

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 NICHOLAS JAMES WHITBY

(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 WELLES & CROSS, 17 WELLES STREET,			
Post town	SANDBACH	Postcode	CW11 1GT

Telephone number at premises (if any)	N/A
Non-domestic rateable value of premises	£ 6300

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 checked="" type="checkbox"/>	please complete section (A)
b)	a person other than an individual *	<input type="checkbox"/>	
i	as a limited company/limited liability partnership	<input 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	<input type="checkbox"/>	please complete section (B)
iv	other (for example a statutory corporation)	<input type="checkbox"/>	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 **X**

•
•

(A) individual applicants (fill in as applicable)

Mr			
Surname WHITBY		First names NICHOLAS JAMES	
Date of birth <input type="text"/>		I am 18 years old or over YES	
Nationality BRITISH			
Current residential address if different from premises address		<input type="text"/>	
Post town	KNUTSFORD	Postcode	<input type="text"/>
Daytime contact telephone number		<input type="text"/>	
E-mail address (optional)	<input type="text"/>		

Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service (please see note 15 for information)

Second individual applicant (if applicable)

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
Date of birth or over		I am 18 years old		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 'share code' provided to the applicant by that service: (please see note 15 for information)					

(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

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

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
1	3	012024

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)

Newly refurbished Public House in Sandbach, the pub had been closed for several years. Now looking to open and cater to a new audience after an extensive refurbishment. Removing the first-floor residency, opening it to a two-floor pub now serving food and drink on the first floor.

Bar is in the same location as previously as is the small terrace to the rear.

Current license is our hand with all correct names and details, however we are requesting a new license due to changes to use of the first floor. License drawing will be attached to this pack.

No open vessels containing alcohol shall be removed from the premises other than to any designated area that has been set aside for the consumption of alcohol.

Tables and chairs shall be made available for all customers.

Entry after 6pm on Friday and Saturdays shall be for over 21's only, unless dining on the first floor and accompanied by an adult

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)	X
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)	X
f)	recorded music (if ticking yes, fill in box F)	X
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)	

<u>Provision of late night refreshment</u> (if ticking yes, fill in box I)	X
<u>Supply of alcohol</u> (if ticking yes, fill in box J)	X

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	
					Outdoors	
					Both	
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						

B

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	X
				Outdoors	
				Both	
Day	Start	Finish			
Mon	17:00	23:00	<u>Please give further details here</u> (please read guidance note 4) Like to have the ability to host movie nights on occasion, to help drive the sales if needed.		
Tue	17:00	23:00			
Wed	17:00	23:00	<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)		
Thur	17:00	23:00			
Fri	17:00	23:00	<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	17:00	23:00			
Sun	17:00	23:00			

C

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

D

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	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
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					

E

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	X
					Outdoors	
					Both	
Day	Start	Finish				
Mon	18:00	23:00	<u>Please give further details here</u> (please read guidance note 4) A few times a week we plan to have live musicians in the form of a single artists or the occasional duet, mostly acoustic sessions to help create a lovely ambiance.			
Tue	18:00	23:00				
Wed	18:00	23:00	<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)			
Thur	18:00	23:00				
Fri	18:00	23:00	<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)			
Sat	13:00	23:00				
Sun	13:00	23:00				

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	X
				Outdoors	
				Both	
Day	Start	Finish	Please give further details here (please read guidance note 4) Background music		
Mon	11:00	00:00			
Tue	11:00	00:00			
Wed	11:00	00:00	State any seasonal variations for the playing of recorded music (please read guidance note 5)		
Thur	11:00	00:00			
Fri	11:00	01:00	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 (please read guidance note 6)		
Sat	11:00	01:00			
Sun	11:00	00:00			

G

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

H

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	
Mon				Outdoors	
				Both	
Tue			<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	X
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) In case of Coffee or Teas following a meal fall outside of the 23:00 cut off and in case of a meal running later than planned.		
Mon	23:00	00:00			
Tue	23:00	00:00	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
Wed	23:00	00:00			
Thur	23:00	00:00	<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)		
Fri	23:00	01:00			
Sat	23:00	01:00			
Sun	23:00	00:00			

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises	X
				Off the premises	
Day	Start	Finish		Both	
Mon.	11:00	00:00	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Tue	11:00	00:00			
Wed	11:00	00:00			
Thur	11:00	00:00			
Fri	11:00	01:00	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 (please read guidance note 6)		
Sat	11:00	01:00			
Sun	11:00	00:00			

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):

Name		NICHOLAS JAMES WHITBY
Date of birth		<input type="text"/>
Address		<input type="text"/>
Postcode		<input type="text"/>
Personal licence number (if known)		PERS3146
Issuing licensing authority (if known)		CHESHIRE EAST

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)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	11:00	00:00	
Tue	11:00	00:00	
Wed	11:00	00:00	
Thur	11:00	00:00	Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 6)
Fri	11:00	01:00	
Sat	11:00	01:00	
Sun	11:00	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)

An effective CCTV system should be installed at the Premises and the images recorded by the CCTV system shall be retained in unedited form for a period of not less than 28 days and made available to the Police on request.

Our team will be trained on: Drink Awareness, Drug Awareness, Underage Sales Prevention, Safe Food Handling.

b) The prevention of crime and disorder

We will have a Doorman on Friday and Saturday evenings, we have a new state top of the range cctv system covering all required areas.

Team will be trained on courses relevant to this such as: Drug awareness, underage sales prevention.

We intend to also be in good communication with the local area so we are aware of any key figures that may cause trouble.

c) Public safety

SIA registered Door Supervisors shall be employed at the Premises on Friday and Saturday evenings, along with Christmas Eve and New Year's Eve, to such a number as the management of the premises consider are sufficient to control the entry of persons to the premises and for the keeping of order in the premises when they are used for a licensable activity.

When such staff are employed:

A written record shall be kept on the premises by the Designated Premises Supervisor of every person employed on the premises as a door supervisor in a register kept for that purpose. That record shall contain the following details:-

- The door supervisor's name, date of birth and home address;
- His/her Security Industry Authority licence number;
- The time and date he/she starts and finishes duty;
- The time of any breaks taken whilst on duty;
- Each entry shall be signed by the door supervisor.
- Record of all incidents taking place in the venue

That register shall be available for inspection on demand by an Authorised Officer of the Council, the Security Industry Authority or a Police Constable.

The SIA registered security staff shall ensure that persons enter and leave the premises in an orderly fashion

d) The prevention of public nuisance

Ensuring to run a professional business with staff that are trained on alcohol awareness and aware of any key figures likely to cause issues.

CCTV and Intruder Alarm systems.

Signage will be displayed about leaving quietly in respect of our neighbours.

e) The protection of children from harm

There shall be in place for the premises a Challenge 25 proof of age scheme to prevent the sale or supply of alcohol to persons under 18 years of age. The policy shall require any person who appears to be under the age of 25 years to produce a recognised proof of age card, accredited under the Proof of Age Standards (Pass), or, if a proof of age card is not available, a photo driving licence or passport, to prove that they are over the age of 18 years.

Checklist:

Please tick to indicate agreement

• I have made or enclosed payment of the fee.	X
• I have enclosed the plan of the premises.	X
• I have sent copies of this application and the plan to responsible authorities and others where applicable.	X
• I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.	X
• I understand that I must now advertise my application.	X
• 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).	X

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	<div style="border: 1px solid red; width: 100px; height: 20px;"></div>
Date	15.12.2023
Capacity	Director

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	
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)			

