

Wolverhampton
Application for a premises licence
Licensing Act 2003

For help contact city.direct@wolverhampton.gov.uk Telephone: 01902 551155

\* required information

Section 1 of 19	western and the state of the st	
You can save the form at a	ny time and resume it later. You do not need t	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		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 or	n behalf 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	Wojcieh	
* Family name	Misiewicz	
* E-mall	pmblicensing@yahoo.com	
Main telephone number		include country code.
Other telephone number		
Indicate here if the ap	plicant would prefer not to be contacted by te	elephone
s the applicant:		
<ul><li>Applying as a busines</li><li>Applying as an individ</li></ul>	s or organisation, including as a sole trader iual	A sole trader is a business owned by one 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.
	4.	



Continued from previous page.	29	
Address		
* Building number or name	39	
* Street	Allerton Lane	
District		]
* City or town	West Bromwich	
County or administrative area		
* Postcode	B71 2HR	
* Country	United Kingdom	
Agent Details		
* First name	Patrick	
* Family name	Burke	
* E-mail	pmblicensing@yahoo.com	
Main telephone number	07779 351620	include country code.
Other telephone number		]
Indicate here if you wou	ld prefer not to be contacted by telephone	
Are you:		
<ul> <li>An agent that is a business or organisation, including a sole trader</li> <li>A sole trader is a business owned by one person without any special legal structure</li> </ul>		
A private individual actir	ng as an agent	person whitese arry special region on secones
Agent Business		
* Is your business registered in the UK with Companies House?	← Yes ← No	
* Is your business registered outside the UK?	C Yes	
* Business name	Pmb licensing	If your business is registered, use its registered name.
* VAT number	NONE	Put "none" if you are not registered for VAT.
* Legal status	Sole Trader	
* Your position in the business	PROPIETOR	
Home country	United Kingdom	The country where the headquarters of your business is located.

