

Portsmouth Application for a premises licence Licensing Act 2003 For help contact Licensing@portsmouthcc.gov.uk Telephone: 023 9283 4572

* required information

Section 1 of 19		
You can save the form at any t	ime 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	SHELL FRATTON	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 be • Yes • N	half of the applicant? No	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	SHELL UK OIL PRODUCTS LIMITED]
* Family name	N/A	
You must enter a valid e-ma	il address	-
* E-mail	sara@	
You must enter a telephone	number	-
Main telephone number		Include country code.
Other telephone number		
Indicate here if the appl	icant would prefer not to be contacted by telep	hone
Is the applicant:		
 Applying as a business of 	or organisation, including as a sole trader	A sole trader is a business owned by one
 Applying as an individual 	al	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?	Yes O No	Note: completing the Applicant Business section is optional in this form.
Registration number]
Business name	SHELL UK OIL PRODUCTS LIMITED	If the applicant's business is registered, use its registered name.

Continued from previous page		
VAT number GB		Put "none" if the applicant is not registered for VAT.
Legal status	Private Limited Company	
Applicant's position in the business	N/A	
Home country	United Kingdom	The country where the applicant's headquarters are.
Registered Address		Address registered with Companies House.
Building number or name	SHELL CENTRE	
Street		
District		
City or town	LONDON	
County or administrative area		
Postcode	SE1 7NA	
Country	United Kingdom	
Agent Details		
* First name	LOCKETT & CO	
* Family name	N/A	
* E-mail	sara	
Main telephone number		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 actir 	ng as an agent	
Agent Business		
Is your business registered in the UK with Companies House?	Yes O No	Note: completing the Applicant Business section is optional in this form.
Registration number		
Business name	CORRIGAN LOCKETT LIMITED	If your business is registered, use its registered name.
VAT number GB		Put "none" if you are not registered for VAT.

Continued from previous page		
Legal status	Private Limited Company	
Your position in the business	LICENSING MANAGER	
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	LOCKETT HOUSE	
Street	13 CHURCH STREET	
District]
City or town	KIDDERMINSTER]
County or administrative area	WORCS]
Postcode	DY10 2AH	
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 post	al address, OS map reference or description of t	he premises?
Address OS ma	p reference O Description	
Postal Address Of Premises		
Building number or name	SHELL FRATTON	
Street	GOLDSMITH AVENUE	
District	SOUTHSEA]
City or town	PORTSMOUTH	
County or administrative area	HANTS	
Postcode	PO4 8BH	
Country	United Kingdom	
Further Details		
Telephone number		

Non-domestic rateable

	e of premises (£)
Secti	ion 3 of 19
APPL	LICATION DETAILS
In wh	nat capacity are you applying for the premises licence?
	An individual or individuals
\boxtimes	A limited company
	A partnership
	An unincorporated association
	A recognised club
	A charity
	The proprietor of an educational establishment
	A health service body
	A person who is registered under part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales
	A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England
	The chief officer of police of a police force in England and Wales
	Other (for example a statutory corporation)
Con	firm The Following
\boxtimes	I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities
	I am making the application pursuant to a statutory function
	I am making the application pursuant to a function discharged by virtue of Her Majesty's prerogative
Secti	ion 4 of 19
NON	INDIVIDUAL APPLICANTS
	ide name and registered address of applicant in full. Where appropriate give any registered number. In the case of a nership or other joint venture (other than a body corporate), give the name and address of each party concerned.
Non	Individual Applicant's Name
Nam	IN SHELL UK OIL PRODUCTS LIMITED
Deta	ails

Continued from previous page	
Registered number (where applicable)	
Description of applicant (for ex	ample partnership, company, unincorporated association etc)
PRIVATE LIMITED COMPANY	
Address	
Building number or name	SHELL CENTRE
Street	
District	
City or town	LONDON
County or administrative area	
Postcode	SE1 7NA
Country	United Kingdom
Contact Details	
E-mail	
Telephone number	
Other telephone number	
	Add another applicant
Section 5 of 19	
OPERATING SCHEDULE	
When do you want the premises licence to start?	03 / 02 / 2017 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 other information which could be relevant to the ur application includes off-supplies of alcohol and you intend to provide a place for olies you must include a description of where the place will be and its proximity to the
	EW WHICH HAS BEEN SENT TO THE LICENSING AUTHORITY BY EMAIL TODAY AS THE GOV.UK OR THE DOCUMENT TO BE UPLOADED.

