



PREM Appendix A 01



Entertainment Licensing, Leeds City Council, Civic Hall, Leeds, LS1 1UR

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 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.

OLD LEODIANIAN COMMUNITY AMATEUR SPORTS CLUB (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
CRAG LANE
OFF KING LANE
ALWOODLY
Post town LEEDS Post code LS17 5AK

Telephone number of premises (if any) 0113 2673409

Non domestic rateable value of premises £ 8300 = 00

Part 2 – Applicant Details

Please state whether you are applying for the licence as:

- a) an individual or individuals\*
b) a person other than an individual\*
i. as a limited company
ii. as a partnership
iii. as an unincorporated association or
iv. other (for example a statutory corporation)
c) a recognised club
Please tick [X] yes
[ ] please complete section (A)
[ ] please complete section (B)
[ ] please complete section (B)
[X] please complete section (B)
[ ] please complete section (B)
[ ] 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 in respect of the carrying on of a regulated activity (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       Mrs       Miss       Ms       Other title (for example, Rev)

Surname

First names

Please tick  yes

I am 18 years old or over

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone number

Email address (optional)

## SECOND INDIVIDUAL APPLICANT (IF APPLICABLE)

Mr       Mrs       Miss       Ms       Other title   
 (for example, Rev)

Surname       First names

I am 18 years old or over  Please tick  yes

Current postal address if different from premises address

Post Town  Postcode

Daytime contact telephone number

Email address (optional)

### (B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

|   |   |
|---|---|
| Name  | OLD LEODIENSIAN COMMUNITY AMATEUR SPORTS CLUB                 |
| Address   | CRAIG LANE<br>OFF KING LANE<br>ALWOODLEY<br>LEEDS<br>LS17 0BP |
| Registered number (where applicable)  |   |
| Description of applicant (for example, partnership, company, unincorporated association etc.) | UNINCORPORATED ASSOCIATION                                    |
| Telephone number (if any)   | 0113 2673409  |
| E-mail address (optional)   |   |

**Part 3 Operating Schedule**

*AS SOON AS POSSIBLE*

When do you want the premises licence to start?

| Day | Month | Year |
|-----|-------|------|
|     |       |      |

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

| Day | Month | Year |
|-----|-------|------|
|     |       |      |

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

*LICENSED COMMUNITY AMATEUR SPORTS CLUB LOCATED IN ALWOODLEY, LEEDS LS17 WITH 2 RUGBY PITCHES + 1 CRICKET PITCH. THE FACILITIES PROVIDE FOR RUGBY, CRICKET RUNNING, FOOTBALL TRAINING AND OTHER ATHLETIC PURSUITS AND ALSO FOR THE ACTIVITIES/PASTIMES OF ITS SOCIAL MEMBERS INCLUDING DARTS, DOMINOES + CARDS*

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 Schedule 1 and 2 to the Licensing Act 2003)

Please tick  yes

**Provision of regulated entertainment**

- 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) performance 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 entertainment facilities for:**

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

**Provision of late night refreshment** (if ticking yes, fill in box L)

**Sale by retail of alcohol** (if ticking yes, fill in box M)

**In all cases complete boxes N, O and P**

**A**

| Plays<br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the performance of a play take place indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (please read guidance note 2)   | Indoors  | <input checked="" type="checkbox"/> |
|---|-------|--------|---|----------|-------------------------------------|
|   |       |        |   | Outdoors | <input type="checkbox"/>            |
|   |       |        |   | Both     | <input type="checkbox"/>            |
| Day   | Start | Finish |   |          |                                     |
| Mon   | 1900  | 2330   | Please give further details here (please read guidance note 3)  |          |                                     |
| Tue   | 1900  | 2330   |   |          |                                     |
| Wed   | 1900  | 2330   | State any seasonal variations for performing play (please read guidance note 4)   |          |                                     |
| Thur  | 1400  | 2330   |   |          |                                     |
| Fri   | 1900  | 0130   | 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   | 1900  | 0130   |   |          |                                     |
| Sun   | 1900  | 2330   |   |          |                                     |

**B**

| Films<br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the exhibition of a films take place indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (please read guidance note 2)  | Indoors  | <input checked="" type="checkbox"/> |
|---|-------|--------|--|----------|-------------------------------------|
|   |       |        |  | Outdoors | <input type="checkbox"/>            |
|   |       |        |  | Both     | <input type="checkbox"/>            |
| Day   | Start | Finish |  |          |                                     |
| Mon   | 1900  | 2330   | Please give further details here (please read guidance note 3)   |          |                                     |
| Tue   | 1900  | 2330   |  |          |                                     |
| Wed   | 1900  | 2330   | State any seasonal variations for the exhibition of films (please read guidance note 4)  |          |                                     |
| Thur  | 1900  | 2330   |  |          |                                     |
| Fri   | 1900  | 01.30  | 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 (please read guidance note 5) |          |                                     |
| Sat   | 1900  | 0130   |  |          |                                     |
| Sun   | 1900  | 2330   |  |          |                                     |

