

Meeting of:	Licensing Sub-Committee
Date of Meeting:	Friday, 20 June 2025
Relevant Scrutiny Committee:	Live Well Scrutiny Committee
Report Title:	Grant of a Premises Licence
Purpose of Report:	For the Sub-Committee to consider and determine an application under Section 16 of the Licensing Act 2003 for a new Premises Licence
Report Owner:	Licensing Authority
Responsible Officer:	Kirsty Evans, Licensing Team Manager
Elected Member and Officer Consultation:	Statutory Consultation
Policy Framework:	This is a matter for decision by the Licensing Act 2003 Sub-Committee
<p>Executive Summary:</p> <p>For the Sub-Committee to consider and determine a New Premises Licence application under Section 16 of the Licensing Act 2003 for Greek Islands, 202 Holton Road, Barry, CF63 4HQ.</p>	

Recommendation

1. The Sub-Committee is required to determine the application having regard to the Council's Statement of Licensing Policy, the Guidance issued by the Home Office under Section 182 of the Licensing Act 2003, the application and any representations submitted.

If minded to grant the application, the Sub-Committee is requested to confirm whether any additional conditions are to be imposed or only those which are consistent with and set out in the operating schedule.

Reason for Recommendation

1. To advise the Members of the relevant options available to them under the Licensing Act 2003 in determining the matter.

1. Background

- 1.1 The Licensing Authority has received an application for the grant of a new premises licence for Greek Islands, 202 Holton Road, Barry CF63 4HQ submitted by Greek Islands Ltd. The application and accompanying plan can be found in Appendix A.
- 1.2 The applicant describes the premises as:

"It is a Greek restaurant serving food like gyros, wraps, some Greek dishes like Moussaka, Pastitsio etc.

Inside has around 8 tables of four chairs each. There is a basement as well where we have the freezers and storage for weekly deliveries."
- 1.3 The application requests the following licensable activities for the hours stated:
 - The Sale of Alcohol for consumption on and off the premises:

Monday to Sunday: 16:00 to 23:00 hours
- 1.4 The additional conditions proposed by the applicant for the promotion of the licensing objectives can be found in Section M of the application, detailed in Appendix A.

2. Key Issues for Consideration

- 2.1 In accordance with the requirements of the Licensing Act 2003, copies of the application were forwarded to the Responsible Authorities.
- 2.2 During the statutory 28-day consultation period the application was advertised in accordance with the regulations, both at the premises, in a local newspaper and on the Council's website.

- 2.3** One representation was received during the consultation period from South Wales Police who are a Responsible Authority. This representation is detailed in Appendix B.
- 2.4** No other representations were received during the consultation period.
- 2.5** As relevant representations have been received the Sub-Committee must determine the application in accordance with the Licensing Act 2003.

3. How do proposals evidence the Five Ways of Working and contribute to our Well-being Objectives?

- 3.1** This report relates to a regulatory function of the Council.

4. Climate Change and Nature Implications

- 4.1** This report relates to a regulatory function of the Council.

5. Resources and Legal Considerations

Financial

- 5.1** Fees associated with the issue of Licences are set in statute and support the administration and enforcement of the Licensing Act 2003 functions.

Employment

- 5.2** None.

Legal (Including Equalities)

- 5.3** The Licensing Act 2003 (Section 4) states that it is the duty of all Licensing Authorities to carry out their functions under the Act with a view to promoting the licensing objectives. The licensing objectives are:

- a) The prevention of crime and disorder
- b) Public Safety
- c) The prevention of public nuisance
- d) Protection of children from harm

Each objective is of equal importance and should be of paramount consideration at all times.

