

Leeds Application for a premises licence Licensing Act 2003

For help contact entertainment.licensing@leeds.gov.uk Telephone: 0113 2474095

		* required information
Section 1 of 19	a a su a	
You can save the form at any	time and resume it later. You do not need to b	e logged in when you resume.
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference		You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
Are you an agent acting on b	behalf of the applicant?	Put "no" if you are applying on your own behalf or on behalf of a business you own or
Yes (•	No	work for.
Applicant Details		
* First name	Richard	
* Family name	Todd	
* E-mail	richard@futuresoundevents.com	
Main telephone number	01132443446	Include country code.
Other telephone number	07812573632	
📋 Indicate here if you wo	ould prefer not to be contacted by telephone	
Are you:		
Applying as a business or organisation, including as a sole trader		A sole trader is a business owned by one person without any special legal structure.
Applying as an individ	lual	Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.



	·	
Continued from previous page		
Your Address		Address official correspondence should be
* Building number or name	Munro House	sent to.
* Street	Duke Street	
District		
* City or town	Leeds	
County or administrative area	West Yorkshire	
* Postcode	LS9 8AG	
* Country	United Kingdom	
Section 2 of 19		
PREMISES DETAILS		
I/we, as named in section 1, ap described in section 2 below (t in accordance with section 12 d	he premises) and I/we are i	nder section 17 of the Licensing Act 2003 for the premises naking this application to you as the relevant licensing authority
Premises Address	ine Licensing Act 2005.	
Are you able to provide a posta	al address, OS map referen	e or description of the premises?
		iption
Address Description		
The Rose Bowl car park, Portla	nd Crescent, Portland Gate	and Cookridge Street (see attached plans)
LFurther Details		
Telephone number	0113 244 3446	
Non-domestic rateable value of premises (£)	0	

17 N	on 3 of 19			
	ICATION DETAILS			
In wh		ng for the premises licence?		
\boxtimes	An individual or individuals			
	A limited company			
	A partnership			
	An unincorporated associ	ation		
	A recognised club			
	A charity			
	The proprietor of an educ	ational establishment		
	A health service body			
	• -	d under part 2 of the Care Standards Act	t	
L]	2000 (c14) in respect of ar	n independent hospital in Wales		
	A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England			
	The chief officer of police	of a police force in England and Wales		
	Other (for example a state	utory corporation)		
Con	firm The Following			
	l am carrying on or propo the use of the premises fo	osing to carry on a business which involv or licensable activities	/es	
	I am making the applicati	on pursuant to a statutory function		
	l am making the applicati virtue of Her Majesty's pr	ion pursuant to a function discharged by erogative	у	
Sect	ion 4 of 19			
IND	INDIVIDUAL APPLICANT DETAILS			
	blicant Name he name the same as (or sin	nilar to) the details given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as required.	
•	Yes	C No	Select "No" to enter a completely new set of details.	
First	t name	Richard		
Farr	nily name	Todd	2 6 NOV 2814	
ls th	Is the applicant 18 years of age or older?			
۲	Yes	C No		
L			на странов стра на прода на селена странована сероно обој селена селена била страна и селена селена селена селе Во странов стра на прода селена селена селена селена селена селена селена селена и селена селена селена селена С	

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Applicant Postal Address					
Is the address the same as (or s	similar to) the address g	If "Yes" is selected you can re-use the details			
• Yes	C No		from section one, or amend them as required. Select "No" to enter a completely new set of details.		
Building number or name	Munro House				
Street	Duke Street				
District					
City or town	Leeds				
County or administrative area	West Yorkshire				
Postcode	LS9 8AG				
Country	United Kingdom				
Applicant Contact Details					
Are the contact details the sam	ne as (or similar to) thos	e given in section one?	If "Yes" is selected you can re-use the details		
Yes	∩ No		from section one, or amend them as required. Select "No" to enter a completely new set of details.		
E-mail	richard@futuresoundevents.com				
Telephone number	01132443446				
Other telephone number	07812573632				
	Add anoth	ner applicant]		
Section 5 of 19 and the sector of the sector					
OPERATING SCHEDULE					
When do you want the premises licence to start?					
If you wish the licence to be valid only for a limited period, / / when do you want it to end dd mm yyyyy					
Provide a general description of the premises					
For example the type of premises, its general situation and layout and any other information which 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 will be and its proximity to the premises.					
The area will contain two outdoor stages playing live music, one on the Rose Bowl car park and the other on Cookridge Street. There will be bars near the stages selling alcohol and soft drinks. The event will take place on one day only and the 3 dates are applied for to allow flexibility for future years but will always remain a one day event. The Monday will only be utilised if the event was to fall on a Bank Holiday Weekend					