**C**

|   |       |        |  |
|---|-------|--------|--|
| <b>Indoor sporting events</b><br>Standard days and timings<br>(please read guidance note 6) |       |        | Please give further details (please read guidance note 3)  |
| Day   | Start | Finish |  |
| Mon   | 1900  | 2330   | State any seasonal variations for indoor sporting events (please read guidance note 4)   |
| Tue   | 1900  | 2330   |  |
| Wed   | 1900  | 2330   |  |
| Thur  | 1900  | 2330   |  |
| Fri   | 1900  | 0130   |  |
| Sat   | 1900  | 0130   |  |
| Sun   | 1900  | 2330   |  |
|   |       |        | 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. (please read guidance note 5) |

**D**

|  |       |        |   |   |                          |
|--|-------|--------|---|---|--------------------------|
| <b>Boxing or wrestling entertainment</b><br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (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 the boxing or wrestling entertainment (please read guidance note 4)   |                          |
| Thur   |       |        |   |   |                          |
| Fri  |       |        |   | 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. (please read guidance note 5) |                          |
| Sat  |       |        |   |   |                          |
| Sun  |       |        |   |   |                          |

**E**

| <b>Live music</b><br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the performance of live music take place indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (please read guidance note 2)  | Indoors  | <input checked="" type="checkbox"/> |
|---|-------|--------|--|----------|-------------------------------------|
|   |       |        |  | Outdoors | <input type="checkbox"/>            |
|   |       |        |  | Both     | <input type="checkbox"/>            |
| Day   | Start | Finish | Please give further details here (please read guidance note 3)   |          |                                     |
| Mon   | 1900  | 2330   |  |          |                                     |
| Tue   | 1900  | 2330   | <i>AMPLIFIED AND UNAMPLIFIED</i>   |          |                                     |
| Wed   | 1900  | 2330   |  |          |                                     |
| Thur  | 1900  | 2330   | State any seasonal variations for the performance of live music (please read guidance note 4)  |          |                                     |
| Fri   | 1900  | 0130   |  |          |                                     |
| Sat   | 1900  | 0130   | 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.<br>(Please read guidance note 5) |          |                                     |
| Sun   | 1900  | 2330   |  |          |                                     |
|   |       |        | <i>BANK HOLIDAYS<br/>CHRISTMAS EVE<br/>NEW YEARS EVE</i>   |          |                                     |

**F**

| <b>Recorded music</b><br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the playing of recorded music take place indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (please read guidance note 2)  | Indoors  | <input checked="" type="checkbox"/> |
|---|-------|--------|--|----------|-------------------------------------|
|   |       |        |  | Outdoors | <input type="checkbox"/>            |
|   |       |        |  | Both     | <input type="checkbox"/>            |
| Day   | Start | Finish | Please give further details here (please read guidance note 3)   |          |                                     |
| Mon   | 1900  | 2330   |  |          |                                     |
| Tue   | 1900  | 2330   | <i>AMPLIFIED</i>   |          |                                     |
| Wed   | 1900  | 2330   |  |          |                                     |
| Thur  | 1900  | 2330   | State any seasonal variations for the playing of recorded music (please read guidance note 4)  |          |                                     |
| Fri   | 1900  | 0130   |  |          |                                     |
| Sat   | 1900  | 0130   | 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.<br>(please read guidance note 5) |          |                                     |
| Sun   | 1900  | 2330   |  |          |                                     |
|   |       |        | <i>BANK HOLIDAYS<br/>CHRISTMAS EVE<br/>NEW YEARS EVE</i>   |          |                                     |

**G**

|   |       |        |  |          |                                     |
|---|-------|--------|--|----------|-------------------------------------|
| <b>Performance of dance</b><br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the performance of dance take place indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (please read guidance note 2)   | Indoors  | <input checked="" type="checkbox"/> |
|   |       |        |  | Outdoors | <input type="checkbox"/>            |
|   |       |        |  | Both     | <input type="checkbox"/>            |
| Day   | Start | Finish | Please give further details here (please read guidance note 3)   |          |                                     |
| Mon   | 1900  | 2330   |  |          |                                     |
| Tue   | 1900  | 2330   | State any seasonal variations for the performance of dance (please read guidance note 4)   |          |                                     |
| Wed   | 1900  | 2330   |  |          |                                     |
| Thur  | 1900  | 2330   | 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 5) |          |                                     |
| Fri   | 1400  | 0130   |  |          |                                     |
| Sat   | 1900  | 0130   |  |          |                                     |
| Sun   | 1900  | 2330   |  |          |                                     |

