



Wolverhampton
Provisional statement
Licensing Act 2003

For help contact city.direct@wolverhampton.gov.uk

Telephone: 01902 551155

* required information

| on 1 of 19 | |
|---|---|
| can save the form at any time ar | ged in when you resume. |
| em reference Not 0 | his is the unique reference for this pplication generated by the system. |
| The I | ou can put what you want here to help you rack applications if you make lots of them. It passed to the authority. |
| you an agent acting on behalf of | ut "no" if you are applying on your own ehalf or on behalf of a business you own or ork for. |
| | |
| licant Details | |
| st name Angl | |
| mily name Bent | |
| nail | |
| n telephone number | nclude country code. |
| er telephone number | |
| Indicate here if you would pre | |
| /ou: | |
| Applying as a business or orga | sole trader is a business owned by one |
| Applying as an individual | erson without any special legal structure. pplying as an individual means you are pplying so you can be employed, or for ome other personal reason, such as ollowing a hobby. |
| licant Business | |
| ur business registered in O JK with Companies se? | ote: completing the Applicant Business ection is optional in this form. |
| ur business registered Oide the UK? | |
| ness name The I | your business is registered, use its gistered name. |
| number | ut "none" if you are not registered for VAT. |
| l status Sole | |
| | л попе п you are |

| Continued from previous page | | |
|---|---|---|
| Your position in the business | owner | |
| Home country | United Kingdom | The country where the headquarters of your business is located. |
| Business Address | | If you have one, this should be your official |
| Building number or name | The Harp | address - that is an address required of you by law for receiving communications. |
| Street | Walsall Street | |
| District | | |
| City or town | Wolverhampton | |
| County or administrative area | West midlands | |
| Postcode | Wv1 3lp | |
| Country | United Kingdom | |
| | | |
| Section 2 of 19 | | |
| PREMISES DETAILS | | |
| | ply for a provisional statement under section 2 he premises) and I/we are making this applicat of the Licensing Act 2003. | |
| Premises Address | | |
| Are you able to provide a posta | al address, OS map reference or description of | the premises? |
| AddressOS ma | p reference O Description | |
| Postal address of premises. | | |
| Building number or name | TheHarp | |
| Street | Walsall Street | |
| District | | |
| City or town | Wolverhampton | |
| County or administrative area | West Midlands | |
| Postcode | WV1 3lp | |
| Country | United Kingdom | |
| Further Details | | |
| Telephone number | | |
| Non-domestic rateable value of premises (£) | 4,600 | |

| Secti | on 3 of 19 | | | | | |
|-------------|--|--|---|--|--|--|
| APPL | ICATION DETAILS | | | | | |
| In wh | nat capacity are you applyi | ng for the premises licence? | | | | |
| \boxtimes | An individual or individua | als | | | | |
| | A limited company | | | | | |
| | A partnership | | | | | |
| | An unincorporated assoc | ation | | | | |
| | A recognised club | | | | | |
| | A charity | | | | | |
| | The proprietor of an educ | ational establishment | | | | |
| | A health service body | | | | | |
| | | d under part 2 of the Care Standards Act n independent hospital in Wales | | | | |
| | Social Care Act 2008 in re | d under Chapter 2 of Part 1 of the Health an spect of the carrying on of a regulated ng of that Part) in an independent hospital | | | | |
| | The chief officer of police | of a police force in England and Wales | | | | |
| | Other (for example a state | utory corporation) | | | | |
| Con | firm The Following: | | | | | |
| \boxtimes | I am carrying on or propo the use of the premises fo | sing to carry on a business which involves or licensable activities | | | | |
| | I am making the applicati | on pursuant to a statutory function | | | | |
| | I am making the applicati virtue of Her Majesty's pre | on pursuant to a function discharged by erogative | | | | |
| | on 4 of 19 | | | | | |
| INDI | VIDUAL APPLICANT DETA | AILS | | | | |
| | licant Name e name the same as (or sim | nilar to) the details given in section one? | If "Yes" is selected you can re-use the details | | | |
| () | Yes | ○ No | from section one, or amend them as required Select "No" to enter a completely new set of details. | | | |
| First | Anglela Anglela | | | | | |
| Fami | nily name Bent | | | | | |
| Is the | e applicant 18 years of age | or older? | | | | |
| • | Yes O No | | | | | |
| | | | | | | |

