



Wolverhampton City Council, Civic Centre, St Peter's Square, Wolverhampton, WV1 1DA

**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 Slater's Bars Ltd

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

Postal address of premises or, if none, ordnance survey map reference or description 41 Queen Square, Wolverhampton, WV1 1TX			
Post town	Wolverhampton	Postcode	WV1 1TX
Telephone number at premises (if any)			
Non-domestic rateable value of premises	£	28250	<i>checked DC</i>

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
- i. as a limited company please complete section (B)
- ii. as a partnership 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:

Please tick yes

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 type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
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 Slater's Bars Ltd
Address Southcroft, Wilmorehill Lane, Hopton ST18 0AW CHANDLER HOUSE, 7 FERRY ROAD, OFFICE PARK, RIVERSWAY, PRESTON, LANCASHIRE, PR2 2TH
Registered number (where applicable) 9677467
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company
Telephone number (if any) 01785257976
E-mail address (optional) vicki@slatersales.co.uk

Part 3 Operating Schedule

When do you want the premises licence to start?

01 08 2015

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)

The premises are a corner building that was a coffee shop. The premises are 4 storeys high, excluding a basement cellar. We will be looking to use the ground floor and first floor of the premises as a new style craft beer bar with seating area and the basement as storage and toilet facilities. The premises are aimed at persons who are passionate about great craft beer. We will be selling beer from hand pumps. There will be no mass produce ales served at the premises, but just unique ales sourced from independent/micro breweries.

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 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

- | Provision of regulated entertainment | Please tick any that apply |
|---|-------------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | x
<input type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | x
<input type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/> |

Provision of late night refreshment (if ticking yes, fill in box I)

Supply of alcohol (if ticking yes, fill in box J)

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)	Both	<input type="checkbox"/>
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)		
Wed					
Thur			<u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Fri					
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)	
Day	Start	Finish		
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)	
Tue				
Wed				<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 5)
Thur				
Fri				
Sat				
Sun				

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)		
Wed					
Thur			Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)		
Fri					
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)		Indoors <input checked="" type="checkbox"/>
					Outdoors <input type="checkbox"/>
					Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) We would be looking periodically to have live music for example but not limited to Open Mic events, beer festivals and other one off events		
Mon	19h00	23h00			
Tue	19h00	23h00			
Wed	19h00	23h00	State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur	19h00	23h00			
Fri	19h00	00h00	Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat	19h00	00h00			
Sun	19h00	22h00			

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) We would have recorded music playing during open hours but we would ensure this is turned down to a level that ensures it can only be heard inside the bar.		
Mon	11h00	23h00			
Tue	11h00	23h00	State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Wed	11h00	23h00			
Thur	11h00	23h00	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 (please read guidance note 5)		
Fri	11h00	00h00			
Sat	11h00	00h00			
Sun	12h00	22h00			

G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)			
Mon						
Tue						
			State any seasonal variations for the performance of dance (please read guidance note 4)			
Wed						
Thur						
			Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list (please read guidance note 5)			
Fri						
Sat						
Sun						

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 3)		

Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)			
Mon						
			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)			
Tue						
			<u>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</u> (please read guidance note 5)			
Wed						
Thur						
Fri						
Sat						
Sun						

J

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	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4) We would request that Christmas Eve the licence is to finish at 1am on Christmas Day and that we be allowed the 36hour extension over New Years Eve New Years Day. Bank Holiday weekends we would require an extension from 00h00 on the Saturday till 01h00		
Mon	11h00	23h00			
Tue	11h00	23h00			
Wed	11h00	23h00			
Thur	11h00	23h00			
Fri	11h00	00h00			
Sat	11h00	00h00			
Sun	11h00	22h00	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 5)		

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

Name Victoria Slater	
Address 14 Romney Drive, Stafford	
Postcode	ST16 1XD
Personal licence number (if known) 7103/070134	
Issuing licensing authority (if known) Stafford Borough 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 8).

