

Leeds City Council

**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 Lamberts Yard Limited
(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 Café @ Lamberts Yard Second Floor 162 Briggate			
Post town	Leeds	Postcode	LS1 6LY
Telephone number at premises (if any)			
Non-domestic rateable value of premises		£4,000.00	

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- | | | |
|---|-------------------------------------|-----------------------------|
| a) an individual or individuals * | <input type="checkbox"/> | please complete section (A) |
| b) a person other than an individual * | | |
| i. as a limited company | <input checked="" type="checkbox"/> | please complete section (B) |
| ii. as a partnership | <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:

Please tick yes

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		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

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		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal 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 Lamberts Yard Limited
Address C/O Studios 10-12 White Cloth Studios 24-26 Aire Street Leeds West Yorkshire LS1 4HT
Registered number (where applicable) 08987129
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
A	S	A P

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)

The second floor of Lamberts Yard will be a multi-functional gallery and event space, designed to complement the retail offer on the first floor.

It will be an active art gallery, with regularly rotated exhibitions by both national and local exhibitors in the fields of art, photography and sculpture and will operate alongside the first floor department store, holding pop up retail events, product launches, fashion shows, exhibitions and bespoke fashion events.

During the day the space will also operate as a retail 'department store' style café, selling high quality cold pressed juices and fresh health foods with an Italian twist. After 6.000pm the space will only open for promoted events and private hire.

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 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick any 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

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)	Both	<input type="checkbox"/>
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur					
Fri			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 (please read guidance note 5)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon	09:00	00:00			
Tue	09:00	00:00			
			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)		
Wed	09:00	00:00			
Thur	09:00	00:00			
			<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 5)		
Fri	09:00	00:00			
Sat	09:00	00:00			
Sun	09:00	00:00			

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)		
Day	Start	Finish			
Mon					
			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)		
Tue					
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 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>																							
<table border="1"> <thead> <tr> <th>Day</th> <th>Start</th> <th>Finish</th> </tr> </thead> <tbody> <tr> <td>Mon</td> <td></td> <td></td> </tr> <tr> <td>Tue</td> <td></td> <td></td> </tr> <tr> <td>Wed</td> <td></td> <td></td> </tr> <tr> <td>Thur</td> <td></td> <td></td> </tr> <tr> <td>Fri</td> <td></td> <td></td> </tr> <tr> <td>Sat</td> <td></td> <td></td> </tr> <tr> <td>Sun</td> <td></td> <td></td> </tr> </tbody> </table>				Day	Start	Finish	Mon			Tue			Wed			Thur			Fri			Sat			Sun			Outdoors
Day	Start	Finish																										
Mon																												
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Sun																												
			Both	<input type="checkbox"/>																								
			<u>Please give further details here</u> (please read guidance note 3)																									
			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)																									
			<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 5)																									

E

Live music Standard days and timings (please read guidance note 6)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 4)		
Wed					
Thur			<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 5)		
Fri					
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 6)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)					
Mon	09:00	00:00						
Tue	09:00	00:00						
Wed	09:00	00:00				<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)		
Thur	09:00	00:00						
			<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 5)					
Fri	09:00	00:00						
Sat	09:00	00:00						
Sun	09:00	00:00						

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon	09:00	00:00			
Tue	09:00	00:00			
			<u>State any seasonal variations for the performance of dance</u> (please read		
Wed	09:00	00:00			

			guidance note 4)
Thur	09:00	00:00	
Fri	09:00	00:00	<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 5)
Sat	09:00	00:00	
Sun	09:00	00:00	

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			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 2)	Indoors	<input checked="" type="checkbox"/>
Mon	09:00	00:00		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue	09:00	00:00	<u>Please give further details here</u> (please read guidance note 3)		
Wed	09:00	00:00			
Thur	09:00	00:00	<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)		
Fri	09:00	00:00			
Sat	09:00	00:00	<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 5)		
Sun	09:00	00:00			

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I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon	23:00	00:30			
Tue	23:00	00:30			
			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Wed	23:00	00:30			
Thur	23:00	00:30			
			<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 5)		
Fri	23:00	00:30			
Sat	23:00	00:30			
Sun	23:00	00:30			

