

Application for a premises licence to be granted under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

this	form by 1	eting this form please read the guinand please write legibly in block of itten in black ink. Use additional shows the completed arminder Sooch plane(s) of applicant) or emises licence under section 17 (the premises) and I/we are malaccordance with section 12 of the	apitals. In all	cases e	nsure that your ar	swers are insidente
	-	arminder Sooch name(s) of applicant) remises licence under section 17 (the premises) and I/we are mal accordance with section 12 of the mises Details	of the Licens king this appli Licensing A	ing Act cation ct 2003	2003 for the proto you as the rel	emises described in evant licensing
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Post	town	Worcester	e en	તામન કરાવાલા તારા નામુખવાનુ () (નામુખવાનુ ()	Postcode	B98 7LU
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	and the section of t	mber at premises (if any)				
Non	-domestic	: rateable value of premises	£6800.00			
Part	2 - Appli	cant Details				
Plea	se state w	thether you are applying for a pren			k as appropriate	
a)	an ind	ividual or individuals *		\boxtimes	please complete	e section (A)
b)	a pers	on other than an individual *				
	i. e	s a limited company			please complete	e section (B)
	ii. <i>e</i>	ns a partnership			please complete	e section (B)
	iii. z	s an unincorporated association or	•		please complete	e section (B)
	iν, ε	other (for example a statutory corp	oration)		please complete	e section (B)
c)	a reco	gnised club			please complete	e section (B)
d)	a char	ity			please complete	e section (B)
e)	the pro	oprietor of an educational establish	ment		please complete	e section (B)

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* If ye	ou are applyi	ng as a	person d	escribe	d in (a) o	r (b) ple	ase con	firm:		
h)	the chief off and Wales	ficer of	police of a	r police	force in I	England		please comp	plete section (B)	
ga)	a person who of the Healt meaning of England	m and 5	ocial Car	∍ Act 20	MR Carrielai	n +1		please com	plete section (B)	
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g)		rvice bo	•					please com	plete section (B)	}

SECOND INDIVIDUAL APPLICANT (if applicable)

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Current postal address if different from premises address								
Post town		del	Postcode	and the second s				
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E-mail address (optional)			-					
Please provide name and registered number. In the	(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 WAS THE STATE OF THE STATE					
Address	- « « « « « « « « « « « « « « « » « « » « « » « « » « « » « « « « « « « « » « « « « « » « « » « « « « » « « « «			en e				
Registered number (where	applicable)	कार वर्षा वर्ष	enter de la companya					
Description of applicant (fo	r example, partnership, cor	npany, unince	orporated associat	ion etc.)				
Telephone number (if any)	en e	Ny firitan'i Mandridon ao amin'ny faritr'i Amerika	V	оссиченоване выполнения на муниция и which in industry и выполнения выполнения выполнения выполнения в				
E-mail address (optional)	rinad ummes provinces unitarios de la companya de l	t to the state of	ragan raphitaris de madai nn an deann an an aiste ann an an an an ann an an an an an an a					

Part 3 Operating Schedule

W	hen do you want the premises licence to start?	DD MM YYYY 1 5 0 7 2 0 1 3
If wa	you wish the licence to be valid only for a limited period, when do you ant it to end?	DD MM YYYY
Ple	ease give a general description of the premises (please read guidance note 1) DNVENIENCE STORE & OFF LICENCE	
If 5 plea	,000 or more people are expected to attend the premises at any one time, ase state the number expected to attend.	
Wh	at licensable activities do you intend to carry on from the premises?	
(Ple	ease see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 t	o the Licensing Act 2003)
Pro	vision of regulated entertainment	Please tick any 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)	
Prov	vision of late might refreshment (if ticking yes, fill in box I)	
	Div of alcohol (if ticking yes, fill in box J) I cases complete boxes K, L and M	

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Anything of a similar description to that falling within (c), (f) or (g) Shooded days and manu-piesser teel greature ranne (s) Please gave a discription of the type of emerginating and will be providing Day Will this entertainment take place indoors or authors or both—please tick (please scat guidance none 2) Statt Februh Angua Angua Angua Angua Angua Angua Aker Ossilents Take Please six that her delails here opener read guadance note Wid Hur State any reasonal variations for concrisionment of a similar description to that failing within tel. (flooring) ophise read publisher and c.4) Fri Mas standard timbogs. Where you intend to use the premions for the entertabunet of a similar description to that falling within (e. (I) or (g) at different flues to those based in the column on the left, please list please tred guidance cond."

