

Application for a Premises licence to be granted under the Licensing Act 2003

This Form

Please use this form to apply for a New Premises Licence.

What we will do with your information:

We will only use the personal details you provide in order to deliver the service that you have requested or to contact you by letter, telephone or email in relation to the service that you have requested.

We will not send you emails about other Council services unless you have requested them elsewhere, or share this information with any other organisations unless required to do so in order to provide the service or as permitted by law.

Further information about how we handle your data can be found in our Privacy Policy.

Please confirm that you have read and accept this policy by ticking here:

Guidance notes

Use Of The Form

Form Ref. No.

This form can be completed on-line. When completed it should be PRINTED and POSTED back to the Council.

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes which accompany the various sections. If you need to add more details to this form by hand please USE OR ATTACH ADDITIONAL SHEETS as necessary and write legibly in block capitals in black ink. You may wish to keep a copy of the completed form for your records (note a PDF copy will be sent to your email address). Please return completed application forms to Horsham District Council and any relevant authorities as listed in the Licensing Policy Statement.

Guidance Notes:

1. Describe the premises. For example the type of premises, its general situation and layout and any other information that 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 is and its proximity to the premises.

2. Where taking place in the building or other structure please tick as appropriate. Indoors may include a tent.

3. For example state the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.

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

5. For example (but not exclusively), where you wish the activity to go on longer on a particular day, e.g. Christmas Eve.

6. Please give timings in 24-hour clock format (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.

7. If you wish people to be able to consume alcohol on the premises please tick on. If you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish for people to be able to do both please tick both.

8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises that 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 of restricted age groups, the presence of gaming machines.

9. Please list here the steps you will take to promote all four licensing objectives together.

10. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.

11. Where there is more than one applicant, the applicants or their respective agents must sign the application form.

12. This is the address that we shall use to correspond with you about this application.

Please note your application will be available for public inspection and posted on the Council's website.

Applicant Name / Premise Details

Applicant Name

Title or ORGANISATION

Mrs

Forenames/Organisation Name

Georgia

Surname/Organisation Type(e.g. Ltd Co, Partnership etc)

Tizzard

Date of Birth

Applicant 18 years old or over?

Nationality

Address Line 1

Address Line 2

City / Town

County

Postcode

Telephone

Email

Premises Details

Premises Name

Tipple & Taste

Address Line 1

Unit 1 Gatley House

Address Line 2

Mill Lane

City / Town

Storrington

County

West Sussex

Postcode

RH20 4NF

Telephone

Non-Domestic Rateable Value

7600

Email Address

Applicant Details

Type Of Application

Application for a Premises licence to be granted under the Licensing Act 2003

PLEASE STATE WHETHER YOU ARE APPLYING FOR A PREMISES LICENCE AS:

a) An Individual or Individuals * Complete Section A

b) A person other than an individual *

i) As a Limited Company Complete Section B

ii) As a Partnership Complete Section B

iii) As an unincorporated association Complete Section B

iv) Other Complete Section B

c) A recognised Club Complete Section B

d) A Charity Complete Section B

e) The Proprietor of an educational establishment Complete Section B

f) Health Service Body 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 Complete Section B

ga) A person which is registered under Chapter 2 of part 1 of the health and Social Care Act 2008 (within the Complete Section B

If you are applying as a person described in (a) or (b) please confirm one of the next 3 options:

(If yes please tick box)

I am carrying on or propose to carry on business that involves the use of the premises for licensable activities; Licensable Activities

OR

I am making the application pursuant to a:

(i) Statutory function

(ii) A function discharged by virtue of Her Majesty's prerogative

meaning of that part) in an independent hospital in England

h) Chief Officer of Police of a police force in England and Wales

Complete Section B

Second Individual

Further Applicants

- Need to enter Second individual applicant details? (please select if YES)
- Need to enter Other/Further applicant details? (please select if YES)

Operating Schedule

Part 3 - Operating Schedule

When do you want the premises licence to start?

25/05/2024

If you wish the licence to be valid only for a limited

period, when do you want it to end

If 5000 or more people are expected to attend the premises at any one time,

please state the number expected to attend

0

Please give a general description of the premises (Please see guidance note 1)

The premises is a ground floor shop with a single front off street entrance, with a fire door exit to the rear of the property.
The property comprises of 3 ground floor shops (of which ours is end of terrace) and 3 flats above the shops. Residents to the flats access their properties via a private pathway to the side of unit 3 and then stairs at the rear of the shops.
There is a parking area to the front of the properties.
The premises is located away from the centre of Storrington, the road is used to access the main car park of the village supermarket and for residents and shop proprietors.
The shop has a small WC and kitchenette to the rear.
The shop is in secluded well lit area.