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)	On the premises	<input type="checkbox"/>			
				Off the premises	<input type="checkbox"/>			
				Both	<input checked="" type="checkbox"/>			
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)					
Mon	09:00	00:00						
Tue	09:00	00:00						
Wed	09:00	00:00						
Thur	09:00	00:00				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 5)		
Fri	09:00	00:00						
Sat	09:00	00:00						
Sun	09:00	00:00						

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

Name Matthew Welburn Firth	
Address 4 Beech Avenue Leeds	
Postcode	LS18 4PA
Personal licence number (if known) PERL/03408/07	
Issuing licensing authority (if known) Leeds City Council	

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 8).

N/A

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			<u>State any seasonal variations</u> (please read guidance note 4)
Day	Start	Finish	
Mon	09:00	00:30	<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 5)
Tue	09:00	00:30	
Wed	09:00	00:30	
Thur	09:00	00:30	
Fri	09:00	00:30	
Sat	09:00	00:30	
Sun	09:00	00:30	

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 9)

1. Licensable activities taking place after 1800hrs will only take place as a pre-booked event.
2. All Licensable activities taking place after 1800hrs must be pre-booked events and West Yorkshire Police given 7 days prior notice of each event.
3. On a maximum of 20 occasions per year the premises will be able to operate until 0200hrs, on these occasions the West Yorkshire Police must be given 14 days prior notice of each event. This condition does not prevent the operator from applying for Temporary Event Notices.

b) The prevention of crime and disorder

1. A suitable CCTV system will be operational at the premises at all times when licensable activities are being carried out and at any other times where members of the public are present on the premises.
2. The CCTV system will cover the main entrance/s and exit/s and designated emergency egress routes from the premises.
3. The CCTV system will be of a satisfactory resolution quality which will enable the identification of persons and activities and other fine details such as vehicle registration number plates.
4. The CCTV system will contain the correct time and date stamp information.
5. The CCTV system will have sufficient storage retention capacity for a minimum of 31 days continuous footage which will be of a good quality.
6. The CCTV footage will be controlled and kept in a secure environment to prevent tampering or unauthorised viewing. A record will be kept of who has accessed the system, the reason why and when.
7. A designated member/members of staff at the premises, will be authorised to access the CCTV footage and be conversant with operating the CCTV system. At the request of an authorised officer of the Licensing Authority or a responsible authority (under the Licensing Act 2003) any CCTV footage, as requested, will be downloaded immediately or secured to prevent any overwriting. The CCTV footage material will be supplied, on request, to an authorised officer of the Licensing Authority or a Responsible Authority.
8. Door staff will be present at the managements discretion, having conducted a risk assessment for each event.
9. A supervisors register will be maintained at the licensed premises, showing the names, addresses and up to date contact details for the DPS and all personal licence holders.
10. The supervisors register will state the name of the person who is in overall charge of the premises at each time that licensed activities are carried out, and this information will be retained for a period of twelve months and produced for inspection on request to an authorised officer.
11. The premises licence holder (PLH), designated premises supervisor (DPS), will ensure that a Daily Record Register is maintained on the premises by door staff.
12. The Daily Record Register will contain consecutively numbered pages, the full name and registration number of each person on duty, the employer of that person and the date and time he/she commenced duty and finished duty (verified by the individuals signature).
13. The Daily Record Register will be retained on the premises for a period of twelve months from the date of the last entry.
14. The PLH/DS will ensure that an Incident Report Register is maintained on the premises to record incidents such as anti social behaviour, admissions, refusals and ejections from the premises.
15. The Incident Report Register will contain consecutively numbered pages, the date, time and location of the incident, details of the nature of the incident, the names and registration numbers of any door staff involved or to whom the incident was reported, the names and personal licence numbers (if any) of any other staff involved or to whom the incident was reported, the names and numbers of any police officers attending, the police incident and/or crime number, names and addresses of any witnesses and confirmation of whether there is CCTV footage of the incident.