Continued from previous page	•••			
If 5,000 or more people are				
expected to attend the premises at any one time,	4000			
state the number expected				
attend Section 6 of 19			ya kana sa ana	
PROVISION OF PLAYS			- : .	
Will you be providing plays?				
∩ Yes	O No O O			
Section 7 of 19				
PROVISION OF FILMS				
Will you be providing films?				
<u> </u>	(No			
Section 8 of 19			aan ma _{na} an 201	
PROVISION OF INDOOR SP	ORTING EVENTS	S		
Will you be providing indoo	r sporting events	s?		
	(No			
Section 9 of 19	,			유명 관계 전체 가격 가지 않는 것 같은 것이 같다.
PROVISION OF BOXING OF	WRESTLING EN	ITERTAINMENTS		
Will you be providing boxin	g or wrestling er	ntertainments?		
C Yes	No			
Section 10 of 19				
PROVISION OF LIVE MUSIC				
Will you be providing live m	nusic?			
Yes	C No			
Standard Days And Timin	gs			
MONDAY				Give timings in 24 hour clock.
Sta	art 09:00	End	23:00	(e.g., 16:00) and only give details for the days
Sta		End		of the week when you intend the premises to be used for the activity.
	~··· []		L	to be used for the detivity.
TUESDAY	[
St	art	End		
Sta	art	End		
WEDNESDAY				
St	art	End		
	art	End		
1			L	,

Continued from previous page				
THURSDAY				
Start	End			
Start	End			
FRIDAY				
Start	End			
Start	End			
SATURDAY				
Start 09:00	End 23:00			
Start	End			
SUNDAY				
Start 09:00	End 23:00			
Start	End			
Will the performance of live music take place indoors or ou				
C Indoors C Outdoors C	structure tick as appropriate. Indoors may Both include a tent.			
State 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 unam	nplified.			
one day event.				
State any seasonal variations for the performance of live mu				
For example (but not exclusively) where the activity will occur on additional days during the summer months.				
L				
Non-standard timings. Where the premises will be used for in the column on the left, list below	the performance of live music at different times from those listed			
For example (but not exclusively), where you wish the activ	ity to go on longer on a particular day e.g. Christmas Eve			
Section 11 of 19				
PROVISION OF RECORDED MUSIC				
Will you be providing recorded music?				

Continued from previous p	age		Yes	C No
Standard Days And Tim	ings			
MONDAY			Give timings in 2	24 hour clock
	Start 09:00	End 23:00	(e.g., 16:00) and	only give details for the days
	Start	End	to be used for the	en you intend the premises ne activity.
TUESDAY				
	Start	End		
	Start	End		
WEDNESDAY				
	Start	End		
	Start	End		
THURSDAY				
	Start	End		
	Start	End		
FRIDAY				
	Start	End		
	Start	End		
SATURDAY				
	Start 09:00	End 23:00		
	Start	End		
SUNDAY				
	Start 09:00	End 23:00		
	Start	End		
Will the playing of record	ded music take place indo	oors or outdoors or both?		lace in a building or other s appropriate. Indoors may
O Indoors	O Outdoors	Both	include a tent.	
State type of activity to l exclusively) whether or	be authorised, if not alrea not music will be amplifie	dy stated, and give relevan d or unamplified.	t further details, for	r example (but not
As in Section 10				
	tions for playing recorded			
For example (but not ex	clusively) where the activ	ity will occur on additional	days during the su	mmer months.
		an da ¹ 111		

Continued from previous		
	риус	
Non-standard timings. in the column on the le	Where the premises will be used for ft, list below	r the playing of recorded music at different times from those listed
For example (but not ex	xclusively), where you wish the activ	vity to go on longer on a particular day e.g. Christmas Eve.
Section 12 of 19		
PROVISION OF PERFO	RMANCES OF DANCE	
Will you be providing p	erformances of dance?	
Yes	C No	
Standard Days And Ti	mings	
MONDAY		Give timings in 24 hour clock.
	Start 09:00	End 23:00 (e.g., 16:00) and only give details for the days
	Start	End to be used for the activity.
TUESDAY		
	Start	End
	Start	End
WEDNESDAY	lanan tanan tan	
	Start	End
	Start Start	End End
THURSDAY		
	Start	End
	ст <u>ания и полновите на по</u>	lanna ann an Anna ann an Anna a
	Start	End
FRIDAY	[]	[
	Start	End
	Start	End
SATURDAY		
	Start 12:00	End 23:00
	Start	End

