

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 **TAJ AHMED**

(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

Coldhurst off licence	
Postal address of premises or, if none, ordnance survey map reference or description <b>162 CHADDERTON WAY COLDHURST</b>	
Post town	<b>OLDHAM</b>
Postcode	<b>OL1 2EW</b>
Telephone number at premises (if any)	
Non-domestic rateable value of premises	<b>£5,600 (BAND B)</b>

Part 2 - Applicant details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- |   |   |
|---|---|
| a) <input checked="" type="checkbox"/> an individual or individuals * | <input checked="" type="checkbox"/> please complete section (A) |
| b) <input type="checkbox"/> 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)

<input checked="" type="radio"/> Mr	<input type="radio"/> Mrs	<input type="radio"/> Miss	<input type="radio"/> Ms	Other Title (for example, Rev)	
Surname <b>AHMED</b>			First names <b>TAS</b>		
Date of birth [REDACTED]		I am 18 years old or over		Please tick yes <input checked="" type="checkbox"/>	
Nationality			<input checked="" type="checkbox"/>		
Current residential address if different from premises address		[REDACTED]			
Post town		[REDACTED]		Postcode [REDACTED]	
Daytime contact telephone number		[REDACTED]			
E-mail address (optional)		[REDACTED]			

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) **N/A**,

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
Date of birth				I am 18 years old or over	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		N/A.			
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

**(B) OTHER APPLICANTS** **N/A**

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
Address
N/A.

Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)  N/A.
Telephone number (if any)
E-mail address (optional)

### Part 3 Operating Schedule

When do you want the premises licence to start?

DD MM YYYY

0	1	0	8	2	0	2	1
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If you wish the licence to be valid only for a limited period, when do you want it to end?

DD MM YYYY

N	/	A	.				
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Please give a general description of the premises (please read guidance note 1)

THE PREMISES IS A ESSENTIAL STORE  
SELLING HOUSEHOLD ITEMS, ALCOHOL,  
CAKES AND CONFECTIONARY.

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

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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

N/A.

<b>Plays</b> Standard days and timings (please read guidance note 7)			<b><u>Will the performance of a play take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
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 performing plays</u></b> (please read guidance note 5)		
Wed					
Thur					
			<b><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></b> (please read guidance note 6)		
Fri					
Sat					
Sun					

B

N/A

<b>Films</b> 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	
				Outdoors	
				Both	
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 N/A .

<b>Indoor sporting events</b> 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			
Tue			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 5)
Wed			
Thur			
Fri			<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)
Sat			
Sun			

D N/A

<b>Boxing or wrestling entertainments</b> 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	
					Outdoors	
					Both	
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 4)			
Mon						
Tue						
Wed						
			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 5)			
Thur						
Fri						
Sat						
			<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)			
Sun						

E N/A

<b>Live music</b> Standard days and timings (please read guidance note 7)			<b><u>Will the performance of live music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
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 performance of live music</u></b> (please read guidance note 5)		
Wed					
Thur					
			<b><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></b> (please read guidance note 6)		
Fri					
Sat					
Sun					

F N/A

<b>Recorded music</b> 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> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
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> (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 N/A

<b>Performances of dance</b> 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> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
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 performance of dance</u></b> (please read guidance note 5)		
Wed					
Thur					
			<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)		
Fri					
Sat					
Sun					



H N/A

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> 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	
Mon				Outdoors	
				Both	
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					

I N/A

<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	
				Outdoors	
				Both	
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 4)		
Mon					
Tue					
			<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 5)		
Wed					
Thur					
			<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)		
Fri					
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	
				Off the premises	✓
				Both	
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)		
Mon	8AM	11PM			
Tue	8AM	11PM			
Wed	8AM	11PM			
Thur	8AM	11PM	<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	8AM	11PM			
Sat	8AM	11PM			
Sun	8AM	11PM			

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		TAT AHMED	
Date of birth		[REDACTED]	
Address		[REDACTED] [REDACTED]	
Postcode	[REDACTED]		
Personal licence number (if known)		PA2540	
Issuing licensing authority (if known)		OLDHAM COUNCIL	

K N/A.

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)  NO SEASONAL VARIATIONS
Day	Start	Finish	<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)  NO DIFFERENT TIMES OF OPENING.
Mon	8AM	11PM	
15			
Tue	8AM	11PM	
15			
Wed	8AM	11PM	
15			
Thur	8AM	11PM	
15			
Fri	8AM	11PM	
15			
Sat	8AM	11PM	
15			
Sun	8AM	11PM	
15			

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)**

SEE ATTACHED

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

SEE ATTACHED

**c) Public safety**

SEE ATTACHED

**d) The prevention of public nuisance**

SEE ATTACHED .

