

## **REPORT OF THE DEPUTY CHIEF EXECUTIVE**

### **LICENSING SUB-COMMITTEE – 22 APRIL 2013**

#### **LICENSING ACT 2003 – CONSIDERATION OF THE GRANT OF A PREMISES LICENCE**

##### **LONDIS, 2 THE GREEN, SOUTHWICK, SUNDERLAND**

##### **3F Leisure Ltd.**

### **1.0 PURPOSE OF REPORT**

- 1.1 To consider an application for the grant of a premises licence for the above-mentioned premises.

### **2.0 DESCRIPTION OF DECISION**

- 2.1 When determining the application the Sub-Committee is requested to have regard to the representations referred to in paragraph 4.0 below and to take such steps as they consider appropriate for the promotion of the licensing objectives. The steps may be: -

- a) to grant the application,
- b) to modify the conditions of the licence, or
- c) to reject the whole or part of the application.

### **3.0 INTRODUCTION/BACKGROUND**

- 3.1 Relevant representations have been received in relation to the application and these are detailed at section 4.0.
- 3.2 A copy of the application form is attached as Appendix 1. The licensable activity requested is sale by retail of alcohol for consumption off the premises. The requested hours for the sale of alcohol are every day from 08:00 to 22:00.

### **4.0 CURRENT POSITION**

- 4.1 Representations have been received from two people in relation to this application. Copies of these representations are attached as Appendix 2.

### **5.0 REASONS FOR THE DECISION**

- 5.1 To determine the application as requested by section 18(3) of the Licensing Act 2003.

## **6.0 ALTERNATIVE OPTIONS**

6.1 None submitted.

## **7.0 RELEVANT CONSIDERATIONS/CONSULTATIONS**

7.1 There are no other considerations that require the attention of the Sub-Committee.

## **8.0 GLOSSARY**

8.1 No acronyms or abbreviations have been used in this report.

## **9.0 LIST OF APPENDICES**

Appendix 1 – Application form.  
Appendix 2 – Representations.

## **10.0 BACKGROUND PAPERS**

10.1 None.

# Appendix 1

\* required information

**Section 1 of 19**

You can save the form at any time and resume it later. You do not need to be logged in when you resume.

System reference  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 on behalf of the applicant?

☐ Yes ☒ 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

\* Family name

\* E-mail

Main telephone number

Include country code.

Other telephone number

☐ Indicate here if you would prefer not to be contacted by telephone

Are you:

☒ Applying as a business or organisation, including as a sole trader  
☐ Applying as an individual

A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.

**Applicant Business**

\* Is your business registered in the UK with Companies House? ☒ Yes ☐ No

\* Registration number

\* Business name

If your business is registered, use its registered name.

\* VAT number

Put "none" if you are not registered for VAT.

\* Legal status

Continued from previous page...

\* Your position in the business

Home country

The country where the headquarters of your business is located.

**Registered Address**

Address registered with Companies House.

\* Building number or name

\* Street

District

\* City or town

County or administrative area

\* Postcode

\* Country

**Section 2 of 19**

**PREMISES DETAILS**

I/we, as named in section 1, apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in section 2 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.

**Premises Address**

Are you able to provide a postal address, OS map reference or description of the premises?

☒ Address ☐ OS map reference ☐ Description

**Postal Address Of Premises**

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

**Further Details**

Telephone number

Non-domestic rateable value of premises (£)

**Section 3 of 19****APPLICATION DETAILS**

In what capacity are you applying for the premises licence?

- ☐ An individual or individuals
- ☒ A limited company
- ☐ A partnership
- ☐ An unincorporated association
- ☐ A recognised club
- ☐ A charity
- ☐ The proprietor of an educational establishment
- ☐ A health service body
- ☐ A person who is registered under part 2 of the Care Standards Act 2000 (c14) in respect of 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 4 of 19****NON INDIVIDUAL APPLICANTS**

Provide name and registered address of applicant in full. Where appropriate give any registered number. In the case of a partnership or other joint venture (other than a body corporate), give the name and address of each party concerned.

**Non Individual Applicant's Name**

Name

**Details**

Registered number (where applicable)

Description of applicant (for example partnership, company, unincorporated association etc)

Continued from previous page...

PRIVATE LIMITED COMPANY

**Address**

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

**Contact Details**

E-mail

Telephone number

Other telephone number

Add another applicant

**Section 5 of 19**

**OPERATING SCHEDULE**

When do you want the premises licence to start?  /  /   
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 of 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.

THIS FORMER PUBLIC HOUSE IS A NOW A MODERN RECTANGULAR RETAIL PREMISES, WHICH WILL BE FITTED OUT WITH SHELVING AND REFRIGERATION TO FORM A NEW MODERN CONVENIENCE STORE. THE ALCOHOL SECTION WILL BE IN A SECTION FURTHEST AWAY FROM THE DOOR, BUT STILL IN THE EYELINE OF THE SUPERVISOR WORKING AT THE TILLPOINT. IT HAS MODERN SHUTTERS AND SHOPFRONTS AND SOLID STEEL DOORS AT THE REAR, AND HAS ITS OWN SERVICE YARD. THE FIRST FLOOR IS COMPLETELY SEPARATE FROM THE GROUND FLOOR NOW, AS IT COMPRISES OF SELF CONTAINED FLATS.