Continued from previous	page		
SUNDAY			
	Start 12:00	End 23:00	
	Start	End	
Will the performance of	dance take place indoors or outdoo	ors or both?	Where taking place in a building or other
C Indoors	C Outdoors •	Both	structure tick as appropriate. Indoors may include a tent.
	be authorised, if not already stated, not music will be amplified or unan		urther details, for example (but not
As in Section 10			
' :e any seasonal varia	ations for the performance of dance		
For example (but not ex	clusively) where the activity will oc	cur on additional da	ays during the summer months.
the column on the left,	list below		of dance at different times from those listed in on a particular day e.g. Christmas Eve.
Suction 13 of 19			
PROVISION OF ANYTH	IING OF A SIMILAR DESCRIPTION	TO LIVE MUSIC, RE	CORDED MUSIC OR PERFORMANCES OF
Will you be providing a performances of dance	nything similar to live music, record?	led music or	
Yes	C No		
Standard Days And Ti	mings		
MONDAY			_ Give timings in 24 hour clock.
	Start 09:00	End 23:00	(e.g., 16:00) and only give details for the days
	Start	End	of the week when you intend the premises to be used for the activity.
TUESDAY			
	Start	End	
	Start	End]

Continued from previous	; page		
WEDNESDAY			
	Start	End]
	Start	End	
THURSDAY			
THOUSDAT	Start	End	1
	Start	[]
		End	
FRIDAY	Chart		1
	Start	End]
	Start	End	
SATURDAY			1
	Start 09:00	End 23:00]
	Start	End	
SUNDAY	1 000000000000000000000000000000000000		-
	Start 09:00	End 23:00	_
	Start	End	
Give a description of th	e type of entertainment that will be	provided	
Will this entertainment	take place indoors or outdoors or bo	oth?	Where taking place in a building or other structure tick as appropriate. Indoors may
C Indoors	O Outdoors	Both	include a tent.
	be authorised, if not already stated,		further details, for example (but not
	not music will be amplified or unam	plified.	
As in Section 10			
L			
	ations for entertainment		
For example (but not e	xclusively) where the activity will occ	ur on additional da	ays during the summer months.
	Where the premises will be used for	entertainment at d	lifferent times from those listed in the column
on the left, list below			

Continued from previous page			
For example (but not ex	xclusively), where you wis	sh the activity to go on longer on a particular day e.g. Christmas Eve.	
Section 14 of 19			
LATE NIGHT REFRESH			
Will you be providing la	-		
C Yes	(No		
Section 15 of 19 SUPPLY OF ALCOHOL	1. 		
Will you be selling or su	upplying alcohol?		
(•) Yes	C No		
Standard Days And Ti			
MONDAY			
MONDAT	Start 12:00	Give timings in 24 hour clock. End 23:00 (e.g., 16:00) and only give details for the days	
	r	of the week when you intend the premises	
	Start	End to be used for the activity.	
TUESDAY		[]	
	Start	End	
	Start	End	
WEDNESDAY			
	Start	End	
	Start	End	
THURSDAY			
	Start	End	
	Start	End	
FRIDAY	L		
	Start	End	
	Start	End	
SATURDAY	Start 12:00	End 22.00	
	Start 12:00	End 23:00	
	Start	End	

Continued from previous page			
SUNDAY			
Start	12:00	End 23:00	
Start		End	
Will the sale of alcohol be for c	consumption:		If the sale of alcohol is for consumption on the premises select on, if the sale of alcohol
C On the premises	O Off the premises •	Both	is for consumption away from the premises
			select off. If the sale of alcohol is for consumption on the premises and away
			from the premises select both.
State any seasonal variations			
For example (but not exclusive	ely) where the activity will occu	ur on additional da	ays during the summer months.
Non-standard timings Where	the promises will be used for t	ho supply of alcoh	ol at different times from those listed in the
column on the left, list below	the premises will be used for t	The supply of alcoli	of at different times from those listed in the
For example (but not exclusive	ely), where you wish the activit	ty to go on longer	on a particular day e.g. Christmas Eve.
		######################################	
State the name and details of t licence as premises supervisor	-	to specify on the	
Name			
First name	Richard		
	Todd		
Family name	Todu		
Enter the contact's address	F	Middle & Machington and a second and a subscription of the second and the second and the second and the second	
Building number or name	20		
Street	King George Avenue		
District			
City or town	Leeds		
County or administrative area	West Yorkshire		
Postcode	LS7 4LH		
Country	United Kingdom		

Continued from previous p	page			
Personal Licence numbe (if known)	r LEEDS/PERL/01646/05			
Issuing licensing authori (if known)	ty Leeds			
PROPOSED DESIGNATE	D PREMISES SUPERVISOR CON	SENT		
How will the consent for be supplied to the autho	m of the proposed designated p prity?	remises supervisor		
Electronically, by the second seco	ne proposed designated premise	es supervisor		
C As an attachment t	o this application			
Reference number for cc form (if known)	pnsent		If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.	
Section 16 of 19				
ADULT ENTERTAINMEN				
premises that may give i Give information about a rise to concern in respec	rise to concern in respect of child anything intended to occur at th	lren e premises or ancillary her you intend childre	nt or matters ancillary to the use of the y to the use of the premises which may give n to have access to the premises, for example	
None				
Section 17 of 19				
HOURS PREMISES ARE	OPEN TO THE PUBLIC			
ndard Days And Tin	nings			
MONDAY	Short 11.00	End 23:00	Give timings in 24 hour clock. (e.g., 16:00) and only give details for the days	
	Start 11:00	End 23:00	of the week when you intend the premises to be used for the activity.	
TUESDAY	L	L		
	Start	End		
	Start	End] .	
WEDNESDAY				
	Start	End		
	Start	End		