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	11h00	23h30	<p>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 5)</p>
Tue	11h00	23h30	
Wed	11h00	23h30	
Thur	11h00	23h30	
Fri	11h00	00h30	
Sat	11h00	00h30	
Sun	11h00	22h30	

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 9)

Whilst this premises licence application falls within the Cumulative Impact Zone, by attaching the proposed conditions below, coupled with the vast experience the Applicant has in the Licensed trade the Applicant can satisfy the Licensing Authority that none of the licensing objectives will be undermined. Further it will not add to the current issues within the area. As set out early in this application this is a unique beer bar. The type of premises we intend to operate is modelled on 'The Brew Dog Bars' set up which operate successfully across the country in many cities.

TO PROMOTE ALL FOUR LICENSING OBJECTIVES WE WILL KEEP:

Strong management controls and effective training of all staff so that they are aware of the premises licence and the

requirements to meet the four licensing objectives with particular attention to:

a/ no selling of alcohol to underage people

b/ no drunk and disorderly behaviour on the premises area

c/ vigilance in preventing the use and sale of illegal drugs at the retail area

d/ no violent and anti-social behaviour

e/ no harm to children

Documented records of training completed shall be kept for each member of staff. Training shall be regularly refreshed and at no greater than 6 monthly intervals.

Designated premises supervisor confirmed it is obligated to be in day-to-day control of the premises, to provide good training for staff on the Licensing Act (Training Record), to make or authorise each sale

No drink promotions that encourages bulk buying or binge drinking

Red Care alarm system will be installed

As a licensed premises we know that it is necessary to carry out our functions or operate their businesses with a purpose of promoting these objectives. We promise to support these objectives through their operating schedules and other measures (including staff training and qualifications, policies, and strategic partnerships with other agencies). Prior to submitting this application we have consulted with Responsible Authorities and taken on board their views and applied them in this application.

b) The prevention of crime and disorder

- CCTV system

The premises shall install and maintain a comprehensive CCTV system. All public areas of the licensed premises including all public entry and exit points, enabling facial identification of every person entering in any light condition. The CCTV cameras shall continually record while the premises is open to the public and recording shall be kept available and unedited for a minimum of 31 day recording, playback, court quality with time and date stamp.

A clear and legible notice outside the premises indicating the normal hours under the terms of the premises licence during which licensable activities are permitted.

Clear and conspicuous notices warning of potential criminal activity, such as theft, that may target customers will be displayed.

Not selling of alcohol to drunk or intoxicated customers.

Custom will not be sought by means of personal solicitation outside or in the vicinity of the premises.

Prevention and vigilance in illegal drug use at the retail unit area.

Staff will be well trained in asking customers to use premises in an orderly and respectful manner.

The use of Door security will be used, for the first 2 weeks, this will be 7 days a week. Following this period SIA door staff will be used on Friday and Saturday evenings 20h00 until 00h30 Also SIA door staff will be used when Wolverhampton Wanderers are playing at home and during occasions when live music takes place. The SIA door staff will be smart and wearing High Vis jackets to ensure they can be identified. There will be a radio link at the premises for security. The DPS shall ensure that the provision of door staff at the premises is appropriate to ensure the safe control of the premises and shall review this on a regular basis. We shall ensure the DPS is present at all Pubwatch meetings and takes an active role in this group.



c) Public safety

Internal and external lighting fixed to promote the public safety objective.

Well trained staff adherence to environmental health requirements.

Training and implementation of underage ID checks.

A log book or recording system shall be kept upon the premises in which shall be entered particulars of inspections made; those required to be made by statute, and information compiled to comply with any public safety condition attached to the premises licence that requires the recording of such information.

The log book shall be kept available for inspection when required by persons authorised by the Licensing Act 2003 or associated legislation.

All parts of the premises and all fittings and apparatus therein, door fastenings and notices, lighting, heating, electrical, air condition, sanitary accommodation and other installations, will be maintained at all times in good order and in a safe condition.

d) The prevention of public nuisance

Noise reduction measures to address the public nuisance objective:

Prominent, clear and legible notices will be displayed at the exit requesting the public to respect the needs of nearby residents and to leave the premises and the area quietly.

No noise shall emanate from the premises nor vibration be transmitted through the structure of the

premises that gives rise to a nuisance.

Deliveries of goods necessary for the operation of the business will be carried out at such a time or in such a manner as to prevent nuisance and disturbance to nearby residents.

The Licensee will ensure that staff who arrive early morning or depart late at night (ex. for unpacking, pricing newly delivered goods) when the business has ceased trading conduct themselves in such a manner to avoid causing disturbance to nearby residents.

Customers will be asked not to stand around loudly talking in the street outside the premises.

Customers will not be admitted to premises above opening hours.

The movement of bins and rubbish outside the premises will be kept to a minimum after 11.00pm. This will help to reduce the levels of noise produced by the premises.

Any lighting on or outside the premises will be positioned and screened in such a way so as to not cause a disturbance to nearby residents.

No drinks will be permitted to be taken outside

e) The protection of children from harm

The Challenge 25 scheme must be operated to ensure that any person who appears to be under the age of 25 shall provide documented proof that he/she is over 18 years of age. Proof of age shall only comprise a passport, photo card driving licence, an HM Forces warrant card, or a card bearing the PASS hologram.

"Challenge 25" sign which is a retailing strategy that encourages anyone who is over 18 but looks under 25 to carry acceptable ID (a card bearing the PASS hologram, a photographic driving license or a passport) if they wish to buy alcohol.

Well trained staff about requirement for persons' identification, age establishment etc.

All the details provided in Training Record Book available the retail unit.

Log Book will be kept upon the premises all the time.

Nothing beyond existing Health & Safety requirements

A log shall be kept at the premises to record all refused sales of alcohol for the reasons that the person(s) is/are, or appear(s) to be, under 18 years of age. The log shall record the date and time of the refusal and the name of the member of staff who refused the sale. The log will be available on request by the police or an authorised officer of Wolverhampton City Council.

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.

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.

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 11). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	
Capacity	

For joint applications, signature of 2nd applicant or 2nd applicant’s solicitor or other authorised agent (please read guidance note 12). 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 (please read guidance note 13)

Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

Notes for Guidance

- 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.

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Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 11).
If signing on behalf of the applicant, please state in what capacity.

Signature	[Redacted]
Date	08/07/15
Capacity	Director

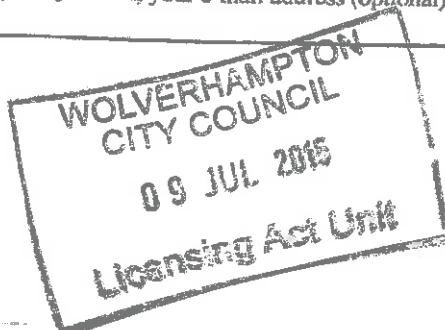
For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

Post town	Postcode
Telephone number (if any)	
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)	

Notes for Guidance



Consent of individual to being specified as premises supervisor

Victoria Slater

of

14 Romney Drive,
Stafford
ST16 1XD

[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

by

Slater's Bars Ltd

relating to a premises licence

[number of existing licence, if any]

for

41 Queen Square
Wolverhampton
WV1 1TX

[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

Slater's Bars Ltd

[name of applicant]

concerning the supply of alcohol at

41 Queen Square,
Wolverhampton
WV1 1TX



[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

7103/070134

[insert personal licence number, if any]

Personal licence issuing authority

Stafford Borough Council, Civic Centre, Riverside, Stafford, ST16 3DQ,
01785619745

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed

Name (please print)

Victoria Slater

Date

25/6/14

