

# APPENDIX A

## 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** **HAKEM ARABBETOU**

*(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

92 OSBORNE ROAD SOUTHSEA HAMPSHIRE PO5 3LU			
Post town		Postcode	PO5 3LU
Telephone number at premises (if any)		[REDACTED]	
Non-domestic rateable value of premises		[REDACTED]	

#### Part 2 - Applicant details

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

- |   |                             |
|---|-----------------------------|
| a) an individual or individuals * <input checked="" type="checkbox"/> | please complete section (A) |
| b) a person other than an individual *                                |                             |
| i as a limited company/limited liability partnership                  | please complete section (B) |
| ii as a partnership (other than limited liability)                    | 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 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 checked="" type="checkbox"/>	Mrs	Miss	Ms	Other Title (for example, Rev)	
<b>ARABETOU</b>			<b>Hakem</b>		
<b>Date of birth</b>		over <span style="background-color: black; color: black;">[REDACTED]</span>		I am 18 years old or <span style="float: right;">Please tick yes</span>	
<b>Nationality</b>		<b>UK</b>			
<b>Current residential address if different from premises address</b>		[REDACTED]			
<b>Post town</b>			<b>Postcode</b>		
<b>Daytime contact telephone number</b>			[REDACTED]		
<b>E-mail address (optional)</b>		[REDACTED]			

**SECOND INDIVIDUAL APPLICANT** (if applicable)

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
Date of birth over		I am 18 years old or		Please tick yes	
Nationality					
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 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
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD MM YYYY  
18 ~~May~~ 2021  
JUNE

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)

Bar & Cafe

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

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)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)
- f) recorded music (if ticking yes, fill in box F) ✓
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g)  
(if ticking yes, fill in box H)

**F**

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place <u>indoors or outdoors or both</u> – please tick (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	11:00	24:00	<u>Please give further details here</u> (please read guidance note 4)		
Tue	11:00	24:00			
Wed	11:00	24:00	<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
Thur	11:00	24:00			
Fri	11:00	24:00	<u>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</u> (please read guidance note 6)		
Sat	11:00	24:00			
Sun	12:00	23:00			

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	
				Off the premises	
Day	Start	Finish	Both <input checked="" type="checkbox"/>		
Mon	11:00	24:00	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Tue	11:00	24:00			
Wed	11:00	24:00			
Thur	11:00	24:00	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)		
Fri	11:00	24:00			
Sat	11:00	24:00			
Sun	12:00	24:00			

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 MR HAKEM ARABBETOU	
Date of birth [REDACTED]	
Address [REDACTED]	
Postcode	[REDACTED]
Personal licence number (if known) 151 [REDACTED]	
Issuing licensing authority (if known) PORTSMOUTH CITY COUNCIL	

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).

None

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	11:00	24:00	
		<del>24:00</del>	
Tue	11:00	24:00	
Wed	11:00	24:00	
Thur	11:00	24:00	
Fri	11:00	24:00	
Sat	11:00	24:00	
Sun	12:00	24:00	

**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)

1. prevention of crime & disorder
2. public safety
3. prevention of public nuisance
4. Protection of children from harm.

See  
attached

b) The prevention of crime and disorder

1. CCTV
2. staff supervisor

c) Public safety

1. External lighting
2. CCTV

d) The prevention of public nuisance

1. Noise reduction measures.
2. Dispersal policies

e) The protection of children from harm

1. Challenge 21 or challenge 25 scheme
2. Control over admission of children.

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.

<b>Declaration</b>	<ul style="list-style-type: none"> <li>[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).</li> <li>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)</li> </ul>
Signature	[Redacted]
Date	13/05/2021
Capacity	Proprietor

**For joint applications, signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> 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	
[Redacted]	
Post town	[Redacted]
Postcode	[Redacted]
Telephone number (if any)	[Redacted]
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)	

#### Notes for Guidance

- Describe the premises, for example the type of premises, its general situation and layout and any other information which 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 will be and its proximity to the premises.
- In terms of specific regulated entertainments please note that:
  - Plays: no licence is required for performances between 08:00 and 23:00 on any day, provided that the audience does not exceed 500.