Continued from previous page	
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?	
·	No
Section 7 of 19	
PROVISION OF FILMS	
Will you be providing films?	
⊖ Yes (No
Section 8 of 19	
PROVISION OF INDOOR SPORT	TING 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 performation	nces of dance?
⊖ Yes (No
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PROVISION OF ANYTHING OF	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
	No

Continued from previous	page			
Section 14 of 19				
LATE NIGHT REFRESHI	MENT			
Will you be providing la	ate night refreshment?			
• Yes	⊖ No			
Standard Days And Ti	mings			
MONDAY				Give timings in 24 hour clock.
	Start 23:00	End	05:00	(e.g., 16:00) and only give details for the days
	Start	End		of the week when you intend the premises to be used for the activity.
TUESDAY			L	
TOESDAT	Chart 22.00	[nd	05.00	
	Start 23:00	End	05:00	
	Start	End		
WEDNESDAY				
	Start 23:00	End	05:00	
	Start	End		
THURSDAY				
	Start 23:00	End	05:00	
	Start	End		
		LIIU		
FRIDAY				
	Start 23:00	End	05:00	
	Start	End		
SATURDAY				
	Start 23:00	End	05:00	
	Start	End		
SUNDAY				
	Start 23:00	End	05:00	
			00.00	
	Start	End		
Will the provision of lat both?	e night refreshment tak	ke place indoors or	outdoors or	
 Indoors 	 Outdoors 	⊖ Both	I	Where taking place in a building or other structure tick as appropriate. Indoors may include a tent.
State type of estivity to	bo authorized if not al	roady stated and a	ivo rolovont f	urthar datails for axample (but not
exclusively) whether or				urther details, for example (but not
THE PROVISION OF HOT	T DRINKS ONLY.			

State any seasonal variations

For example (but not exclusively) where the activity will occur on additional days during the summer months.

NONE.

Non-standard timings. Where the premises will be used for the supply of late night refreshments at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

NONE.

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SUPPLY OF ALCOHOL

Will you be selling or supplying	ng alcohol?	
• Yes	⊖ No	
Standard Days And Timing	S	
MONDAY		Give timings in 24 hour clock.
Star	t 00:00	End 24:00 (e.g., 16:00) and only give details for the days
Star	t	End of the week when you intend the premises to be used for the activity.
TUESDAY		
Star	t 00:00	End 24:00
Star	t	End
WEDNESDAY		
Star	t 00:00	End 24:00
Star	t	End
THURSDAY		
Star	t 00:00	End 24:00
Star	t	End
FRIDAY		
Star	t 00:00	End 24:00
Star	t	End

Continued from previous page			
SATURDAY			
Start	00:00	End 24:00	
Start		End	
SUNDAY			
Start	00:00	End 24:00	
Start		End	
Will the sale of alcohol be for c	onsumption:		If the sale of alcohol is for consumption on
 On the premises 	 Off the premises 	Both	the premises select on, if the sale of alcohol 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	ely) where the activity will occu	ur on additional da	ays during the summer months.
NONE.			
Non-standard timings. Where t column on the left, list below	the premises will be used for t	he supply of alcoh	nol at different times from those listed in the
For example (but not exclusive	ly), where you wish the activit	ty to go on longer	on a particular day e.g. Christmas Eve.
NONE.			
State the name and details of t licence as premises supervisor	5	to specify on the	
Name			
First name	CORRIGAN DEAN		
Family name	LOCKETT		

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Enter the contact's address		
Building number or name	BARN OWL COTTAGE]
Street	STOURPORT ROAD]
District]
City or town	BEWDLEY]
County or administrative area	WORCS]
Postcode	DY12 1QA	
Country	United Kingdom]
Personal Licence number (if known)]
lssuing licensing authority (if known)	WYRE FOREST DISTRICT COUNCIL]
PROPOSED DESIGNATED PRE	MISES SUPERVISOR CONSENT	
How will the consent form of the supplied to the authority?	ne proposed designated premises supervisor	
 Electronically, by the pro 	oosed designated premises supervisor	
• As an attachment to this	application	
Reference number for consent form (if known)		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 ENTERTAINMENT		
Highlight any adult entertainm premises that may give rise to	nent or services, activities, or other entertainme concern in respect of children	ent or matters ancillary to the use of the
rise to concern in respect of ch	ng intended to occur at the premises or ancilla ildren, regardless of whether you intend childr semi-nudity, films for restricted age groups etc	en to have access to the premises, for example
NONE.		
Section 17 of 19		
HOURS PREMISES ARE OPEN	TO THE PUBLIC	
Standard Days And Timings		
MONDAY Start Start	00:00 End 24:00 End	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 to be used for the activity.
oturt		

