

# Appendix 1 – Copy of application

## 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 The Corkscrew Wine and Cheese Company Ltd

*(Insert name(s) of applicant)*

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			
The Corkscrew Wine Bar 57a Victoria Road West Cleveleys			
Post town	Lancashire	Postcode	FY5 1AJ
Telephone number at premises (if any)			
Non-domestic rateable value of premises		£14,500	

#### 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/limited liability partnership  please complete section (B)
  - ii as a partnership (other than limited liability)  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 (by ticking yes to one box below):

- 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)
<b>Surname</b>		<b>First names</b>		
<b>Date of birth</b>		I am 18 years old or over <input type="checkbox"/> Please tick yes		
<b>Nationality</b>				
Current residential address if different from premises address				
Post town		Postcode		
<b>Daytime contact telephone number</b>				
<b>E-mail address (optional)</b>				
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 15 for information)				

**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)	
<b>Surname</b>			<b>First names</b>		
<b>Date of birth</b>			I am 18 years old or over <input type="checkbox"/> Please tick yes		
<b>Nationality</b>					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service: (please see note 15 for information)					
Current residential address if different from premises address					
Post town				Postcode	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**(B) OTHER APPLICANTS**

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

Name	The Corkscrew Wine and Cheese company Ltd
Address	55 Victoria Road West Thornton-Cleveleys FY5 1AJ
Registered number (where applicable)	15135133
Description of applicant (for example, partnership, company, unincorporated association etc.)	Private Limited Company

Telephone number (if any)
E-mail address (optional)

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD	MM	YYYY
A	S	A P

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)

We would like to open a wine and Cheese bar. There would be background music which would only be at a level where customers would be able to talk without music being overpowering.

We would also be serving a selection of whiskeys and two draft beers and one draft cider.

All food would be served cold ie a variety of different cheese and cured meats from around the world. Day time we would be serving teas and coffees. Within premises in the day we would also be a retail premises selling bottles of wines from around the world . We are hoping to have around 200 different varieties of wines to sell with a large selection of cheeses, chutneys and cured meats

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 and Schedules 1 and 2 to the Licensing Act 2003)

- | Provision of regulated entertainment (please read guidance note 2)  | Please tick all 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)   | <input type="checkbox"/>   |
| f) recorded music (if ticking yes, fill in box F)   | <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**

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**A**

Plays Standard days and timings (please read guidance note 7)			Will the performance of a play take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 4)	Both	<input type="checkbox"/>
Tue					
Wed			<b>State any seasonal variations for performing plays</b> (please read guidance note 5)		
Thur					
Fri			<b>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</b> (please read guidance note 6)		
Sat					
Sun					

**B**

<b>Films</b> Standard days and timings (please read guidance note 7)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 4)		
Tue					
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 5)		
Thur					
Fri			<b>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</b> (please read guidance note 6)		
Sat					
Sun					

**C**

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			<b>State any seasonal variations for indoor sporting events</b> (please read guidance note 5)
Wed			
Thur			<b>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</b> (please read guidance note 6)
Fri			
Sat			
Sun			



**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 7)			<b>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 4)		
Tue					
Wed			<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 5)		
Thur					
Fri			<b>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</b> (please read guidance note 6)		
Sat					
Sun					

E

<b>Live music</b> Standard days and timings (please read guidance note 7)			<b>Will the performance of live music take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	
			Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Day	Start	Finish		
Mon			<b>Please give further details here</b> (please read guidance note 4)	
Tue				
Wed			<b>State any seasonal variations for the performance of live music</b> (please read guidance note 5)	
Thur				
Fri			<b>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</b> (please read guidance note 6)	
Sat				
Sun				

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 7)			<b>Will the playing of recorded music take place indoors or outdoors or both – please tick</b> (please read guidance note 3)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish				
Mon			<b>Please give further details here</b> (please read guidance note 4)			
Tue			<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 5)			
Wed			<b>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</b> (please read guidance note 6)			
Thur						
Fri						
Sat						
Sun						

**G**

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 4)	Both	<input type="checkbox"/>
Tue					
Wed			<b>State any seasonal variations for the performance of dance</b> (please read guidance note 5)		
Thur					
Fri			<b>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</b> (please read guidance note 6)		
Sat					
Sun					

**H**

<p><b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 7)</p>			<p>Please give a description of the type of entertainment you will be providing</p>		
Day	Start	Finish	<p><b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><b><u>Please give further details here</u></b> (please read guidance note 4)</p>		
Wed					
Thur			<p><b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 5)</p>		
Fri					
Sat			<p><b><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></b> (please read guidance note 6)</p>		
Sun					