Late night refreshment Standard days and timings (please read guidance note		timings	Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	indoors	
6)		ARECE W	(p,nano sua garanto non 2)	Outdoors	
Day	Start	Finish		Both	
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i i			Non standard timings. Where you intend to use the provision of late night refreshment at different time the column on the left, please list (please read guidance)	s, to those listed	
Sat					
Sun					

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption — please tick (please read guidance note 7)	On the premises	
				Off the premises	Ø
Day	Start	Finish		Both	
Mon	08.00		State any seasonal variations for the supply of alcohol (please reaguidance note 4)	hol (please read	
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Tue	08.00				
		21.00			
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	NA SECURE SECURITY OF SECURITY OF THE PROPERTY	21.00	supply of alcohol at different times to those listed in the column on left, please list (please read guidance note 5)	the column on t	<u>the</u>
Fri	08.00	edition of the second of the s	a survey of the		
		21.00			
Sat	08.00	1/14/10/2			
	9990466	21.00			
Sun	08.00	enter enter			
		21.00			

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor:

Name	
Mrs Sarminder Sooch	
Address	
Fall Green	
Postcode	
Personal licence number (if known) 1765	
Issuing licensing authority (if known) BIRMINGHAM CITY COUNCIL	

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 8).

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Hours premises are open to the public Standard days and timings (please read guidance note 6)		i timings	State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	08.00	Marie de la companya	
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Thur	08.00	red in a state of the second control of the	public at different times from those listed in the column on the legislate (please read guidance note 5)
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Sat	08.00		
	and was to be a second	21.00	
Sun	08.00	gal digit garigi e del en gran demon e hamatin madre delle e del de e delle e del	
		21.00	

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 9)

- The premises will be managed and controlled by a responsible person at all time.
- The Designated Premises Supervisor will be on the premises or contactable during the operating hours.
- · Pemises will be managed by minimum of three member of staff at all time.

b) The prevention of crime and disorder

- Police will be reported for any incidents of a criminal nature.
- · A comprehensive Internal & External CCTV will be installed and the recordings (including night vision cameras) will be kept for minimum of 90 days. Also these recordings will be available for any responsible authorities.
- · A security alarm system will be installed & maintained.

c) Public safety

- Fire safety equipments are installed and will me maintained on the premises.
- The Emergency Exit will be kept free from obstructions at all time.
- Staff will be fully trained in alcohol sales and fire safety/evacuation procedures.

d) The prevention of public nuisance

- Adequate bins will be available for customers to dispose of their litter.
- · Signs will be displayed requesting customers to have regard for local residents when leaving the premises.
- · Staff will not serve alcohol to known (if any) street drinkers.

e) The protection of children from harm

- The Challenge 21 Policy will be strictly followed and the relevant signs will be on display.
- · A register of refusal of sales will be kept and maintained on the premises.
- · Sprits will be located behind the counter area.
- · Staff will be mindful of situations where adults may be purchasing alcohol for children by monitoring the area surrounding the premises and being vigilant at school/college closing
- · All staff will be trained in their responsibilities under the Licensing Act 2003 and other relevant legislation relating to age restricted products.

Che	cklist:						
				Please tick t	o indicate agree		
•		or enclosed payment of				\boxtimes	
©	I have enclo	sed the plan of the prem	nises.			\boxtimes	
**	I have sent capplicable.	have sent copies of this application and the plan to responsible authorities and others where plicable.		others where	\boxtimes		
•		I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.			nated premises	\boxtimes	
@	I understand	that I must now advert	ise my application.			\boxtimes	
•	I understand that if I do not comply with the above requirements my application will be rejected.						
LEV	EL 5 ON TH	E STANDARD SCAI	MMARY CONVICTION T LE, UNDER SECTION 158 N OR IN CONNECTION V	OF THE LIC	ENSING ACT		
Pari	4 – Signatur	es (please read guidan	ice note 10)				
-012	7.*		olicitor or other duly author ease state in what capacity.	rised agent (see	e guidance note 1	1).	
Signature		Mr.					
Date		Authorised Agent					
Capacity 06/06		06/06/2013					
ager			applicant or 2 nd applicant's signing on behalf of the app				
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appi Mr		read guidance note 13	n) and postal address for corr)	espondence ass	sociated with this		
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Consent of individual to being specified as premises supervisor
SARMINDER SOOCH
[full name of prospective premises supervisor]
of.
HALL GREEN
[home address of prospective premises supervisor]
hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for
NEW PREMISES LICENCE [type of application]
by SARMINDER SOUCH [name of applicant]
relating to a premises licence
for LIFE STYPS EXPRESS
IT FLYFORD CLOSE
LODEG PARK, REDDITCH, B98 74U [name and address of premises to which the application relates]
and any premises licence to be granted or varied in respect of this application made
by SARMINDER SOOCH [name of applicant]
concerning the supply of alcohol atLIFE STYLES EXPRESS
17 FLYFORD CLOSE
LODGE PARK B98 71-0 [name and address of premises to which application relates].
I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.
Personal licence number
Personal licence issuing authority BRMINGHPM CITY COUNCIL [insert name and address and telephone number of personal licence issuing authority, if any]
<u>AlSoul</u> signed
SARMINDER Scoc. H. name (please print)
02 /06 /2013 dated