Licensable Activities

Licensable Activities

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment:(tick for yes)

- a) Play(s) (if ticking yes, fill in box A)
- b) Film(s) (if ticking yes, fill in box B)
- c) Indoor sporting event(s) (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)
- i) Provision of late night refreshment (if ticking yes, fill in box I)
- j) Supply of alcohol (if ticking yes, fill in box J)

In all cases complete boxes K, L and M (see later pages)

J - Supply of Alcohol

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Will the sale of alcohol be for consumption on the premises, off the premises or both? Please select. (Read guidance note 6)

Both On Sales & Off Sales

State any seasonal variations for the supply of alcohol (please read guidance note 4)

Non-standard timings. Where you intend to use the premises for the provision of

supply of alcohol at different times to those listed in the column below, please

list (please read guidance note 5)

Standard timings (read guidance note 6)

Start

Mon	12:00
Tues	12:00
Wed	12:00
Thur	12:00
Fri	12:00
Sat	12:00
Sun	12:00

FINISH

Mon	22:00
Tues	22:00
Wed	22:00
Thur	22:00
Fri	22:00
Sat	22:00
Sun	22:00

Designated Premises Supervisor

Specify the designated premises supervisor.

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

Title	<input type="text" value="Mrs"/>
Forenames	<input type="text" value="Georgia Louise"/>
Surname	<input type="text" value="Tizzard"/>
Date of Birth	<input type="text"/>
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>
City / Town	<input type="text"/>
County	<input type="text"/>
Postcode	<input type="text"/>
Telephone	<input type="text"/>
Email Address	<input type="text"/>
Personal Licence Number (if known)	<input type="text"/>
Issuing Licencing Authority (if known)	<input type="text"/>

K - Adult Entertainment

K - Specify adult entertainment or services, activities, other entertainment or matters

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 8)

L - Premises open to public

L - Hours Premises are open to public

State any seasonal variations (please read guidance note 4)

None

Non-standard timings. Where you intend to use the premises to be open to the public at different times to those listed in the column on the left, please list (please read guidance note 5)

None

Standard timings (read guidance note 6)

Start

Mon	12:00
Tues	12:00
Wed	12:00
Thur	12:00
Fri	12:00
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FINISH

Mon	22:00
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M - Licensing objectives:

M - Describe the steps you intend to take to promote the four licensing objectives:

a) General for all four licensing objectives (b,c,d,e) (See guidance note 9)

The premises will be operated as a cafe / wine which will also serve food and non alcoholic beverages.
The Licensee shall ensure that all times when the premises are used for any licensable activity, there are sufficient, competent staff on duty at the premises for the purpose of fulfilling the terms and conditions of the licence and for preventing crime and disorder. The Licensee shall ensure that all staff will undertake training in their responsibilities in relation to the sale of alcohol, particularly with regard to drunkenness and underage persons. Records will be kept of training.

b) The prevention of crime and disorder

Any incidents of a criminal nature that may occur on the premises will be reported to the Police.
A Customer Code of Conduct poster will be displayed warning customers that if they act in an inappropriate manor they could be barred from the premises.

c) Public Safety

Appropriate fire safety procedures will be in place including fire extinguishers (foam, H2O and CO2)
Smoke detectors will be installed
All appliances are inspected annually.
All emergency exits shall indicated and be kept free from obstruction at all times
All exits doors will be regularly checked to ensure they function satisfactorily.
Adequate and appropriate First Aid equipment will be available on the premises.
The premises will have a suitable Public Liability Insurance policy with a certificate displayed.
We will operate a complete no smoking policy at the premises

d) The prevention of public nuisance

All customers will be asked to leave quietly.
Waste and bottle bins will not be accessible to the public.
Any incidents of a criminal nature that may occur on the premises will be reported to the Police.

e) The protection of children from harm

The licensee and staff will ask persons who appear to be under the age of 18 for photographic ID photographic driving licence or passport, a valid photograpgic identity card bearing the proof of age standard scheme (PASS) hologram.
We will have a clear policy in place that team members understand and implement at all times.
Posters and signs will be displayed to make customers aware of the law and company policy.
Regular briefings on vigilance, reporting procedures and dealing with incidents.
A register of refused sales shall be kept and maintained on the premises.

Checklist

Checklist (If yes please tick)

- 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 other where applicable
- I have enclosed the consent form completed by the individual I wish to be 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

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 (£5000) ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

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.

Signatures

Part 4 - Signatures

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

• [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, if appropriate (please see note 15)

Signature

Georgia Tizzard

Date

01/05/2024

Capacity

Contact name

Contact name (where not previously given)

and address for correspondence associated with this application. (Please read guidance note 12)

Click here if you need to specify a name not previously given for correspondence

Pay & Submit

Enter Total Amount Due

£190

You have two options for paying for the application you have made:

Option 1 - Pay online now using your Debit/Credit Card. A copy of the form will then be emailed to you. Please **PRINT & SIGN** it and **POST** back to the Public Health & Licensing Team at Horsham District Council at the address below.

Option 2 - Pay by cheque. Submit the form online and a copy will be emailed to you. Please **PRINT & SIGN** it and **POST** it with a cheque made payable to **Horsham District Council** to the following address.

(Please quote the form number on the back of the cheque)

Public Health and Licensing

Horsham District Council

Parkside

Chart Way

Horsham

West Sussex

RH12 1RL

Pay online.

Option 1

Pay online.

Option 2

Submit cheque in post (make cheques payable to 'Horsham District Council')

Pay & Submit