**H**

|   |       |        |   |          |                                     |
|---|-------|--------|---|----------|-------------------------------------|
| <b>Anything of a similar description to that falling within (e), (f) or (g)</b><br>Standard days and timings<br>(please read guidance note 6) |       |        | Please give a description of the type of entertainment you will be providing  |          |                                     |
|   |       |        | Will the entertainment take place indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (please read guidance note 2)   | Indoors  | <input checked="" type="checkbox"/> |
|   |       |        |   | Outdoors | <input type="checkbox"/>            |
|   |       |        |   | Both     | <input type="checkbox"/>            |
| Day   | Start | Finish | Please give further details here (please read guidance note 3)  |          |                                     |
| Mon   | 1900  | 2330   |   |          |                                     |
| Tue   | 1900  | 2330   | State any seasonal variations for the entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)   |          |                                     |
| Wed   | 1900  | 2330   |   |          |                                     |
| Thur  | 1900  | 2330   | 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. (please read guidance note 5) |          |                                     |
| Fri   | 1900  | 0130   |   |          |                                     |
| Sat   | 1900  | 0130   |   |          |                                     |
| Sun   | 1900  | 2330   |   |          |                                     |



I

|  |       |        |  |  |   |  |
|--|-------|--------|--|--|---|--|
| <b>Provision of facilities for making music</b><br>Standard day and timings<br>(please read guidance note 6) |       |        | Please give a description of the facilities for making music you will be providing   |  |   |  |
|  |       |        | Will the facilities for making music be indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (please read guidance note 2)  |  | Indoors <input checked="" type="checkbox"/> |  |
|  |       |        |  |  | Outdoors <input type="checkbox"/>           |  |
|  |       |        |  |  | Both <input type="checkbox"/>               |  |
| Day  | Start | Finish | Please give further details here (please read guidance note 3)   |  |   |  |
| Mon  | 1900  | 2330   | MUSIC WILL BE AMPLIFIED AND UNAMPLIFIED  |  |   |  |
| Tue  | 1900  | 2330   |  |  |   |  |
| Wed  | 1900  | 2330   | State any seasonal variations for the provision of facilities for making music (please read guidance note 4)   |  |   |  |
| Thur   | 1900  | 2330   |  |  |   |  |
| Fri  | 1900  | 0130   | Non standard timings. Where you intend to use the premises for the provision of facilities for making music at different times to those listed in the column on the left, please list. (please read guidance note 5) |  |   |  |
| Sat  | 1900  | 0130   |  |  |   |  |
| Sun  | 1900  | 2330   |  |  |   |  |

J

|  |       |        |   |  |   |  |
|--|-------|--------|---|--|---|--|
| <b>Provision of facilities for dancing</b><br>Standard timings (please read guidance note 6) |       |        | Will the facilities for dancing be indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (please read guidance note 2)  |  | Indoors <input checked="" type="checkbox"/> |  |
|  |       |        |   |  | Outdoors <input type="checkbox"/>           |  |
|  |       |        |   |  | Both <input type="checkbox"/>               |  |
| Day  | Start | Finish | Please give further details here (please read guidance note 3)  |  |   |  |
| Mon  | 1900  | 2330   | MUSIC WILL BE AMPLIFIED AND UNAMPLIFIED   |  |   |  |
| Tue  | 1900  | 2330   |   |  |   |  |
| Wed  | 1900  | 2330   | State any seasonal variations for providing dancing facilities (please read guidance note 4)  |  |   |  |
| Thur   | 1900  | 2330   |   |  |   |  |
| Fri  | 1900  | 0130   | Non standard timings. Where you intend to use the premises for the provision of facilities for dancing at different times to those listed in the column on the left, please list. (please read guidance note 5) |  |   |  |
| Sat  | 1900  | 0130   |   |  |   |  |
| Sun  | 1900  | 2330   |   |  |   |  |

