Challenge 25 and proof of age policies shall be displayed in prominent places in the premises so that they can be seen internally and externally;

15. No person under the age of 18 years will be permitted on the premises after 21:00 hours without being accompanied by a responsible adult.

16. Prominent, clear notices shall be displayed at every public entrance stating any restrictions relating to the admission of children to the premises or other admission restrictions.

REFUSAL BOOK

17. All staff involved in the sale of alcohol shall be trained to record refusals of sales of alcohol in a refusals log (whether written or electronic). The log shall contain:

- Details of the time and date the refusal was made;
- The identity of the staff member refusing the sale;
- Any detail or description of the person refused and the reason why.
- This book /register will be available for inspection by an authorised officer of the Council or the Police

REMOVAL OF GLASSWARE AND OPEN CONTAINERS

18. Other than off-sales in sealed containers, no alcohol shall be removed from the premises or consumed outside. The only exception to this would be for service of alcohol in any external area under the control of the premises licence holder.