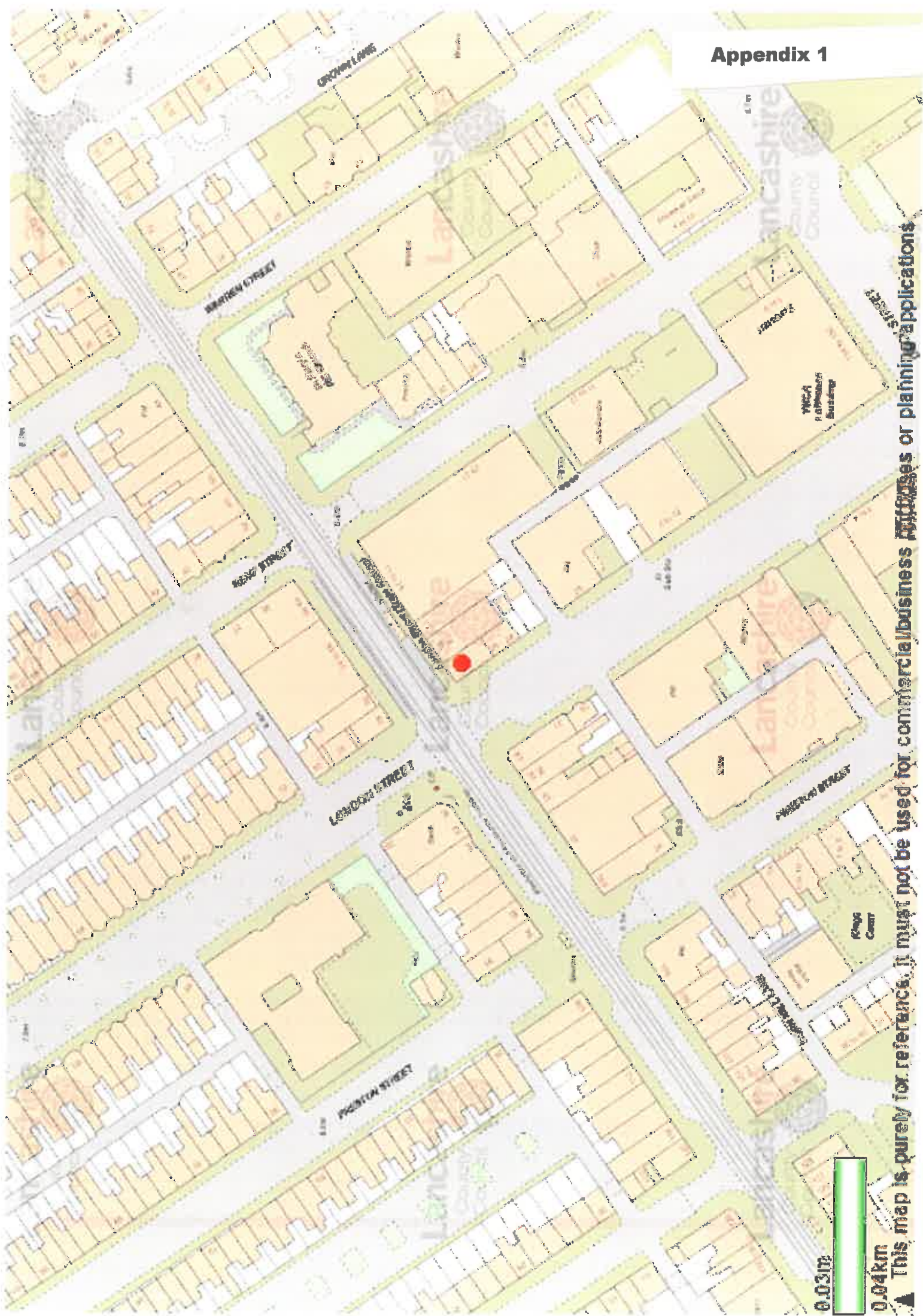


## Appendix 1



This map is purely for reference. It must not be used for commercial/business purposes or planning applications.

## 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 Quick Serv Limited

*(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 |           |          |         |
| Subway<br>83 Lord Street<br>Fleetwood<br>Lancashire                                  |           |          |         |
| Post town  | Fleetwood | Postcode | FY7 6DS |

|   |         |
|---|---------|
| Telephone number at premises (if any)   |         |
| Non-domestic rateable value of premises | £11,000 |

### Part 2 - Applicant details

Please state whether you are applying for a premises licence as appropriate

Please tick as

- |  |   |
|--|---|
| a) an individual or individuals *                    | <input type="checkbox"/> please complete section (A)            |
| b) a person other than an individual *               |   |
| i as a limited company/limited liability partnership | <input checked="" type="checkbox"/> please complete section (B) |
| ii as a partnership (other than limited liability)   | <input type="checkbox"/> 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) |  |
| Surname  |                              |                               | First names  |                                |  |
| Date of birth  |                              |                               | I am 18 years old or over <input type="checkbox"/> Please tick yes |                                |  |
| Nationality  |                              |                               |  |                                |  |
| Current residential 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                 |                                |  |
| Date of birth  |                              | I am 18 years old or over <input type="checkbox"/> |                             | Please tick yes                |  |
| Nationality  |                              |  |                             |                                |  |
| Current residential 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<br>Quick Serv Limited   |
| Address<br><br>3 Cherry Tree Road North<br>Blackpool<br>Lancashire<br>FY4 4NY  |
| Registered number (where applicable)<br>11117404   |
| Description of applicant (for example, partnership, company, unincorporated association etc.)<br>Private Limited Company |
| Telephone number (if any)<br>07854 940 243   |
| E-mail address (optional)<br>ross@rdfleisure.com   |

### Part 3 Operating Schedule

When do you want the premises licence to start?

| DD |   | MM |   | YYYY |   |   |   |
|----|---|----|---|------|---|---|---|
| 1  | 1 | 0  | 1 | 2    | 0 | 1 | 9 |

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 will operate under the "Subway" brand, providing food and soft drinks to customers for consumption on or off the premises.

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

N/A

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) ☐
- b) films (if ticking yes, fill in box B) ☐
- c) indoor sporting events (if ticking yes, fill in box C) ☐
- d) boxing or wrestling entertainment (if ticking yes, fill in box D) ☐
- e) live music (if ticking yes, fill in box E) ☐
- f) recorded music (if ticking yes, fill in box F) ☐
- g) performances of dance (if ticking yes, fill in box G) ☐
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) ☐

**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**

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



C

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

**D**

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

E

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

**G**

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

H

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

|  |       |        |  |          |                                     |
|--|-------|--------|--|----------|-------------------------------------|
| <b>Late night refreshment</b><br>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 (please read guidance note 3)</b>   | Indoors  | <input checked="" type="checkbox"/> |
|  |       |        |  | Outdoors | <input type="checkbox"/>            |
|  |       |        |  | Both     | <input type="checkbox"/>            |
| Day  | Start | Finish |  |          |                                     |
| Mon  | 23:00 | 05:00  | <u>Please give further details here</u> (please read guidance note 4)  |          |                                     |
|  |       |        |  |          |                                     |
| Tue  | 23:00 | 05:00  |  |          |                                     |
|  |       |        |  |          |                                     |
| Wed  | 23:00 | 05:00  | <u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)   |          |                                     |
|  |       |        |  |          |                                     |
| Thur   | 23:00 | 05:00  |  |          |                                     |
|  |       |        |  |          |                                     |
| Fri  | 23:00 | 05:00  | <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 6) |          |                                     |
|  |       |        |  |          |                                     |
| Sat  | 23:00 | 05:00  |  |          |                                     |
|  |       |        |  |          |                                     |
| Sun  | 23:00 | 05:00  |  |          |                                     |
|  |       |        |  |          |                                     |

J

|   |       |        |   |                  |                          |
|---|-------|--------|---|------------------|--------------------------|
| <b>Supply of alcohol</b><br>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 type="checkbox"/> |
| Day   | Start | Finish | <b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)  |                  |                          |
| Mon   |       |        |   |                  |                          |
|   |       |        |   |                  |                          |
| Tue   |       |        |   |                  |                          |
|   |       |        |   |                  |                          |
| Wed   |       |        |   |                  |                          |
|   |       |        |   |                  |                          |
| Thur  |       |        | <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) |                  |                          |
|   |       |        |   |                  |                          |
| Fri   |       |        |   |                  |                          |
|   |       |        |   |                  |                          |
| Sat   |       |        |   |                  |                          |
|   |       |        |   |                  |                          |
| Sun   |       |        |   |                  |                          |
|   |       |        |   |                  |                          |

**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):**

|  |  |
|--|--|
| Name                                   |  |
| Date of birth                          |  |
| Address                                |  |
| Postcode                               |  |
| Personal licence number (if known)     |  |
| Issuing licensing authority (if known) |  |



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).

None currently anticipated.

L

|   |       |        |   |
|---|-------|--------|---|
| <b>Hours premises are open to the public</b><br>Standard days and timings (please read guidance note 7) |       |        | <b>State any seasonal variations</b> (please read guidance note 5)  |
| Day   | Start | Finish |   |
| Mon   | 00:01 | 00:00  |   |
|   |       |        |   |
| Tue   | 00:01 | 00:00  |   |
|   |       |        |   |
| Wed   | 00:01 | 00:00  |   |
|   |       |        |   |
| Thur  | 00:01 | 00:00  |   |
|   |       |        |   |
| Fri   | 00:01 | 00:00  | <b>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</b> (please read guidance note 6) |
|   |       |        |   |
| Sat   | 00:01 | 00:00  |   |
|   |       |        |   |
| Sun   | 00:01 | 00:00  |   |
|   |       |        |   |

**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)**

A comprehensive CCTV system shall be installed internally and externally at the premises and will meet the following criteria:

- The system will display on any recording the time and date of said recording;
- The system will be recording whenever the premises is open to the public;
- Any recordings will be retained for a minimum of 31 days after they are made and will be produced to an authorised officer upon request, so long as said request is in accordance with the principles of the Data Protection Act or any subsequent or alternative legislation;
- The CCTV will capture all public areas of the premises, with the exception of the toilets.

Appropriate signage alerting customers to the use of CCTV shall be displayed in a conspicuous position at the premises.

A competent person trained in the use of and operation of the CCTV will be in attendance at the premise at all times that licensable activities are taking place. Said person will be able to fully operate the CCTV system and be able to download data in a recognised format when requested.

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

An incident register of all occurrences and ejections will be maintained at the premises and any details of public order offences will be recorded. Said register will be made available to an authorised officer upon request.

Prior to any occasion on which licensable activities are to be carried on at the premises, a risk assessment will be carried out to determine whether door supervisors are required. An appropriate number of door supervisors will be utilised in accordance with said risk assessment.

The premises will have a written zero tolerance drugs policy which is enforced at all times.

**c) Public safety**

**d) The prevention of public nuisance**

The management of the premises will ensure that the area immediately outside the entrance to the premises is kept clean, tidy and free from litter.

A clear, legible and conspicuous notice shall be displayed at the public exit requesting patrons to avoid causing noise, nuisance or disturbance upon leaving the premises.

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

Persons who are under the age of eighteen years will not be permitted on the premises between the hours of 23:00 and 05:00 and signage to the effect will be displayed at the entrance to the premises.

**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 (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 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).</li><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, if appropriate (please see note 15)</li></ul> |
| Signature          |    |
| Date               | 12 <sup>th</sup> December 2018  |
| Capacity           | Solicitors & Authorised Agents  |

**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)<br>Malcolm F Ireland, Head of Leisure & Licensing<br>Napthens LLP, Solicitors<br>Darwen House<br>Walker Road |           |          |         |
| Post town  | Blackburn | Postcode | BB1 2QE |
| Telephone number (if any)  |           |          |         |
| If you would prefer us to correspond with you by e-mail, your e-mail address (optional)  |           |          |         |

**From:** Clayton, Nick  
**Sent:** 10 January 2019 11:01  
**To:** Licensing <Licensing@wyre.gov.uk>  
**Subject:** FW: Subway Licence Conditions (Prevention Of Public Nuisance)

Dear Licencing

Thank you for consulting me on the application for Subway, Lord Street, Fleetwood. I have spoken to Malcom Ireland who is representing the applicant, and I've made it clear that there is a significant likelihood for the proposed hours to negatively affect nearby residents on lord street and London street. As such alternative operating hours have been proposed (23:00 till 03:00pm Mon-Sun) which would still allow for late night operating and would be similar to other nearby establishments. I have been informed by Malcom that his client objects to the proposed alteration to operating hours (see email below).

As such I wish to object to this application as it currently stands until agreement can be reached on conditions that will prevent public nuisance. If you have any questions regarding this matters, please don't hesitate to contact me.

Kind regards,

Nick Clayton

**Nick Clayton**  
Environmental Health Officer

**From:** Malcolm Ireland  
**Sent:** 07 January 2019 14:59  
**To:** Clayton, Nick  
**Subject:** RE: Subway Licence Conditions (Prevention Of Public Nuisance)

Hi Nick,

Many thanks for your e-mail and the attachment.

I have had the opportunity to consult with my client and it is clear that the main stumbling block is going to be the times. He does not wish to accept the hours being restricted to 03:00 each night and I have had to advise him that I can see no legal basis for him doing so.

I am meeting him at the back end of this week to go through the proposed conditions in detail and I expect we could come to an agreement on those, but we will not be willing to concede on the hours.

Kind regards,

**Malcolm Ireland**  
Partner, Head of Leisure & Licensing  
Naphthens LLP

The Applicant has proposed providing late night refreshment from 23:00pm till 05:00am Mon-Sun, given that the proposed application is located near to residential properties along Lord Street and London Street, there is a significant likelihood for the proposed hours to negatively affect nearby residents.

However upon looking at other nearby late night refreshment venues, it is advised that no objections would be raised by this department if late night refreshment times were altered to 23:00 till 03:00pm Mon-Sun and subject to the following conditions.

1. No nuisance shall be caused by noise coming from the premises or by vibration transmitted through the structure of the premises.
2. There shall be no emission from the premises of any offensive smells, which are likely to cause a nuisance.
3. No light from or on the premises and any other light under the control of the premises shall be provided where that light causes a nuisance to any nearby premises.
4. The Licensee shall ensure that staff departing late at night when the business has ceased trading, conduct themselves in such a manner to avoid disturbance to nearby residents
5. The premise licence holder will arrange for litter and cigarette debris dropped in the vicinity of the licensed premise to be collected and removed at the end of operating hours each night.
6. No person under the age of 18 years, unless they are accompanied by parent or guardian, shall be permitted on the premises when they are being used for the purposes of a licensable activity.
7. There shall be placed at all exits from the premises in a place where they can be seen and easily read by the public, (or member and their guests) notices requiring customers to leave the premises and the area quietly. (Note, this may also include a reference to vehicles).
8. There shall be provided at the premises containers for the storage and disposal of waste foods and other refuse from the premises. Those containers shall be constructed, maintained and located so that access to them by vermin and unauthorised persons is prevented and arrangements shall be made for the regular lawful disposal of their contents.
9. Where the premises provide food to the public for consumption on or off the premises there shall be provided at or near the exits, sufficient waste bins to enable the disposal of waste food, food containers, wrappings etc.
10. Where the premises provide food for consumption off the premises, the public area immediately surrounding the premises shall be cleared of waste food, food containers, wrapping etc. at the end of trading on each day. Such refuse shall be placed in a container designed for the storage and disposal of refuse and waste foods which shall be constructed, maintained and located so that access to it by vermin and unauthorised persons is prevented and arrangements shall be made for the regular lawful disposal of their contents.