| Continued from previous page | | | |
|--|----------------------------|--|--|
| Applicant Postal Address | | | |
| Is the address the same as (or s | similar to) the address g | If "Yes" is selected you can re-use the details from section one, or amend them as | |
| Yes | ○ No | | required. Select "No" to enter a completely new set of details. |
| Building number or name | The Harp | | |
| Street | Walsall Street | | |
| District | | | |
| City or town | Wolverhampton | | |
| County or administrative area | West midlands | | |
| Postcode | Wv1 3lp | | |
| Country | United Kingdom | | |
| Applicant Contact Details | | | |
| Are the contact details the sam | ne as (or similar to) thos | se given in section one? | If "Yes" is selected you can re-use the details |
| Yes | ○ No | | from section one, or amend them as required. Select "No" to enter a complete new set of details. |
| E-mail | | | |
| Telephone number | | | |
| Other telephone number | | | |
| | Add anoth | her applicant | |
| What is your nature of interest | in the premises? | | |
| | | | |
| Section 5 of 19 | | | |
| SCHEDULE OF WORK | | | |
| Is the premises: | | | |
| About to be constructed | | | |
| Being extended or altere | d | | |
| Give details of the work and at | tach plans of the work l | being done or about to l | oe done at the premises |
| none | | | |
| | | | |
| | | | |
| | - | | |

| Continued from previous page | | | | |
|----------------------------------|----------------------|--|--------------------------------|--|
| layout and any other information | on which co | ould be relevant to the l s of alcohol and you inte | icensing obje nd to provide | he type of premises, its general situation and ectives. Where you are completing section 16 e a place for consumption of these offimity to the premises. |
| Public house | | | | |
| Section 6 of 19 | | | | |
| PROVISION OF PLAYS | | | | |
| Will you be providing plays? | | | | |
| ○ Yes | No | | | |
| Section 7 of 19 | | | | |
| PROVISION OF FILMS | | | | |
| Will you be providing films? | | | | |
| ○ Yes | No | | | |
| Section 8 of 19 | | | | |
| PROVISION OF INDOOR SPOR | TING EVEN | NTS | | |
| Will you be providing indoor sp | oorting eve | nts? | | |
| ○ Yes | No | | | |
| Section 9 of 19 | | | | |
| PROVISION OF BOXING OR W | RESTLING | ENTERTAINMENTS | | |
| Will you be providing boxing o | r wrestling | entertainments? | | |
| ○ Yes | No | | | |
| Section 10 of 19 | | | | |
| PROVISION OF LIVE MUSIC | | | | |
| Will you be providing live musi | c? | | | |
| Yes | O No | | | |
| Standard Days And Timings | | | | |
| MONDAY | | | | Give timings in 24 hour clock. |
| Start | | End | | (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 | | | | to be used for the definity. |
| Start | | End | | |
| | | _ ¬ | | |
| Start | | End | | |

| Continued from previous | page | | |
|---------------------------|--|---------------------|--|
| WEDNESDAY | | | |
| | Start | End | |
| | Start | End | |
| THURSDAY | | | |
| | Start | End | |
| | Start | End | |
| FRIDAY | | | |
| | Start 19:00 | End 02:00 | |
| | Start | End | |
| SATURDAY | | | _ |
| | Start 19:00 | End 02:00 | |
| | Start | End | |
| SUNDAY | | L | |
| 33142711 | Start | End |] |
| | Start | End | |
| Will the performance of | flive music take place indoors or out | | Where taking place in a building or other |
| Indoors | Outdoors | Both | structure tick as appropriate. Indoors may include a tent. |
| Give further details here | | | include a terri. |
| | e be authorised, if not already stated, a | and aive relevant t | further details for example (but not |
| | not music will be amplified or unam | | urther details, for example (but not |
| amplified | | | |
| | | | |
| | | | |
| State any seasonal varia | ations for the performance of live mu | sic | |
| For example (but not ex | cclusively) where the activity will occ | ur on additional da | ays during the summer months. |
| | | | |
| | | | |
| | | | |
| Non-standard timings. \ | Where the premises will be used for t | the performance o | f live music at different times from those listed |
| in the column on the le | ft, list below | | |
| For example (but not ex | cclusively), where you wish the activi | ty to go on longer | on a particular day e.g. Christmas Eve. |
| | | | |
| | | | |