- 5.4** Section 4(3) Licensing Act 2003 states that the Licensing Authority should have regard to the Council's Statement of Licensing Policy, the Statutory guidance issued under Section 182 of the Licensing Act 2003 and the Licensing Act itself, in this case in particular to:
- a) Paragraphs 1, 2, 3, 7, 8, 9, 11 and 12. There is no specific policy relating to the area for this type of application.
 - b) Chapters 2, 8, 9 and 10 of the Statutory guidance, as revised December 2023.
 - c) Sections 4, 9, 10, 11, 12, 13, 16, 17, 18, 182 and 183 of the Licensing Act 2003.
- 5.5** In each case the Sub-Committee may make the following determination (Section 18 (4) Licensing Act 2003):
- a) Grant the application subject to:
 - (i) the conditions mentioned in subsection (2)(a) modified to such extent as the authority considers appropriate for the promotion of the licensing objectives, and
 - (ii) any condition which must under section 19, 20 or 21 be included in the licence;
 - (b) Exclude from the scope of the licence any of the licensable activities to which the application relates;
 - (c) Refuse to specify a person in the licence as the premises supervisor;
 - (d) Reject the application.

6. Background Papers

The Licensing Act 2003

The Secretary of State's Guidance issued under Section 182 of the Licensing Act 2003

Regulations to the 2003 Act

Vale of Glamorgan Council's Statement of Licensing Policy.

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 Greek Islands 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 202 Holton Road, Barry	
Postcode	CF63 4HQ
Telephone number at premises (if any)	
Non-domestic rateable value of premises	£ 7700

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 please complete section (B) Care
Standards Act 2000 (c14) in respect of an independent hospital in
Wales
- ga) a person who is registered under Chapter 2 of Part ☐ please complete section (B)
1 of the Health and Social Care Act 2008 (within the
meaning of that Part) in an independent hospital
in England
- h) the chief officer of police of a police force in ☐ please complete section (B)
England and Wales

* 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)					
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)	
Surname			First names		
Date of birth			I am 18 years old or over <input type="checkbox"/> Please tick yes		
Nationality					
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	
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 Greek Islands Ltd
Address 202 Holton Road, Barry CF63 4HQ
Registered number (where applicable) 15297855

Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company Ltd
Telephone number (if any)
E-mail address (optional) [REDACTED]

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
15	05	2025

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)

It is a greek restaurant serving food like gyros, wraps , some greek dishes like Moussaka, Pastitsio etc.

Inside has around 8 tables of four chairs each.. There is a basement as well where we have the freezers and storage for weekly deliveries

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) ☐
- 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) E F
- f) recorded music (if ticking yes, fill in box F) F
- g) performances of dance (if ticking yes, fill in box G)
- anything of a similar description to that falling within (e), (f) or (g) h)
(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) J ☒

In all cases complete boxes K, L and M

A

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

B

			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)
Thur			
Fri			<u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u> (please read guidance note 6)
Sat			
Sun			

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			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Wed			
Thur			<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 6)
Fri			
Sat			
Sun			

C

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

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish		Both	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					

D

Wed			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)
Thur			
Fri			<u>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</u> (please read guidance note 6) No standart timing..not sure
Sat			
Sun			

Recorded music Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
Thur					
Fri			<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> (please read guidance note 6) Not Sure Yet		
Sat					
Sun					

E

--	--	--

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

F

			<u>Please give further details here</u> (please read guidance note 4)
Wed			
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5)
Fri			
Sat			<u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 6)
Sun			

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

G

Fri			<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			
Sun			

Name LEDIA LUANI	
Date of birth	██████████
Address ██ 	
Postcode	██████████

H

Personal licence number (if known) CCC106881
--

Supply of alcohol Standard days and timings (please read guidance note 7)			<u>Will the supply of alcohol be for consumption – please tick</u> (please read guidance note 8)	On the premises	<input type="checkbox"/>		
				Off the premises	<input type="checkbox"/>		
				Both	<input checked="" type="checkbox"/>		
Day	Start	Finish					
Mon	16:00	23:00	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5)				
	16:00	23:00					
Tue	16:00	23:30					
Wed	16:00	23:00					
Thur	16:00	23:00				<u>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</u> (please read guidance note 6)	
Fri	16:00	23:00					
Sat	16:00	23:00					
Sun	16:00	23:00					

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):

Issuing licensing authority (if known)