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

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**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 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, 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	
Date	
Capacity	

**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)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

## General

For sale by retail of alcohol, Coldhurst off licence has in place an effective and responsible management for its premises, providing adequate training to staff by myself as the designated premises supervisor. The licensing objectives have been taken into consideration, the prevention of crime and disorder, public safety, the prevention of public nuisance and the protection of children from harm. Insuring in protecting the public and local residents from crime, anti-social behavior and noise nuisance.

The training programmed will also include preventing sale of alcohol and keeping records of any incident, sale or refusal to an underage (that is under 18 or appears to be under 18), and persons who are drunk.

Staff that sell alcohol on the premises, copies of their identification would be kept on the premises, upon request of any responsible authority as an example giving the police and licensing authorities the powers they need to effectively manage and police the night-time economy.

The main supplier of alcohol to Coldhurst off licence would be Booker cash & carry, all sales invoices of alcohol would be available upon request by the licence authority.



## The Prevention of Crime and Disorder

Coldhurst off licence has installed the most up to date CCTV system available on the market. This tamper proof system has 24-hour recording in high definition. The footage of six cameras would be available 28 days. All potential vulnerable areas in the store and entrance and exit will provide a clear head and shoulder to an evidential quality. Recorded footage will be provided upon request of any responsible authority. Sufficient storage and software would be kept near the CCTV box, to supply evidence upon request.

Signage informing potential customers that CCTV is in operation would be placed in prominent positions within the Coldhurst Store. Written documentations of checks and training, signed off by myself as the designated premises supervisor would be available upon request by the relevant authority.

I, Taj Ahmed as the designated premises supervisor is the key person who will be responsible for the day to day business activities. Competent management will reduce a rise to issues of crime and disorder and public safety.

## Public Safety

At Coldhurst off licence, a fire risk assessment has been carried out and documented. The store would hold two Co2 fire extinguishers are class B, containing carbon dioxide, a clean extinguisher that leaves no residue, flammable liquid suitable for alcohol and live electrical equipment.

All exit routes and doors on such routes shall will be checked on every occasion before the premises is open for trade and checks on regular occasions when the premises are open to the public to ensure it is free from defect, obstruction, trip hazards and surfaces are not slippery. A record of inspections, of any defects discovered and the corrective action taken shall be provided in a logbook kept for that purpose. That logbook shall be made available for inspection on demand to an authorised officer of the council, a fire officer or the police.

A first Aid box will be kept on the premises for both staff and customers, in any incident should occur it will be documented in the incident book, kept on the premises ready for inspection of the relevant authority.

## The Prevention of Public Nuisance

Coldhurst off licence will prominently place clear and legible notices displaying at the exit requesting the customer to respect the needs of local residents and to leave the premises and the area quietly. Myself as the designated supervisor will ensure that staff who arrive early morning or depart late at night when the business has ceased trading conduct themselves in such a manner to avoid causing disturbance to nearby residents

The movement of bins and rubbish outside the premises will be kept to a minimum after 11.00pm. This will help to reduce the levels of noise produced by the store. All the rubbish produced by the store will be stored securely in a designated area with a tight fitting lid. This will help prevent litter being blown around. The placing of refuse, such as boxes, into receptacles outside the premises will take place at times that will prevent disturbance to nearby properties.

Coldhurst off licence waste collection is contracted to a specialist contractor Biffa, making sure that there are enough storage facilities for waste, fully contained and a lockable bin, which will be thoroughly cleaned and kept away from public areas.

Coldhurst off licence is allocated on an end terrace, prevention of public nuisance is not an issue. Staff arrive and when leave at the end of the shift are trained to avoid causing disruption to the nearby residents. Deliveries to the store will be arranged around 11am to further prevent nuisance or disturbance to the nearby residents. Both lights in and outside the premises will be positioned deliberately, directing light downwards not to cause a disturbance to nearby residents.

## The Protection of Children from Harm

Coldhurst off licence recognise the protection of children from harm includes the protection of children from moral, psychological and physical harm. It is completely unacceptable to sell alcohol to children. Conditions relating to the access of alcohol to children has been carefully considered. The premises will have clear signs displayed for restricting people under 18 years.

Coldhurst off licence will operate a proof of age policy, as the licence holder, an age verification policy has been placed to the premises in relation to the sale of alcohol. Challenge 25 is the strategy, anyone who is over 18 but looks under 25 to carry acceptable identification such as, a card bearing the PASS hologram, a photographic driving license or a passport.