| Continued from previous | page | | | |
|---------------------------|---|-------------------|----------|--|
| | . • | | | |
| Section 11 of 19 | | | | |
| PROVISION OF RECOR | DED MUSIC | | | |
| Will you be providing re | ecorded music? | | | |
| Yes | O No | | | |
| Standard Days And Ti | mings | | | |
| MONDAY | | | | Give timings in 24 hour clock. |
| | Start 11:00 | End | 00:00 | (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 11:00 | End | 00:00 | |
| | Start | End | | |
| WEDNESDAY | | | | |
| | Start 11:00 | End | 00:00 | |
| | Start | End | | |
| THURSDAY | | | | |
| monobiti | Start 11:00 | End | 01:00 | |
| | Start | End | 01.00 | |
| FDIDAV | Start | LIIG | | |
| FRIDAY | Start 11:00 | End | 02:30 | |
| | | | 02.30 |] |
| | Start | End | | |
| SATURDAY | | | | 1 |
| | Start 11:00 | End | 02:30 | |
| | Start | End | | |
| SUNDAY | | | | |
| | Start 11:00 | End | 02:30 | |
| | Start | End | | |
| Will the playing of reco | rded music take place in | doors or outdoors | or both? | Where taking place in a building or other structure tick as appropriate. Indoors may |
| Indoors | Outdoors | ○ Both | | include a tent. |
| Give further details her | e | | | |
| | be authorised, if not alronot music will be ampli | | | urther details, for example (but not |
| amplified | | | | |

| Continued from previous | page | |
|--|---------------------------------------|--|
| | | |
| | | |
| State any seasonal varia | ations for playing recorded music | |
| For example (but not e | xclusively) where the activity will o | occur on additional days during the summer months. |
| | | |
| | | |
| | | |
| Non-standard timings. in the column on the le | | for the playing of recorded music at different times from those listed |
| For example (but not e | xclusively), where you wish the ac | ctivity to go on longer on a particular day e.g. Christmas Eve. |
| bank holidays and Chri | istmas eve Christmas day till 2.30 | |
| | | |
| | | |
| Section 12 of 19 | | |
| PROVISION OF PERFO | RMANCES OF DANCE | |
| Will you be providing p | performances of dance? | |
| Yes | No | |
| Standard Days And Ti | mings | |
| MONDAY | | Give timings in 24 hour clock. |
| | Start 11:00 | End 00:00 (e.g., 16:00) and only give details for the day of the week when you intend the premises |
| | Start | End to be used for the activity. |
| TUESDAY | | |
| | Start 11:00 | End 00:00 |
| | Start | End |
| WEDNESDAY | | |
| | Start 11:00 | End 00:00 |
| | Start | End |
| THURSDAY | | |
| | Start 11:00 | End 01:00 |
| | Start | End |
| | | |

| Continued from previous page | | | |
|---|----------------------------------|---------------------|--|
| FRIDAY | | | |
| Start | 11:00 | End 02:30 | |
| Start | | End | |
| SATURDAY | | | |
| Start | 11:00 | End 02:30 |] |
| Start | | End | |
| | | LIIG | |
| SUNDAY | | [| 1 |
| Start | 11:00 | End 02:30 | |
| Start | | End | |
| Will the performance of dance | e take place indoors or outdoo | ors or both? | Where taking place in a building or other structure tick as appropriate. Indoors may |
| Indoors | Outdoors | Both | include a tent. |
| Give further details here | | | |
| State type of activity to be aut exclusively) whether or not mu | | | further details, for example (but not |
| | | | |
| | | | |
| | | | |
| Ctata annual annual annual attana 6 | | | |
| State any seasonal variations f | · | | |
| For example (but not exclusive | ely) where the activity will occ | cur on additional d | ays during the summer months. |
| | | | |
| | | | |
| | | | |
| Non-standard timings. Where the column on the left, list below | | the performance o | f dance at different times from those listed in |
| For example (but not exclusive | ely), where you wish the activ | ity to go on longer | on a particular day e.g. Christmas Eve. |
| bank holidays Christmas eve C | | <u> </u> | . , , , |
| , | , | | |
| | | | |
| Section 13 of 19 | | | |
| PROVISION OF ANYTHING SI | MILAR TO LIVE MUSIC, RECO | ORDED MUSIC OR | PERFORMANCES OF DANCE |
| Will you be providing anything performances of dance? | | | |
| ○ Yes | ○ No | | |
| Section 14 of 19 | | | |