16. The incident report register will be produced for inspection immediately on the request of an authorised officer.

c) Public safety

1. Empty bottles and glasses will be collected regularly and promptly. Glass and other sharp objects will be stored and disposed of safely using suitable receptacles. Receptacles will be secured and not accessible to the customers.
2. Before opening to the public, checks will be undertaken to ensure all access to the premises are clear for emergency vehicles. Regular checks will be undertaken when the premises are open.
3. Written records of all accidents and safety incidents involving members of the public will be kept. These will be made available at the request of an authorised officer.
4. A suitable trained and competent person must ensure regular safety checks of the premises, including decorative and functional fixtures, floor surfaces and equipment (including electrical appliances) to which the public may come into contact are undertaken. Records of these safety checks must be kept and made available for inspection by an authorised officer.
5. Adequate and appropriate first aid equipment and materials will be available on the premises at all times.
6. A procedure for dealing with unwell members of the public will be in place including those who appear to be affected by alcohol or drugs. Staff will be appropriately trained in such procedures.
7. A written health and safety policy covering all aspects of the safe use of strobes, lasers, smoke machines or any other special effects, will be provided and staff will be appropriately trained.
8. No strobes, lasers or smoke machines will be used at the premises unless there is a clearly displayed warning at the entrance to the premises that such equipment is in use.

d) The prevention of public nuisance

1. Noise from a licensable activity at the premises will be inaudible at the nearest noise sensitive premises, this being Regent Court, Leeds, LS1 6ND.
2. There will be no external loud speakers.
3. Bottles not to be placed in any external receptacle after 23:00 hours and before 07:00 hours, to minimise noise disturbance to neighbouring properties.
4. Noise from plant or machinery will be inaudible at the nearest noise sensitive premises during the operation of the plant machinery. Plant and machinery will be regularly serviced and maintained to meet this level.
5. The activities of persons smoking in the external areas will be monitored after 23:00 hours and they will be reminded to have regard to the needs of local residents and refrain from shouting anti social behaviour etc when necessary.
6. The premises supervisor and any door supervisors will monitor the activity of persons leaving the premises and remind them of their public responsibilities where necessary.
7. There will be an arrangement with an approved mini cab operator to provide taxis from the premises to aid dispersal.
8. There will be prominently displayed number for the agreed private hire taxi company for customers who want to make their own arrangements.

e) The protection of children from harm

1. The PLD/DPS staff, will ask for proof of age from any person appearing to be under the age of 21, who attempts to purchase alcohol at the premises.
2. The PLH/DPS staff, will ask for acceptable evidence (as agreed by WYP/WYTS) from any person appearing to be under the age of 21 who attempts to purchase alcohol at 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.

IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION.

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 11). **If signing on behalf of the applicant, please state in what capacity.**

Signature	<i>Woods Whur</i>
Date	10 September 2014
Capacity	Woods Whur 2014 Limited – Solicitors for the applicant

For joint applications, signature of 2nd applicant or 2nd applicant’s solicitor or other authorised agent (please read guidance note 12). **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 13)

Chris Rees-Gay
Woods Whur 2014 Limited
Devonshire House
38 York Place

Post town	Leeds	Postcode	LS1 2ED
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Telephone number (if any)	0113 234 3055
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If you would prefer us to correspond with you by e-mail, your e-mail address (optional)
chris@woodswhur.co.uk

Licensing Section
Leeds City Council
Entertainment Licensing
Civic Hall
LEEDS
LS1 1UR

Our ref CRG/KB/LAM001-1-8/1813

Your ref

10 September 2014

Dear Sirs

Lamberts Yard, 162 Lower Briggate, Leeds, LS1 6LY
Grant of Premises Licence

We act on behalf of Lamberts Yard Limited, the operator of these premises and we are instructed to submit an application for the grant of a premises licence in respect of the above named premises.

Accordingly, please find enclosed the following:

- 1 Notice of application
- 2 Consent of DPS
- 3 Plan drawing number - VEK635.L4 – Rev 1 - Second Floor
- 4 Cheque in the sum of £100.00

We confirm arrangements are being made for the public notice to be advertised in a local paper and displayed at the premises.

We should be obliged if you would acknowledge receipt of this letter and enclosure and if you require any further information, please contact Christopher Rees-Gay at this office.

Yours faithfully



Woods Whur

Enc