	o puge	
TUESDAY		
	Start 00:00	End 24:00
	Start	End
WEDNESDAY		
	Start 00:00	End 24:00
	Start	End
THURSDAY		
	Start 00:00	End 24:00
	Start	End
FRIDAY		
	Start 00:00	End 24:00
	Start	End
SATURDAY		
	Start 00:00	End 24:00
	Start	End
SUNDAY		
	Start 00:00	End 24:00
	Start	End
State any seasonal var		
_		y will occur on additional days during the summer months.
NONE.		
	. Where you intend to use the umn on the left, list below	e premises to be open to the members and guests at different times fro
For example (but not e	exclusively), where you wish †	the activity to go on longer on a particular day e.g. Christmas Eve.
NONE.		
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LICENSING OBJECTIV	ES	
Describe the steps you	u intend to take to promote t	he four licensing objectives:
a) General – all four lic	ensing objectives (b,c,d,e)	

List here steps you will take to promote all four licensing objectives together.

The site will have in place a suitable and sufficient CCTV system, which will comprise of a Digital video management system, the 16-channel version will record up to 240 ips at 4CIF. The unit is in a desktop chassis as standard. The system is networkable and integrates with other equipment and software applications. The system is a motion based recording system, and therefore will record on motion only, images will be retained for a period of no less than 31 days.

Access to the equipment and recordings will be provided to the Police within 24 hours of the request being made, contact details of the Retailer will be kept on site and made available to the Police for the purpose of obtaining access to the equipment and recordings.

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

A refusals log will be operated and maintained and will be produced to a relevant officer of the Police or other relevant officers of a responsible authority upon request.

An incident log will be operated and maintained and will be produced to a relevant officer of the Police or other relevant officers of a responsible authority upon request.

A Challenge 25 policy will be operated at the premise, acceptable forms of identification are a passport, photocard driving licence and PASS accredited identification card.

Spirits (with the exception of spirit mixers and pre mixed spirit drinks) will be located behind the counter.

b) The prevention of crime and disorder

The site will have in place a suitable and sufficient CCTV system, which will comprise of a Digital video management system, the 16-channel version will record up to 240 ips at 4CIF. The unit is in a desktop chassis as standard. The system is networkable and integrates with other equipment and software applications. The system is a motion based recording system, and therefore will record on motion only, images will be retained for a period of no less than 31 days.

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Spirits (with the exception of spirit mixers and pre mixed spirit drinks) will be located behind the counter.

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

c) Public safety

The site will have in place a suitable and sufficient CCTV system, which will comprise of a Digital video management system, the 16-channel version will record up to 240 ips at 4CIF. The unit is in a desktop chassis as standard. The system is networkable and integrates with other equipment and software applications. The system is a motion based recording system, and therefore will record on motion only, images will be retained for a period of no less than 31 days.

Access to the equipment and recordings will be provided to the Police within 24 hours of the request being made, contact details of the Retailer will be kept on site and made available to the Police for the purpose of obtaining access to the equipment and recordings.

d) The prevention of public nuisance

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

An incident log will be operated and maintained and will be produced to a relevant officer of the Police or other relevant officers of a responsible authority upon request.

e) The protection of children from harm

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

A refusals log will be operated and maintained and will be produced to a relevant officer of the Police or other relevant officers of a responsible authority upon request.

A Challenge 25 policy will be operated at the premise, acceptable forms of identification are a passport, photocard driving licence and PASS accredited identification card.

Spirits (with the exception of spirit mixers and pre mixed spirit drinks) will be located behind the counter.

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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

£100.00
£190.00
£315.00
£450.00*
£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

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 (£)

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.

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?"

*	Ful	l na	me
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SARA CLEMENT PP. LOCKETT & CO

* Capacity

* Date

 DULY AUTHORISED AGENTS

 05
 /
 01
 /
 2017

mm yyyy

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...

dd

2. Go back to <u>https://www.gov.uk/apply-for-a-licence/premises-licence/portsmouth/apply-1</u> 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	SHELL FRATTON
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	
< Previous <u>1</u> <u>2</u> <u>3</u> <u>4</u>	<u>5 6 7 8 9 10 11 12 13 14 15 16 17 18 19</u> Next >