Agent Business Address  * Building number or name  * Street  District  BRIERLEY HILL  * City or town  DUDLEY  County or administrative area  * Postcode  DY5 3BP  * Country  United Kingdom  Section 2 of 19  PREMISES DETAILS  I/we, as named in section 1, apply for a premises licence under section 17 of the described in section 2 below (the premises) and I/we are making this application accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description  Postal Address Of Premises  Building number or name  Polish Taste	If you have one, this should be your official address - that is an address required of you by law for receiving communications.  Licensing Act 2003 for the premises in to you as the relevant licensing authority
* Building number or name  * Street  District  BRIERLEY HILL  * City or town  DUDLEY  County or administrative area  WEST MIDLANDS  * Postcode  DY5 3BP  * Country  United Kingdom  Section 2 of 19  PREMISES DETAILS  I/we, as named in section 1, apply for a premises licence under section 17 of the described in section 2 below (the premises) and I/we are making this application accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of the Address O S map reference Description  Postal Address Of Premises	address - that is an address required of you by law for receiving communications.
* Street  District  BRIERLEY HILL  * City or town  DUDLEY  County or administrative area  WEST MIDLANDS  * Postcode  DY5 3BP  * Country  United Kingdom  Section 2 of 19  PREMISES DETAILS  I/we, as named in section 1, apply for a premises licence under section 17 of the described in section 2 below (the premises) and I/we are making this application accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of the Address  O5 map reference  Description  Postal Address Of Premises	address - that is an address required of you by law for receiving communications.
District  BRIERLEY HILL  * City or town  DUDLEY  County or administrative area  WEST MIDLANDS  * Postcode  DY5 3BP  * Country  United Kingdom  Section 2 of 19  PREMISES DETAILS  I/we, as named in section 1, apply for a premises licence under section 17 of th described in section 2 below (the premises) and I/we are making this application accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of the Address  O5 map reference  Description  Postal Address Of Premises	
*City or town  DUDLEY  County or administrative area  WEST MIDLANDS  *Postcode  DY5 3BP  Country  United Kingdom  Section 2 of 19  PREMISES DETAILS  I/we, as named in section 1, apply for a premises licence under section 17 of the described in section 2 below (the premises) and I/we are making this application accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, OS map reference or description of the Address  OS map reference  Description  Postal Address Of Premises	Licensing Act 2003 for the premises n to you as the relevant licensing authority
* Postcode  * Postcode  * Country  United Kingdom  Section 2 of 19  PREMISES DETAILS  I/we, as named in section 1, apply for a premises licence under section 17 of th described in section 2 below (the premises) and I/we are making this application accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of the Address    O5 map reference   Description  Postal Address Of Premises	Licensing Act 2003 for the premises n to you as the relevant licensing authority
* Postcode  * Country  United Kingdom  Section 2 of 19  PREMISES DETAILS  I/we, as named in section 1, apply for a premises licence under section 17 of th described in section 2 below (the premises) and I/we are making this application accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of the Address    O5 map reference    Description  Postal Address Of Premises	Licensing Act 2003 for the premises n to you as the relevant licensing authority
*Country  United Kingdom  Section 2 of 19  PREMISES DETAILS  I/we, as named in section 1, apply for a premises licence under section 17 of the described in section 2 below (the premises) and I/we are making this application in accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of the Address © O5 map reference © Description  Postal Address Of Premises	Licensing Act 2003 for the premises n to you as the relevant licensing authority
Section 2 of 19  PREMISES DETAILS  I/we, as named in section 1, apply for a premises licence under section 17 of th described in section 2 below (the premises) and I/we are making this application in accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of the Address    O5 map reference   Description  Postal Address Of Premises	E Licensing Act 2003 for the premises in to you as the relevant licensing authority
I/we, as named in section 1, apply for a premises licence under section 17 of th described in section 2 below (the premises) and I/we are making this application accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of the Address    O5 map reference   Description  Postal Address Of Premises	e Licensing Act 2003 for the premises n to you as the relevant licensing authority
I/we, as named in section 1, apply for a premises licence under section 17 of th described in section 2 below (the premises) and I/we are making this application accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of the Address    O5 map reference   Description  Postal Address Of Premises	e Licensing Act 2003 for the premises in to you as the relevant licensing authority
I/we, as named in section 1, apply for a premises licence under section 17 of the described in section 2 below (the premises) and I/we are making this application in accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of the Address O5 map reference Description  Postal Address Of Premises	Licensing Act 2003 for the premises in to you as the relevant licensing authority
in accordance with section 12 of the Licensing Act 2003.  Premises Address  Are you able to provide a postal address, O5 map reference or description of th  Address  O5 map reference  Description  Postal Address Of Premises	E Licensing Act 2003 for the premises in to you as the relevant licensing authority
Address	
Postal Address Of Premises	e premises?
Building number or name Polish Taste	
30 Church St	
District	J
City or town Bilston	
County or administrative area	
Postcode WV14 0AX	
Country United Kingdom	
Further Details	
Telephone number	
Non-domestic rateable value of premises (£) 6,700	

Sect	Section 3 of 19			
APP	APPLICATION DETAILS			
In w	n what capacity are you applying for the premises licence?			
×	An individual or individ	łuals		
	A limited company			
	A partnership			
	An unincorporated asso	ociation		
	A recognised club			
	A charity			
	The proprietor of an ed	ucational establishment		
	A health service body			
		red under part 2 of the Care Standards Act 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)			
Confirm The Following				
	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			
Section	on 4 of 19			
INDIV	IDUAL APPLICANT DET	AILS		
Appli	cant Name			
Is the	name the same as (or sir	nilar to) the details given in section one?	If "Yes" is selected you can re-use the details	
from section one, or amend them as Select "No" to enter a completely needetails.		Select "No" to enter a completely new set of		
First n	ame	Wojcieh		
Family	y name	Misiewicz		
Is the	s the applicant 18 years of age or older?			
@ Y	es	C No		