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

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**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 SPORTING EVENTS**

Will you be providing indoor sporting events?

☐ Yes ☒ No

**Section 9 of 19**

**PROVISION OF BOXING OR WRESTLING ENTERTAINMENTS**

Will you be providing boxing or wrestling entertainments?

☐ Yes ☒ No

**Section 10 of 19**

**PROVISION OF LIVE MUSIC**

Will you be providing live music?

☐ Yes ☒ No

**Section 11 of 19**

**PROVISION OF RECORDED MUSIC**

Will you be providing recorded music?

☐ Yes ☒ No

**Section 12 of 19**

**PROVISION OF PERFORMANCES OF DANCE**

Will you be providing performances of dance?

☐ Yes ☒ No

**Section 13 of 19**

**PROVISION OF ANYTHING OF A SIMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF DANCE**

Will you be providing anything similar to live music, recorded music or performances of dance?

☐ Yes ☒ No



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**LATE NIGHT REFRESHMENT**

Will you be providing late night refreshment?

☐ Yes

☒ No

**Section 15 of 19**

**SUPPLY OF ALCOHOL**

Will you be selling or supplying alcohol?

☒ Yes

☐ No

**Standard Days And Timings**

MONDAY

Start

End

Start

End

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  
to be used for the activity.

TUESDAY

Start

End

Start

End

WEDNESDAY

Start

End

Start

End

THURSDAY

Start

End

Start

End

FRIDAY

Start

End

Start

End

SATURDAY

Start

End

Start

End

SUNDAY

Start

End

Start

End

*Continued from previous page...*

Will the sale of alcohol be for consumption:

☐ On the premises ☒ Off the premises ☐ Both

If the sale of alcohol is for consumption on the premises select on, if the sale of alcohol is for consumption away from the premises select off. If the sale of alcohol is for consumption on the premises and away from the premises select both.

State any seasonal variations

For example (but not exclusively) where the activity will occur on additional days during the summer months.

NONE

Non-standard timings. Where the premises will be used for the supply of alcohol at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

NONE

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

**Name**

First name

CHRISTOPHER

Family name

SMITH

**Enter the contact's address**

Building number or name

1

Street

THE GREEN

District

NEWCASTLE

City or town

NEWCASTLE UPON TYNE

County or administrative area

TYNE AND WARDLE

Postcode

NE1 1AB

Country

United Kingdom

Personal Licence number  
(if known)

123456789

Issuing licensing authority  
(if known)

NEWCASTLE UPON TYNE CITY COUNCIL

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#### PROPOSED DESIGNATED PREMISES SUPERVISOR CONSENT

How will the consent form of the proposed designated premises supervisor be supplied to the authority?

- ☐ Electronically, by the proposed designated premises supervisor
- ☒ As an attachment to this application

Reference number for consent form (if known)

If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.

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##### ADULT ENTERTAINMENT

Highlight any adult entertainment or services, activities, or other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children

Give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups etc gambling machines etc.

NONE

#### Section 17 of 19

##### HOURS PREMISES ARE OPEN TO THE PUBLIC

###### Standard Days And Timings

###### MONDAY

Start 08:00

End 22:00

Start

End

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 to be used for the activity.

###### TUESDAY

Start 08:00

End 22:00

Start

End

###### WEDNESDAY

Start 08:00

End

Start

End

###### THURSDAY

Start 08:00

End 22:00

Start

End

###### FRIDAY

Start 08:00

End 22:00

Start

End

Continued from previous page...

SATURDAY

Start 08:00

End 22:00

Start

End

SUNDAY

Start 08:00

End 22:00

Start

End

State any seasonal variations

For example (but not exclusively) where the activity will occur on additional days during the summer months.

NONE

Non standard timings. Where you intend to use the premises to be open to the members and guests at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

NONE

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#### LICENSING OBJECTIVES

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

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

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

ALL STAFF WILL BE TRAINED TO UNDERSTAND THE NEED TO PROMOTE THE 4 LICENSING OBJECTIVES, TO THE EXTENT THAT IT WILL BE THEIR RESPONSIBILITY TO DO THIS AS PART OF THEIR EMPLOYMENT. ANY FAILURES WILL RESULT IN POTENTIAL JOB LOSSES. SIGNS WILL BE IN PLACE AROUND THE STORE AND ON THE WINDOWS TO NOTIFY THE PUBLIC OF OUR INTENTION TO ADHERE TO THE 4 LICENSING OBJECTIVES, AND THEY WILL NOT BE ALLOWED TO ENTER THE PREMISES IF THEY DO NOT FOLLOW THE OBJECTIVES. HIGH QUALITY MODERN CCTV AND ALARMS SYSTEMS WILL BE USED ON THE PREMISES, WITH THE CCTV BEING AVAILABLE TO THE AUTHORITIES AT ALL TIMES.

b) The prevention of crime and disorder

STAFF WILL BE TRAINED TO PREVENT CRIME AND DISORDER. ZERO TOLERANCE WILL BE APPLIED TO ANY PERSON COMMITTING OR ATTEMPTING TO COMMIT CRIME AND DISORDER, WHICH WILL MEAN THAT THE POLICE WILL BE INFORMED AND CHARGES WILL BE BROUGHT TO THE FULLEST EXTENT. CCTV WILL BE USED TO MAKE SURE THESE PEOPLE ARE IDENTIFIED. SIGNS WILL BE POSTED FOR THE PUBLIC TO BE AWARE OF THIS POLICY.

c) Public safety

STAFF WILL BE TRAINED TO MAKE PUBLIC SAFETY THEIR TOP PRIORITY. ANY PERSON BELIEVED TO BE AT RISK WILL BE HELPED AND THE RELEVANT AUTHORITIES WILL BE CONTACTED IMMEDIATELY. STAFF WILL BE TRAINED TO BE PROTECTIVE OF THE PUBLIC AT LARGE, WHETHER IN THE PREMISES OR OUT ON THE STREET. THE LAYOUT OF THE PREMISES WILL BE A

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SAFE ENVIRONMENT FOR THE PUBLIC. CCTV WILL BE USED TO HELP THE AUTHORITIES PROMOTE PUBLIC SAFETY. SIGNS WILL BE POSTED FOR THE PUBLIC TO BE AWARE OF THIS POLICY.

d) The prevention of public nuisance

STAFF WILL BE TRAINED TO NOTICE WHEN PUBLIC NUISANCE IS OCCURRING OR WHEN IT IS LIKELY AND TRY TO PREVENT IT. GROUPS OF PEOPLE WILL NOT BE ALLOWED TO CONGREGATE INSIDE OR OUTSIDE THE PREMISES FOR AN EXTENDED PERIOD OF TIME, AS THIS WILL CAUSE A PUBLIC NUISANCE. ANY PERSON DEEMED TO BE UNDER THE INFLUENCE OF DRUGS AND ALCOHOL WILL NOT BE SERVED BY ANY MEMBER OF STAFF, AS THIS MAY CAUSE A NUISANCE TO THE PUBLIC. PEOPLE CAUSING A NUISANCE WILL BE REPORTED TO THE POLICE. SIGNS WILL BE POSTED FOR THE PUBLIC TO BE AWARE OF THIS POLICY.

e) The protection of children from harm

STAFF WILL BE TRAINED TO PROTECT CHILDREN AND NOTICE THE POTENTIAL HARM TO CHILDREN AT ALL TIMES. STAFF WILL BE TRAINED TO MAKE SURE THAT ANY ALCOHOL SOLD, IS NOT MEANT FOR ANY CHILDREN. WE WILL OPERATE AN CHALLENGE 25 ID POLICY, AND MAKE SURE THAT ANY ADULT WHO PURCHASES ALCOHOL IS NOT DOING SO FOR CHILDREN. IF ANYONE IS CAUGHT DOING THIS, THEN THE POLICE WILL BE INFORMED AND THAT PERSON WILL BE PREVENTED FROM ENTERING THE PREMISES IN THE FUTURE. ANY CHILDREN PESTERING CUSTOMERS TO BUY THEM ALCOHOL WILL BE ASKED TO LEAVE THE AREA, AND IF THEY REFUSE THE POLICE WILL BE CALLED. ANY CHILD THAT SEEMS IN DISTRESS WILL BE NOTED AND THE RELEVANT AUTHORITIES WILL BE CALLED. CCTV WILL BE USED TO HELP THE AUTHORITIES PROMOTE THE PROTECTION OF CHILDREN. SIGNS WILL BE POSTED FOR THE PUBLIC TO BE AWARE OF THIS 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.

To calculate the application fees please visit the VOA Business Rates Website (link available on our website) to obtain the rateable value for your premises. Once you have obtained the rateable value you can then access our website and click on the fees document to ascertain the correct amount.

\* Fee amount (£)

100.00

**ATTACHMENTS**

**AUTHORITY POSTAL ADDRESS**

**Address**

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

**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?"

*Continued from previous page...*

\* Full name

\* Capacity

Date (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 to file/save as...
2. Go back to <https://www.gov.uk/apply-for-a-licence/premises-licence/sunderland/apply-1> to upload this file and continue with your application

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

# Appendix 2

To Whom it concern

We would like to tell you why we object to another Off licence opening on Southwick Road.

We live in [REDACTED] we already have one Off licence on the corner of our street with white vans unloading during the night.

If this goes ahead it will mean we will have vans and cars at the back and front.

We think there is enough licence shops on the Green which encourage more drinkers and gangs of youths.

In this small area there is six shops selling alcohol which is not a good sign for the future

RECEIVED

20 MAR 2013



Representation - object.

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
To whom it may concern,

As a resident of [REDACTED] my husband and I are not happy that another shop is asking to obtain a licence to sell alcohol.

In our view there are enough shops already on the green selling drinks.

[REDACTED]  
RECEIVED

70 MAR 2010