| Continued from previous p | page | | |
|---|----------------------------|---------------------------|--|
| PROVISION OF LATE N | | | |
| Will you be providing la | ite night refreshment? | | |
| Yes | No | | |
| Standard Days And Ti | mings | | |
| MONDAY | | | Cive timings in 24 hour clock |
| | Start 23:00 | End 00:00 | |
| | Start | End | of the week when you intend the premises to be used for the activity. |
| TUESDAY | | | |
| TOESDITT | Start 23:00 | End 00:00 | <u> </u> |
| | | | |
| | Start | End | |
| WEDNESDAY | | | |
| | Start 23:00 | End 00:00 | 0 |
| | Start | End | |
| THURSDAY | | | |
| | Start 23:00 | End 01:00 |) |
| | Start | End | |
| FRIDAY | | | |
| | Start 23:00 | End 02:30 | 0 |
| | Start | End | |
| SATURDAY | | | |
| 3/110/10/11 | Start 23:00 | End 02:30 | <u> </u> |
| | | | |
| | Start | End | |
| SUNDAY | | | |
| | Start 23:00 | End 02:30 | 0 |
| | Start | End | |
| Will the provision of late both? | e night refreshment take | e place indoors or outdoo | ors or |
| Indoors | Outdoors | O Both | Where taking place in a building or other structure tick as appropriate. Indoors may include a tent. |
| Give further details here | Э | | |
| State type of activity to exclusively) whether or | | | evant further details, for example (but not |
| | | | |

| Continued from previous | nage | | | |
|---|-----------------------|--------------------------|---------------|---|
| Previous | <u> </u> | | | |
| | | | | |
| State any seasonal varia | ations | | | |
| For example (but not ex | kclusively) where the | activity will occur on a | additional da | ays during the summer months. |
| | | | | |
| | | | | |
| | | | | |
| Non-standard timings. column on the left, list l | | will be used for the su | pply of alcoh | ol at different times from those listed in the |
| For example (but not ex | kclusively), where yo | u wish the activity to g | on longer | on a particular day e.g. Christmas Eve. |
| bank holiday Christmas | eve and Christmas | day till 2.30 | | |
| | | | | |
| 0 11 15 110 | | | | |
| Section 15 of 19 SUPPLY OF ALCOHOL | | | | |
| | | | | |
| Will you be supplying a | | | | |
| Yes | O No | | | |
| Standard Days And Ti | mings | | | |
| MONDAY | | | | Give timings in 24 hour clock. |
| | Start 11:00 | End | 00:00 | (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 11:00 | End | 00:00 | |
| | Start | End | | |
| WEDNESDAY | | | | |
| | Start 11:00 | End | 00:00 | |
| | Start | End | | |
| THURSDAY | | | | |
| | Start 11:00 | End | 01:00 | |
| | Start | End | | |
| FRIDAY | | | | |
| | Start 11:00 | End | 02:30 | |
| | Start | End | | |

| Continued from previous page | | | | |
|--|--------------------------------|------------------------|-------------|---|
| SATURDAY | | | | |
| Start | 11:00 | End 0 |)2:30 | |
| Start | | End | | |
| SUNDAY | | | | |
| Start | 11:00 | End 0 | 02:30 | |
| | 11.00 | | 72.50 | |
| Start | | End _ | | If you wish people to be able to consume |
| Will the sale of alcohol be for o | · | | | alcohol on the premises, tick 'on the |
| On the premises | Off the premises | Both | | premises'. If you wish people to be able to purchase alcohol to consume away from the premises, tick 'off the premises'. If you wish people to be able to do both, tick 'both' |
| State any seasonal variations f | or the supply of alcohol | | | |
| For example (but not exclusive | ely) where the activity will o | ccur on ad | ditional da | ys during the summer months. |
| column on the left, list below | ely), where you wish the acti | | | ol at different times from those listed in the on a particular day e.g. Christmas Eve. |
| Section 16 of 19 | | | | |
| ADULT ENTERTAINMENT | | | | |
| Please highlight any adult enterpremises that may give rise to | | | her enterta | inment or matters ancillary to the use of the |
| | nildren, regardless of whethe | er you inte | nd childrer | to the use of the premises which may give n to have access to the premises, for example abling machines etc. |
| | | | | |
| Section 17 of 19 | | | | |
| HOURS PREMISES ARE OPEN | TO THE PUBLIC | | | |
| Standard Days And Timings | | | | |