Continued from previous page	14	
Applicant Postal Address		
is the address the same as (or	r similar to) the address given in section one?	If "Yes" is selected you can re-use the details
	C No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
Building number or name	39	
Street	Allerton Lane	7
District		
City or town	West Bromwich	
County or administrative area		
Postcode	B71 2HR	-
Country	United Kingdom	
Applicant Contact Details		
Are the contact details the san	ne as (or similar to) those given in section one?	If "Yes" is selected you can re-use the details
∀es	C No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
E-mail	pmblicensing@yahoo.com	
Telephone number		
Other telephone number		
	Add another applicant	
Section 5 of 19		
OPERATING SCHEDULE		
When do you want the premises licence to start?	08 / 01 / 2016 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 o	f the premises	
icensing objectives. Where you	es, its general situation and layout and any other or application includes off-supplies of alcohol and lies you must include a description of where the	d you intend to provide a place for
New shop to the area, specializing	ng in polish product.	

Continued from previous page	Ross	
If 5,000 or more people are		
expected to attend the premises at any one time,	Г	
state the number expected	to L	
attend		
Section 6 of 19		
PROVISION OF PLAYS		
Will you be providing plays?		
C Yes	(F	No
Section 7 of 19		
PROVISION OF FILMS		
Will you be providing films?		
← Yes	6	No
Section 8 of 19		
PROVISION OF INDOOR SPO	RTI	IG EVENTS
Will you be providing Indoor	spor	ting events?
← Yes	•	No
Section 9 of 19		
PROVISION OF BOXING OR Y	WRE	TLING ENTERTAINMENTS
Will you be providing boxing	or w	restling entertainments?
C Yes	<b>(</b>	No
Section 10 of 19		
PROVISION OF LIVE MUSIC		
Will you be providing live mu	sic?	
← Yes	(	No
Section 11 of 19		
PROVISION OF RECORDED M	IUSI	
Will you be providing recorde	d mı	sic?
C Yes	<b>(</b>	No
Section 12 of 19		
PROVISION OF PERFORMAN	CES (	)F DANCE
Will you be providing perform	ance	s of dance?
	<b>(6</b>	No
Section 13 of 19		
PROVISION OF ANYTHING OF DANCE	AS	MILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF
Will you be providing anything performances of dance?	sim	ilar to live music, recorded music or
( Yes	<b>6</b>	40

Continued from previous p	age	
Section 14 of 19		The second secon
LATE NIGHT REFRESHA	ASNT	The state of the s
Will you be providing la	te night refreshment?	7 Department of the second sec
rr Yes	No	
Section 15 of 19	от вы выли, эталивальных д	and the second s
SUPPLY OF ALCOHOL		The state of the s
Wall you be selling or sur	aplying alcohol?	
(* Yes	← No	
Standard Days And Tin	nings	
MONDAY		
	Start  08:00	Give timings in 24 hour clock.  End [21:00   (e.g., 16:00) and only give details for the days
	Start	of the week when you intend the premises
	DEDIT	End to be used for the activity.
TUESDAY	The second secon	
	Star: 08:00	Егий 21:00
	Start	Lnot
WEDNESDAY		
:	Start 08:00	Fried (21:02)
i i	Start	End
YACZRUHT	De Militari prompto talegi <u>o esta-esta-est</u>	,
	Start 08:00	End 21:00
	Start	The Particular Control of the Contro
	Delical L. Section of the Company of	Ena L
FRIDAY	· The statement of the	
5	tarr 08:00	£nd  21:00
	tan	End
PACHUTAZ		
5	tan 08:00	End   21:00
5	lart	Fnd
SUNDAY	n ganda na magili ku <sub>shing</sub> a	America con .
	tar (08:00	Frid 21:00
	art	
24	W.L.	Lod

2 8

Continued from previous p	986	
Will the sale of alcohol be	for consumption:	if the sale of alzohol is for consumption on
. On the premises	ම Off the premises ැ ප්රේඛ	the premises select on, if the sale of alcoholis for consumption away from the premises select off, if the sale of alcoholis for consumption on the premises and away from the premises select both.
State any seasonal variable	ons	
For example (but not exc.)	usively) where the activity will occur on additi	internal internal adaption of the second and a
None	And the second s	and days during are summer anomals.
Similar of the state of the sta		
		v.,
Non-standard timings, wh	ere the premices will be used for the supply o	f alcohol at different times from those listed in the
COMPLESS OLD DIG NEW NEW WEST PASS	OW.	
	isively), where you wish the activity to go on I	onger on a particular day e.g. Christmas Eve.
None	-	The second
The state of the s		
A section of the sect	, Westernamental and the second	
Allisto Error marries and despends	we share the street of the later	
licence as premises supervi	of the individual whom you wish to specify o sor	n the
Name		
First name	The County of the second secon	to referencia como un-
Family name	A STATE OF THE	**Propose our name,
Enter the contact's addres		SIAMS re-unions
	5	
Building rumper or name	39	
Street	Allerton Lane	
District	THE STATE AT A STATE AND A STATE AS A STATE	
City or town	West Brownwich	SERVICE OF THE SERVIC
County or administrative are		order maria d
	The second secon	
Postcode	871 2HR	
Country	United Kingdom	
Personal Licence number		
(f knows)	017£M	1
issume licensing authority		•
(it known)	Sandy-St MBC	r.
		water-

Continued from previous			
		MUSOD COME	
	PROPOSED DESIGNATED PREMISES SUPERVISOR COMSENT  How will the consent form of the proposed designated premises supervisor		
be supplied to the au	rthority?	aesignated premises supervisor	
<ul><li>Electronically, b</li></ul>	y the proposed designa	ated premises supervisor	
C As an attachme	ent to this application		
Reference number for	r consent		If the consent form is already submitted, ask
form (if known)	L		the proposed designated premises supervisor for its 'system reference' or 'your reference'.
Section 16 of 19			reference.
ADULT ENTERTAINM	ENT		
Highlight any adult er premises that may give	ntertainment or services ve rise to concern in resp	s, activities, or other entertainmen	t or matters ancillary to the use of the
use to concern to tesh	rect of Children, regardle	ess of whether you intend children	to the use of the premises which may give to have access to the premises, for example
(but not exclusively) n	udity or semi-nudity, file	ms for restricted age groups etc g	ambling machines etc.
None			
Section 17 of 19			
HOURS PREMISES ARE	E OPEN TO THE PUBLIC		
Standard Days And Ti	imings		
MONDAY			
	Start 08:00		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
_	Start	End	to be used for the activity.
TUESDAY			
	Start 08:00	End 21:00	
	Start	End	
WEDNESDAY			
	Start 08:00	End 21:00	
	Start	End	
THURSDAY			
	Start 08:00	a . [a	>
		End 21:00	
	Start	End	
FRIDAY			
	Start 08:00	End 21:00	
	Start	End	

Continued from previou			
J	us page		
SATURDAY			
	Start   08:00	End 21:00	
	Start	End	
SUNDAY			
	Start 08:00	End 21:00	
	Start	End	
State any seasonal vari	iations		
		ity will occur on additional days during the summer months.	
None	The same same same same same same same sam		
<u> </u>			
Non standard timings.	Where you intend to use th	e premises to be open to the members and guests at different tim	es from
mose usted in the Coldi	inn on the left, list below		
For example (but not ex	xclusively), where you wish	the activity to go on longer on a particular day e.g. Christmas Eve.	,
	-		
Section 18 of 19			
ICENSING OBJECTIVE			
		he four licensing objectives:	
	nsing objectives (b,c,d,e)		
	take to promote all four lice	<del>-</del>	
ALL STAFF WILL BE TRAII	NED WITH REGARD TO THE	LICENCING ACT 2003, THE SERVICE OF ALCOHOL AND TOBACCO.	A
OFFICER ON A REGULAR	BASIS.	SES BY UNDER 18*S. WE WILL LIAISE WITH THE LOCAL POLICE LICE	NCING
) The prevention of crin	ne and disorder		
ROMINENT SIGNS ARE D	DISPLAYED WITH REGARD T	O ALCOHOL AND	
OBBACO SALES	TALLED AT THE PREMISES		
REFUSAL BOOK IS KEPT	AT THE PREMISES.		
) Public safety			
LL EMREGENCY LIGHTIN		LY ENTRANCES , EXITS AND PASSEGEWAYS ARE KEPT CLEAR	<sub>1</sub>
		THE CLEAK	