Continued from previou	s page			
THURSDAY	, ,			
	Start	End		
	Start	End		
FRIDAY				
	Start	End		
	Start Start	End End		
SATURDAY				
SATURDAT	Start 11.00	Frid [22:00		
	Start 11:00	End 23:00		
	Start	End		
SUNDAY	-			
	Start 11:00	End 23:00		
	Start	End		
State any seasonal var	iations			
For example (but not e	exclusively) where the act	tivity will occur on additional days during the summer months.		
Non standard timings	Where you intend to use	a the premises to be open to the members and quests at different times from		
Non standard timings. Where you intend to use the premises to be open to the members and guests at different times from those listed in the column on the left, list below				
For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.				
Section 18 of 19				
LICENSING OBJECTIV				
Describe the steps you	i intend to take to promo	ote the four licensing objectives:		
a) General – all four licensing objectives (b,c,d,e)				
List here steps you will take to promote all four licensing objectives together.				
See below				
b) The prevention of ci	rime and disorder			
DPS will be generally on site.				

Continued from previous page... All security staff will be SIA registered. There will be a record of all security staff. There will be a Incident Report Register. There will be a record of any drugs that are found and they will be deposited in a secure receptacle. A check 21 will be adopted and operated on entry to the premises and tamper proof wrist bands will be used to identify. those over 18 years of age. No glass will be used for serving drinks.

c) Public safety

Before and during the event exits will remain clear for access of emergency vehicles. A written record of accidents and safety incidents. First aid staff will be available.

^c The prevention of public nuisance

Noise levels will be closely monitored. Litter pickers will be employed.

e) The protection of children from harm

No adult entertainment of a sexual nature to take place. Info & welfare point on site.

Section 19 of 19

PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

The premises licence fee is based on the non domestic rateable value of the premises these fees are:

1.20 domestic rateable value £4,300 or less - £100

Non domestic rateable value between £4,301 and £33,000 - £190

Non domestic rateable value between £33,001 and £87,000 - £315

Non domestic rateable value between £87,001 and £125,000 - £450

Non domestic rateable value £125,001 or more - £635

If the premise \blacktriangle non domestic rateable value is £87,001 or more and the premises is used exclusively or primarily for the supply of alcohol for consumption on the premises the fee for this application is:

Non domestic rateable value between £87,001 and £125,000 - £900

Non domestic rateable value £125,001 or more - £1905

If this application is for a community premises e.g. a village hall or community centre and the application does t include the sale of alcohol as an activity there is no fee payable.

If the premises will have 5,000 people or more in attendance at any one time there is an additional fee payable which we will contact you to pay when you submit your application. Details of these fees are available at http://www.leeds.gov.uk/ Business/Licences_and_street_trading/Licence_alcohol_and_entertainment.

* Fee amount (£)

100.00

ATTACHMENTS

AUTHORITY POSTAL ADDRESS

Continued from previous page				
Address				
Building number or name				
Street				
District				
City or town				
County or administrative area				
Postcode				
Country	United Kingdom			
DECLARATION				
* I will make payment of the fe	e on submission of this application.			
* I have attached, or will post to	o Leeds City Council, the plans of the premises.			
* I have attached, or will post to Leeds City Council, the consent form completed by the individual I wish to be premises supervisor, or I will ensure the individual I wish to be premises supervisor submits the consent form electronically.				
* I understand that I must now	advertise my application.			
* I understand that if I do not c	omply with the above requirements, my application will be rejected.			
 I understand that Leeds City Council is under a duty to protect the public funds it administers, and to this end may use the * information I have provided on my application for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. 				
Ticking this box indicate	es you have read and understood the above declaration			
This section should be complet behalf of the applicant?"	ted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on			
* Full name				
* Capacity				
Date (dd/mm/yyyy)				
	Add another signatory			
Once you're finished you need to do the following: 1. Save this form to your computer by clicking file/save as 2. Go back to <u>https://www.gov.uk/apply-for-a-licence/premises-licence/leeds/apply-1</u> to upload this file and continue with your application. Don't forget to make sure you have all your supporting documentation to hand.				
	I SUMMARY CONVICTION TO A FINE NOT EXCEEDING LEVEL 5 ON THE STANDARD OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION			