



Vale of Glamorgan
Application for a premises licence
Licensing Act 2003

For help contact
Licensing@valeofglamorgan.gov.uk
 Telephone: 01446 709105

* required information

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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 the applicant would prefer not to be contacted by telephone

Is the applicant:

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 the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.

Applicant Business

* Is the applicant's business registered in the UK with Companies House? Yes No

* Is the applicant's business registered outside the UK? Yes No

* Business name If the applicant's business is registered, use its registered name.

* VAT number Put "none" if the applicant is not registered for VAT.

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* Legal status

* Applicant's position in the business

Home country

The country where the applicant's headquarters are.

Applicant Business Address

* Building number or name

* Street

District

* City or town

County or administrative area

* Postcode

* Country

If the applicant has one, this should be the applicant's official address - that is an address required of the applicant by law for receiving communications.

Agent 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:

An agent that is a business or organisation, including a sole trader

A private individual acting as an agent

A sole trader is a business owned by one person without any special legal structure.

Agent 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.

Agent Registered Address

Address registered with Companies House.

* Building number or name

* Street

District

* City or town

County or administrative area

* Postcode

* Country

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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 (£)

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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

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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...

Partnership

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

Non Individual Applicant's Name

Name

Details

Registered number (where applicable)

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

partnership

Address

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

Continued from previous page...

Contact Details

E-mail

Telephone number

Other telephone number

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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.

Coffee shop serving alcohol to diners and guests, evening menu for diners

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

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PROVISION OF FILMS

Will you be providing films?

Yes No

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PROVISION OF INDOOR SPORTING EVENTS

Will you be providing indoor sporting events?

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Yes

No

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PROVISION OF BOXING OR WRESTLING ENTERTAINMENTS

Will you be providing boxing or wrestling entertainments?

Yes

No

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PROVISION OF LIVE MUSIC

Will you be providing live music?

Yes

No

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PROVISION OF RECORDED MUSIC

Will you be providing recorded music?

Yes

No

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PROVISION OF PERFORMANCES OF DANCE

Will you be providing performances of dance?

Yes

No

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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

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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.

Continued from previous page...

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

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.

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.

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

Name

First name

Family name

Enter the contact's address

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

Personal Licence number (if known)

Issuing licensing authority (if known)

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.

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HOURS PREMISES ARE OPEN TO THE PUBLIC

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

State any seasonal variations

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

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.

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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 trained in awareness for safety.
- All staff aware of conditions attached to the premises licence
- Prevention of crime and disorder
- CCTV cameras place inside the premises

b) The prevention of crime and disorder

A CCTV system to be installed to an agreed standard as approved by South Wales Police and maintained and operated at all times when the premises are open to the public. The system with cover all licensed areas of the premises where the public have access, excluding toilets. The images will be kept for a minimum period of 31 days. The images will be produced to a police employee in a readily playable format immediately upon request when the premises are open to the public and at all other times as soon as reasonably practicable. There will be sufficiently trained staff to facilitate the above.

An Incident book shall be kept to standard at the premises and maintained at all times. This must be made available for inspection on request to an authorised member of the relevant authority or a member of police staff.

The incident book will record the following details.

- All ejections of patrons
- All crimes reported to the venue
- Confiscated (seized) drugs and or offensive weapons
- Faults on the CCTV system
- Items placed (bagged and tagged) in the drugs or sharps box.

c) Public safety

The premises will be covered by the necessary insurance and all measures insuring public safety will taken into account such as:

Food handling

Adequate lighting to all areas

Toilet inspections

No alcohol to be sold for the purpose of off sales shall be allowed

Mandatory signage placed throughout the premises

d) The prevention of public nuisance

Due care and consideration will be taken regarding customers consumption of alcohol.

Signage will be displayed at the premises informing staff to leave quietly

Customer areas monitored at all times

Refusal to be given to customers deemed intoxicated and therefore a risk to themselves or others under the 1974 Health and Safety at Work ACT.

Signs indicating refusal of service and the possible fines incurred to those believed to be purchasing for the intent of proxy sales to be displayed on the premises.

Clear indication by signs and notice of the types of identification accepted for services of age restricted products

e) The protection of children from harm

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Proof of age scheme (challenge 21 scheme) undertaken for age related sales and relevant signage to be displayed.
A refusal book shall be kept to standard at the premises and maintained at all times and made available for inspection on request to an authorised member of the relevant authority and to be audited by the DPS on a fortnightly basis.
Members of staff will be aware of condition of licensing law, and any other general conditions attached to the premises licence
Documented records of induction training given to all members of service staff including acceptable ID requirements and refusal records use, this is to will include refresher training to be delivered on a six monthly basis
Signs indicating no ID no sale.

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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.
Premises Licence Fees are determined by the non domestic rateable value of the premises.
To find out a premises non domestic rateable value go to the Valuation Office Agency site at http://www.voa.gov.uk/business_rates/index.htm
Band A - No RV to £4300 £100.00
Band B - £4301 to £33000 £190.00
Band C - £33001 to £87000 £315.00
Band D - £87001 to £125000 £450.00*
Band E - £125001 and over £635.00*
*If the premises rateable value is in Bands D or E and the premises is primarily used for the consumption of alcohol on the premises then your are required to pay a higher fee
Band D - £87001 to £125000 £900.00
Band E - £125001 and over £1,905.00
There is an exemption from the payment of fees in relation to the provision of regulated entertainment at church halls, chapel halls or premises of a similar nature, village halls, parish or community halls, or other premises of a similar nature. The costs associated with these licences will be met by central Government. If, however, the licence also authorises the use of the premises for the supply of alcohol or the provision of late night refreshment, a fee will be required.
Schools and sixth form colleges are exempt from the fees associated with the authorisation of regulated entertainment where the entertainment is provided by and at the school or college and for the purposes of the school or college.
If you operate a large event you are subject to ADDITIONAL fees based upon the number in attendance at any one time
Capacity 5000-9999 £1,000.00
Capacity 10000 -14999 £2,000.00
Capacity 15000-19999 £4,000.00
Capacity 20000-29999 £8,000.00
Capacity 30000-39999 £16,000.00
Capacity 40000-49999 £24,000.00
Capacity 50000-59999 £32,000.00
Capacity 60000-69999 £40,000.00
Capacity 70000-79999 £48,000.00
Capacity 80000-89999 £56,000.00
Capacity 90000 and over £64,000.00

* Fee amount (£)

DECLARATION

¹
* I/we understand it is an offence, liable on conviction to a fine up to level 5 on the standard scale, under section 158 of the licensing act 2003, to make a false statement in or in connection with this application.

Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

Continued from previous page...

* Full name	<input type="text" value="darren Sheppard"/>
* Capacity	<input type="text" value="Agent"/>
* Date	<input type="text" value="23"/> / <input type="text" value="04"/> / <input type="text" value="2015"/> dd mm yyyy

Once you're finished you need to do the following:

1. Save this form to your computer by clicking file/save as...
2. Go back to <https://www.gov.uk/apply-for-a-licence/premises-licence/vale-of-glamorgan/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.

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

OFFICE USE ONLY

Applicant reference number	<input type="text" value="Romillys"/>
Fee paid	<input type="text"/>
Payment provider reference	<input type="text"/>
ELMS Payment Reference	<input type="text"/>
Payment status	<input type="text"/>
Payment authorisation code	<input type="text"/>
Payment authorisation date	<input type="text"/>
Date and time submitted	<input type="text"/>
Approval deadline	<input type="text"/>
Error message	<input type="text"/>
Is Digitally signed	<input type="checkbox"/>

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