## Continued from previous page...

d) The prevention of public nuisance

PROMINENT SIGNS WILL BE DISPLAYED REQUESTING CUSTOMERS TO HAVE REGARD FOR LOCAL RESIDENTS WHEN LEAVING THE PREMISES ADEQUATE BINS ARE AVAILABLE FOR CUSTOMERS TO DISPOSE OF LITTER.

e) The protection of children from harm

WE WILL OPERATE A CHALLENGE 25 POLICY

## Section 19 of 19

## **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

Band A - No RV to £4300	£100,00
Band B - £4301 to £33000	£190.00
Band C - £33001 to £87000	£315.00
Band D - £87001 to £125000	£450.00
Band E - £125001 and over	£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 £125000 £900.00 Band E - £125001 and over £1,905.00

If you own a large premise 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 (£)

190.00

## DECLARATION

/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.

THE INFORMATION GIVEN MAY BE HELD IN MANUAL OR COMPUTERISED FORM AND WILL BE SUBJECT TO THE PROVISIONS OF THE DATA PROTECTION ACT 1998

\* This authority is under a duty to protect the public funds it administers, and to this end may use the information you have

	Continued from previous pag	
	provided on this form for	the prevention and detection of fraud. It may also share this information with other bodies or administering public funds for these purposes.
	☐ Ticking this box ind	icates you have read and understood the above declaration
	This section should be com behalf of the applicant?"	pleted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
	* Full name	Patrick Burke
	* Capacity	Agent of Applicant
	* Date	08 / 01 / 2016 dd mm yyyy
		Add another signatory
	continue with your applicati	nputer by clicking file/save as  OV.UK/apply-for-a-licence/premises-licence/wolverbampton/apply-145-uplands licence/premises-licence/wolverbampton/apply-145-uplands licence/premises-licence/wolverbampton/apply-145-uplands licence/premises-licence/wolverbampton/apply-145-uplands licence/premises-licence/wolverbampton/apply-145-uplands licence/premises-licence/wolverbampton/apply-145-uplands licence/premises-licence/wolverbampton/apply-145-uplands licence/premises-licence/prem
	IT IS AN OFFENCE, LIABLE O	ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING LEVEL 5 ON THE STANDARD 8 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION
,	Applicant reference number	
-	Fee paid	
į	Payment provider reference	
E	LMS Payment Reference	
F	ayment status	
F	ayment authorisation code	
P	ayment authorisation date	
	ate and time submitted	
٩	pproval deadline	
	rror message	
5	Digitally signed	
	< Previous 1 2 3 4	5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 Next>
-		

Continued from previous page	Marie de la company de la comp
Address	
Building number or name	· · · · · · · · · · · · · · · · · · ·
Street	
District	E THE AND SHOW THE PROPERTY OF
City or town	Traingrant - Bu-Tagan-gh-tag, salar s All All Bu-All gh-All gh-Al
County or administrative area	t. Adad □ provide 1 contains the contains t
Postcode	
Country	United Kingdom
DECLARATION	"Whiteholds of the same passages as a fig."
	ce, liable on conviction to a fine up to level 5 on the standard scale, under section 158 of the false statement in or in connection with this application.
.*	AY BE HELD IN MANUAL OR COMPUTERISED FORM AND WILL BE SUBJECT TO THE
provided on this form for the responsible for auditing or ad	to protect the public funds it administers, and to this end may use the information you have prevention and detection of fraud. It may also share this information with other bodies liministering public funds for these purposes.  In part of the public funds for these purposes.
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: name	PATRICL M. BURKE
<sup>®</sup> Capacity	AGUT FOR THE APPLICAT
Date (dd/mm/yyyy)	8-1-16
	Add anabler signatory
Once you're finished you need to do the following:  1. Save this form to your computer by clicking file/save as  2. Go back to	

4 F.F