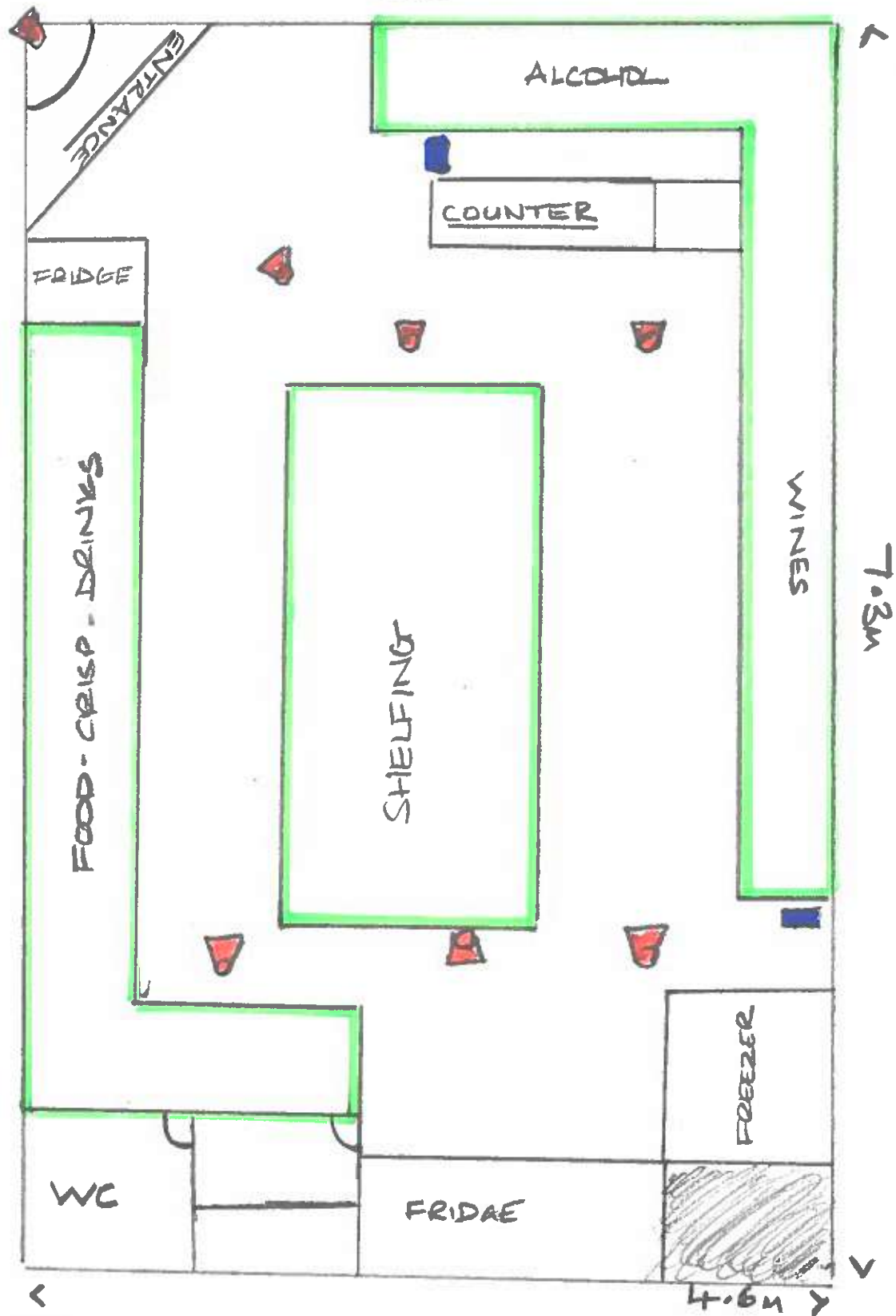
Posters will be placed in prominent places in the store to advertise that Challenge 25 is operational. This helps not only to deter potential underage customers, but also acts as a back up to staff members who make challenges. Training will provide staff to have confidence that the decisions they make will not be undermined by management.




A must as a minimum requirement to individuals who appear under the age of 18 years of age, to a responsible person to produce identification on request, also staff who are involved in the supply of alcohol are aware of the existence and content of the age verification policy applied by Coldhurst Off licence.

Challenge 25 encourages the keeping of records of all the failed attempts to buy alcohol of those without ID who look under 25, this helps licences with relevant authorities. Keeping records developed to reinforce the message throughout store, that people who are attempting to buy alcohol and who look under 25, will be asked for ID. The signage, in red and black, adds a fresh and striking look and makes it clear that under 25s must now expect to be challenged to prove their age, before sale of alcohol.

# Coldhurst Off Licence

## Plan



-  CAMERAS
-  FIRE EXTINGUISHERS
-  SHELFING