**I**

<b>Late night refreshment</b> Standard days and timings (please read guidance note 7)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<b>Please give further details here</b> (please read guidance note 4)		
Tue					
Wed			<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 5)		
Thur					
Fri			<b>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</b> (please read guidance note 6)		
Sat					
Sun					

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 8)	On the premises	<input type="checkbox"/>			
				Off the premises	<input type="checkbox"/>			
				Both	<input checked="" type="checkbox"/>			
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)					
Mon	09:00	23:00						
Tue	09:00	23:00						
Wed	09:00	23:00						
Thur	09:00	23:00						
Fri	09:00	23:00						
Sat	09:00	23:00						
Sun	09:00	23:00						
						<b>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</b> (please read guidance note 6)		
						New Years Eve 09:00 to 01:00		

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

<b>Name</b> Jason Dunning	
<b>Date of birth</b> 	
<b>Address</b> 	
<b>Postcode</b>	FY5 1NL
<b>Personal licence number (if known)</b> PA1200	
<b>Issuing licensing authority (if known)</b> Burnley 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 9).

**L**

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 7)			<b>State any seasonal variations</b> (please read guidance note 5)
Day	Start	Finish	
Mon	09:00		
		23:30	
Tue	09:00		
		23:30	
Wed	09:00		
		23:30	
Thur	09:00		
		23:30	
Fri	09:00		
		23:30	
Sat	09:00		
		23:30	
Sun	09:00		
		23:30	

**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 6)

New Years Eve 09:00 to 01:30



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## 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 10)**

All staff shall be suitably trained for their job function for the premises. The training shall be written into a programme ongoing and under constant review and shall be made available to a relevant responsible authority when called upon.

**b) The prevention of crime and disorder**

A CCTV system shall be installed to cover all entry and exit points enabling frontal identification of every person entering in any light condition.

The CCTV system shall continually record whilst the premises is open for licensable activities. It shall operate during all times when customers remain on the premises.

All recordings shall be stored for a minimum period of 31 days with correct date and time stamping and shall be made available immediately upon the request of Police or an authorised officer of the council throughout the preceding 31 day period.

The CCTV system shall be updated and maintained according to police recommendations.

A staff member from the premises who is conversant with the operation of the CCTV system, shall be on the premises at all times when the premises are open to the public. This staff member must be able to show a Police or authorised council officer recent data or footage with the absolute minimum of delay when requested.

CCTV shall be downloaded on request by the Police or authorised officer of the council.

Appropriate signage advising customers of CCTV being in operation, shall be prominently displayed in the premises.

A documented check of the CCTV shall be completed weekly to ensure all cameras remain operational and the 31 days storage for recordings is being maintained.

A premises daily register shall be kept at the premises. This register shall be maintained and kept for a rolling period of 12 months.

The register shall record all incidents which may have occurred which are relevant to the supply of alcohol and the promotion of the licensing objectives. Such incidents shall include, but not be limited to, complaints made to the premises alleging nuisance or anti-social behaviour by persons attending or leaving the premises and all refusals to sell alcohol.

The register shall be readily available for inspection by an authorised person upon reasonable request.

Super-strength lagers, beers and/or ciders, i.e. those with an ABV of 6.5% or higher, shall not be sold at the premises.

**c) Public safety**

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All exit routes and public areas shall be kept unobstructed, shall have non-slippery and even surfaces, shall be free of trip hazards and shall be clearly signed.

The premises licence holder shall ensure that a suitable fire risk assessment and emergency plan is in place at all times.

Regular checks and maintenance shall be carried out on all equipment, electrical installations, emergency lighting and fire alarms and equipment to ensure their continued safe operation. A written record of these checks shall be kept and made available to an authorised officer of the licensing authority.

Empty glasses and bottles shall be removed from public areas quickly and efficiently.

An adequate and appropriate supply of first aid equipment and materials shall be available on the premises.

**d) The prevention of public nuisance**

Arrangements shall be put in place to ensure that waste collection contractors do not collect refuse between 19:00 and 07:00.

No person shall be allowed to leave the licensed area whilst in the possession of any open drinking vessel or open glass bottle, whether empty or containing any beverage.

The premises licence holder shall ensure that any patrons drinking and/or smoking outside the premises do so in an orderly manner and ensure that there is no public nuisance.

Signage requesting customers to be respectful of others when entering or leaving the premises shall be installed in a prominent position by the premises' exit.

**e) The protection of children from harm**

The Licensee to adopt a "Challenge 25" policy where all customers who appear to be under the age of 25 and attempt to purchase alcohol or other age-restricted products are asked for proof of their age. The Licensee to prominently display notices advising customers of the "Challenge 25" policy. The following proofs of age are the only ones to be accepted:

- Proof of age cards bearing the "Pass" hologram symbol
- UK Photo Driving licence
- Passport
- A Military ID Card

Notices advertising that the premises operates a "Challenge 25" scheme shall be displayed in a clear and prominent position at the premises entrance.

All occasions when persons have been refused service shall be recorded in the premises daily register.

The register will contain details of time and date, description of the attempting purchaser, description of the age restricted products they attempted to purchase, reason why the sale was refused and the name/signature of the salesperson refusing the sale.

Documented delegation of authorisations to sell alcohol shall be maintained at the premises and shall be available on request by an authorised officer of the Licensing Authority or a constable.

A prominent clear notice shall be displayed at the point of entry to the premises advising customers that they may be asked to produce evidence of their age if seeking to purchase alcohol.

**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.
- [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15).

**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.**

**IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.**

**Part 4 – Signatures** (please read guidance note 11)

**Signature of applicant or applicant's solicitor or other duly authorised agent** (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

<b>Declaration</b>	<ul style="list-style-type: none"><li>• [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the</li></ul>
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	<p>entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15).</p> <ul style="list-style-type: none"> <li>The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)</li> </ul>
Signature	<i>Ian Crockard</i>
Date	10/10/2023
Capacity	Duly Authorised Agent

**For joint applications, signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent (please read guidance note 13). 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 14)			
Innpacked Ltd Suite F8 10 Whittle Road Ferndown Industrial Estate			
Post town	<b>Wimborne</b>	Postcode	<b>BH21 7RU</b>
Telephone number (if any)	01202 890030		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) PREMISESLICENCE@INNPACKED.COM			



**Consent of individual to being specified as premises supervisor**

I, Jason Dunning

of [REDACTED]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for a premises licence made by

The Corkscrew Wine and Cheese company Ltd

relating to a premises licence for

The Corkscrew Wine Bar, 57a Victoria Road West, Cleveleys, FY5 1AJ

and any premises licence to be granted or varied in respect of this application made by

The Corkscrew Wine and Cheese company Ltd

concerning the supply of alcohol at

The Corkscrew Wine Bar, 57a Victoria Road West, Cleveleys, FY5 1AJ

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below

Personal licence number PA1200

Personal licence issuing authority Burnley Borough Council

Signed [REDACTED]

Print name Jason Dunning

Date

25/9/23

Date of birth [REDACTED]

Place of birth [REDACTED]

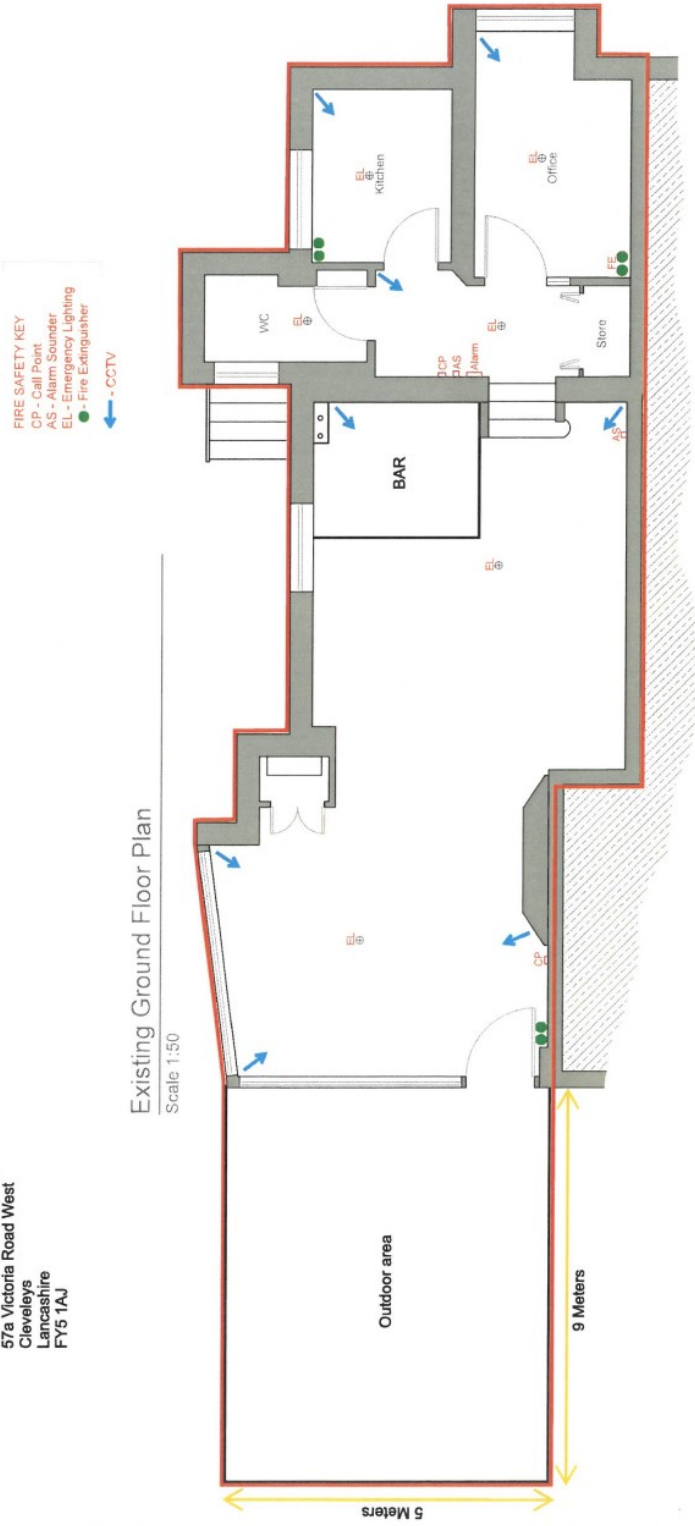
Nationality British

Mobile no. [REDACTED]

The Corkscrew Wine Bar  
57a Victoria Road West  
Cleveleys  
Lancashire  
FY5 1AJ

### Existing Ground Floor Plan

Scale 1:50



Site Notices



# Newspaper Notice in Blackpool Gazette 19<sup>th</sup> October 2023

## PUBLIC NOTICES

### LICENCE APPLICATIONS

#### **NOTICE OF APPLICATION FOR A PREMISES LICENCE UNDER SECTION 17 OF THE LICENSING ACT 2003**

Notice is hereby given that The Corkscrew Wine and Cheese company ltd has applied to Wyre Council for a premises licence in relation to The Corkscrew Wine Bar, 57a Victoria Road, Cleveleys, FY5 1AJ to permit the provision of the following licensable activities: Retail Sale of alcohol for consumption on and off the premises Monday to Sunday 09:00hrs to 23:00hrs. Full details of the application can be inspected at the address noted below during normal business hours. Any person wishing to make representations to this application may do so by writing to the Licensing Section, Wyre Council, Civic Centre, Breck Road, Poulton-le-Fylde, FY6 7PU no later than 28 days after the date of this notice (as below) or email [licensing@wyre.gov.uk](mailto:licensing@wyre.gov.uk) Representations received after this date will not be considered. A copy of the application can be viewed at the licensing authority's address during normal office hours. Such written representation must be received by 08/11/2023 clearly stating the grounds upon which the representation is made in relation to the four objectives of the Licensing Act 2003. It is an offence to knowingly or recklessly make a false statement in connection with an application. The maximum fine for which a person is liable on summary conviction for the offence is unlimited

**Innpacked Ltd.,**

10 Whittle Road, Ferndown Ind Est, Wimborne, Dorset.  
[www.innpacked.com](http://www.innpacked.com)



NOTICE OF APPLICATION FOR A PREMISES LICENCE  
UNDER SECTION 17 OF THE LICENSING ACT 2003

Notice is hereby given that The Corkscrew Wine and Cheese company Ltd has applied to Wyrre Council for a premises licence in relation to The Corkscrew Wine Bar, 57a Victoria Road, Cleveleys, FY5 1AJ to permit the provision of the following licensable activities: Retail Sale of alcohol for consumption on and off the premises Monday to Sunday 09.00hrs to 23.00hrs. Full details of the application can be inspected at the address noted below during normal business hours. Any person wishing to make representations to this application may do so by writing to the Licensing Section, Wyrre Council, Civic Centre, Breck Road, Poulton-le-Fyde, FY6 7PU no later than 28 days after the date of this notice (as below) or after this date will not be considered. A copy of the application can be viewed at the licensing authority's address during normal office hours. Such written representation must be received by 08/11/2023 clearly stating the grounds upon which the representation is made in relation to the four objectives of the Licensing Act 2003. It is an offence to knowingly or recklessly make a false statement in connection with an application. The maximum fine for which a person is liable on summary conviction for the offence is unlimited.

Wyrre Council Ltd, 10 White Road, Poulton-le-Fyde, Wyrre, FY6 7PU. www.wyrrecouncil.com