| Continued from previous pag | e | | | |
|---|--------------------|--------------------------|----------------|---|
| MONDAY | | | | Give timings in 24 hour clock. |
| Sta | art 11:00 | End | 12:30 | (e.g., 16:00) and only give details for the days |
| Sta | art | End | | of the week when you intend the premises to be used for the activity. |
| TUESDAY | | | | |
| Sta | art 11:00 | End | 12:30 | |
| Sta | art | End | | |
| WEDNESDAY | | | | |
| Sta | art 11:00 | End | 12:30 | |
| Sta | art | End | | |
| THURSDAY | | | | |
| Sta | art 11:00 | End | 01:30 | |
| Sta | art | End | | |
| FRIDAY | | | | |
| Sta | art 11:00 | End | 03:00 | |
| Sta | art | End | | |
| SATURDAY | | | | |
| Sta | art 11:00 | End | 03:00 | |
| Sta | art | End | | |
| SUNDAY | | | | |
| | art 11:00 | End | 03:00 | |
| Sta | art | End | | |
| State any seasonal variation | | | | |
| • | | activity will occur on | additional da | ys during the summer months. |
| Tor example (surflet exercise | | don'ny wiii dodan dir | | Jo danning the sammer mentils. |
| | | | | |
| | | | | |
| | | | | |
| Non standard timings. Whe those listed in the column of | | | e open to the | members and guests at different times from |
| For example (but not exclusive | sively), where you | u wish the activity to g | go on longer (| on a particular day e.g. Christmas Eve. |
| bank holidays Christmas eve Christmas day till 3:00 | | | | |
| | | | | |
| | | | | |

| staff will be trained to be vigilant of antisocial behavior , under aged drinking and illegal drugs. CCTV will be provided at all times |
|---|
| b) The prevention of crime and disorder |
| SIA door supervisors shall be used when there is entertainment. Notices about criminal activity and CCTV in operation shall be placed in prominent positions |
| c) Public safety |
| CCTV shall be operating and staff will be trained to adhere to environmental health requirements. Adequate lighting shall be maintained at all times. |
| d) The prevention of public nuisance |
| The public will be asked to leave the premises with respect for the neighbors . CCTV will be in operation and SIA door supervisors when needed |
| e) The protection of children from harm |
| The staff will be trained to use challenge 25 and make sure if ID is required its is an approved ID with a picture. |
| 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. |
| This formality requires a fixed fee of £195 |
| 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. |

Continued from previous page...

a) General – all four licensing objectives (b,c,d,e)

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Describe the steps you intend to take to promote the four licensing objectives:

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

LICENSING OBJECTIVES

Section 18 of 19

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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 provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.
 - ☐ 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?"

| * Full name | Angel Bent |
|-------------|----------------|
| * Capacity | owner |
| * Date | 20 / 08 / 2018 |
| | dd 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...
- 2. Go back to https://www.gov.uk/apply-for-a-licence/premises-licence/wolverhampton/apply-2 to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.

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.

| OFFICE USE ONLY | |
|----------------------------|--|
| | |
| Applicant reference number | The Harp |
| 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 | |
| 1 2 3 4 | 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 Next > |

Consent of individual to being specified as premises supervisor

| [full name of prospective premises supervisor] |
|--|
| [full name of prospective premises supervisor] |
| of 123. Griffiths Drive |
| Ashmone Park |
| Wolverhampton |
| WV1125P. |
| [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 |
| Premises Licence |
| [type of application] |
| by |
| Managela Bent. |
| |
| relating to a premises licence [number of existing licence, if any] |
| for |
| <i>y</i> : |
| |
| |
| |
| The Harry |
| [name and address of premises to which the application relates] |

| and any premises licent | ce to be granted or varied in respect of this application made |
|-------------------------------|---|
| Angela Ba | ent. |
| [name of applicant] | |
| concerning the supply o | alcohol at |
| | |
| The Ha | rP. |
| Walsa | U Street |
| | rhampton |
| [name and address of premis | ses to which application relates] |
| | entitled to work in the United Kingdom and am applying for, currently hold a personal licence, details of which I set out |
| Personal licence numbe | r |
| [insert personal licence numb | 0 07773 er, if anyl |
| | |
| Personal licence issuing | |
| Wolver | nampton |
| [insert name and address and | telephone number of personal licence issuing authority, if any] |
| | |
| | |
| | |
| + | |
| 1 | |
| Signed | |
| | |
| | |
| Name (please print) | Angela Bent |
| | |
| Date | 21/8/18 |
| | |