Cardiff

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

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variations</u> (please read guidance note 5)	
Day	Start	Finish		
Mon	- 16:00	- 23:00		
Tue	16:00	23: 00		
Wed	16:00 0	23 :00		
Thur	16:00 00	23: 00		<u>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</u> (please read guidance note 6) After 1-2 months we will open on 16:00-23:00 everyday including Monday
Fri	16:00	23:0 0		

Sat	16:00	23:00	
Sun	16:00	23:00	

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)

Staff training on responsible alcohol service and provide free water,
 Install CCTV cameras.
 Be Aware of Hours of operation,
 Ensuring compliance with all licence conditions,
 Food Safety, Fire Safety,
 Not selling alcohol to Children under 18

b) The prevention of crime and disorder

Use CCTV Cameras
 Display signage advertising the Use of CCTV cameras
 Ensure all staff know how to operate the system
 Camera in places where is more risk for crime and disorder

c) Public safety

Ensure fire safety measures are in place and staff are trained in fire safety procedures.
 Ensure staff are trained in first aid procedures.
 Food safety regulations

d) The prevention of public nuisance

Supervise costumers leaving premises after 11pm

Regular noise monitoring

Managing entertainment while finishing entertainment earlier than

Food and alcohol sales

Encourage quite Leavings by notices on entrances and exits

e) The protection of children from harm

Not selling alcohol to under 18 years old

Supervision by all staff servin alcohol

Consider restrictions on the hours when children may be present on 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 or my share code issued by the Home Office online right to work checking service (please read note 15).

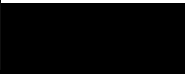


IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

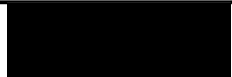
IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT 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.**

Declaration	<ul style="list-style-type: none">• [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).• 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)
Signature	
Date	14..04.2025
Capacity	

For joint applications, signature of 2nd applicant or 2nd 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	
-----------	---



Adran Drwyddedu
Gorsaf Heddlu Bae Cardydd
Stryd James
Caerdydd
CF10 5EW

Licensing Department
Cardiff Bay Police Station
James Street
Cardiff
CF10 5EW

Greek Islands Ltd
202 Holton Road,
Barry,
Vale of Glamorgan
CF63 4HQ

21st May 2025

**APPLICATION FOR A NEW PREMISES LICENCE. THE LICENSING ACT 2003 :
GREEK ISLANDS LTD, 202 HOLTON ROAD, BARRY, VALE OF GLAMORGAN, CF63 4HQ**

Dear Sir/Madam,

I have caused enquiries to be made into this application. The applicant advises that the premises is a Greek restaurant serving food like gyros, wraps and some Greek dishes.

The application seeks the following licensable activity:

1. The Sale by Retail of alcohol for consumption on and off the premises:
Monday to Sunday: 16:00 to 23:00 hours

At this time, South Wales Police object to the grant of a new premises licence as applied for under the following licensing objectives, namely those of:

▪ **The Prevention of Crime and Disorder.**

This is a high footfall area with the overall crime rate on Holton road in Barry is 2.62 times higher than the crime rate in Barry and 2.33 times higher than the national overall crime level, Violent crime rate is 2.38 times higher than Barry average and Public order crime level is 2.14 times higher than Barry average and 2.31 times higher than the national average and the level of crime connected with drugs and guns is 3.32 times higher than the Barry average and 79% higher than national average.

Also due to the applicant having close associations with persons of relevant criminal conviction held then South Wales Police also object under the prevention of crime and disorder.

Additional evidence to support the notice of objection will be presented at any subsequent Licensing Committee hearing. This evidence will be expanded on through verbal, written, statistical or CCTV evidence. If you require any further information please contact Police Licensing Officer Claire Dewhurst at Cardiff Bay police station, Licensing Department on [REDACTED] or by email to [REDACTED]



Yours sincerely

R. Cowan-Davies

Rya Cowan-Davies
Temporary Chief Inspector

**EMAIL COPY TO: Kirsty Evans Licensing Team Manager (Vale & Bridgend),
Licensing Section, Shared Regulatory Services**