**K**

| <b>Provision of facilities for entertainment of a similar description to that falling within I or J</b><br>Standard days and timings<br>(please read guidance note 6)   |      |                                     | Please give a description of the type of entertainment facility you will be providing  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
|---|------|-------------------------------------|--|-------|--------|-----|------|------|-----|------|------|-----|------|------|------|------|------|-----|------|------|-----|------|------|-----|------|------|--|--|
| <table border="1"> <thead> <tr> <th>Day</th> <th>Start</th> <th>Finish</th> </tr> </thead> <tbody> <tr> <td>Mon</td> <td>1900</td> <td>2330</td> </tr> <tr> <td>Tue</td> <td>1900</td> <td>2330</td> </tr> <tr> <td>Wed</td> <td>1900</td> <td>2330</td> </tr> <tr> <td>Thur</td> <td>1900</td> <td>2330</td> </tr> <tr> <td>Fri</td> <td>1900</td> <td>0130</td> </tr> <tr> <td>Sat</td> <td>1900</td> <td>0130</td> </tr> <tr> <td>Sun</td> <td>1900</td> <td>2330</td> </tr> </tbody> </table> |      |                                     | Day  | Start | Finish | Mon | 1900 | 2330 | Tue | 1900 | 2330 | Wed | 1900 | 2330 | Thur | 1900 | 2330 | Fri | 1900 | 0130 | Sat | 1900 | 0130 | Sun | 1900 | 2330 | Will the entertainment facility be place indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (please read guidance note 2) |  |
|   |      |                                     | Day  | Start | Finish |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
|   |      |                                     | Mon  | 1900  | 2330   |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
| Tue   | 1900 | 2330                                |  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
| Wed   | 1900 | 2330                                |  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
| Thur  | 1900 | 2330                                |  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
| Fri   | 1900 | 0130                                |  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
| Sat   | 1900 | 0130                                |  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
| Sun   | 1900 | 2330                                |  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
| Indoors   |      | <input checked="" type="checkbox"/> |  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
| Outdoors  |      | <input type="checkbox"/>            |  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
| Both  |      | <input type="checkbox"/>            |  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
|   |      |                                     | Please give further details here (please read guidance note 3)   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
|   |      |                                     | State any seasonal variations for the provisions of facilities for entertainment of a similar description to that falling within I or J (please read guidance note 4)  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
|   |      |                                     | Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times to those listed in the column on the left, please list. (please read guidance note 5) |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |
|   |      |                                     | BANK HOLIDAYS<br>CHRISTMAS EVE<br>NEW YEARS EVE  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |  |  |

**L**

| <b>Late night refreshment</b><br>Standard days and timings<br>(please read guidance note 6)   |      |                          | Will the provision of late night refreshment take place indoors or outdoors or both – please tick <input checked="" type="checkbox"/> (please read guidance note 2)   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
|---|------|--------------------------|---|-------|--------|-----|------|------|-----|------|------|-----|------|------|------|------|------|-----|------|------|-----|------|------|-----|------|------|---------|--|-------------------------------------|
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|   |      |                          | Day   | Start | Finish |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
|   |      |                          | Mon   | 1900  | 2330   |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
| Tue   | 1900 | 2330                     |   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
| Wed   | 1900 | 2330                     |   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
| Thur  | 1900 | 2330                     |   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
| Fri   | 1900 | 0130                     |   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
| Sat   | 1900 | 0130                     |   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
| Sun   | 1900 | 2330                     |   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
| Outdoors  |      | <input type="checkbox"/> |   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
| Both  |      | <input type="checkbox"/> |   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
|   |      |                          | Please give further details here (please read guidance note 3)  |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
|   |      |                          | State any seasonal variations for the provision of late night refreshment (please read guidance note 4)   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
|   |      |                          | 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. (please read guidance note 5) |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |
|   |      |                          | BANK HOLIDAYS<br>CHRISTMAS EVE<br>NEW YEARS EVE   |       |        |     |      |      |     |      |      |     |      |      |      |      |      |     |      |      |     |      |      |     |      |      |         |  |                                     |

M

|  |       |        |  |                  |                                     |
|--|-------|--------|--|------------------|-------------------------------------|
| <b>Supply of alcohol</b><br>Standard days and timings<br>(please read guidance note 6) |       |        | Will the supply of alcohol be for consumption on or off the premises or both – please tick <input checked="" type="checkbox"/> (please read guidance note 7)   | On the premises  | <input checked="" type="checkbox"/> |
|  |       |        |  | Off the premises | <input type="checkbox"/>            |
| Day  | Start | Finish |  | Both             | <input type="checkbox"/>            |
| Mon  | 11 00 | 00 00  | State any seasonal variations for the supply of alcohol (please read guidance note 4)  |                  |                                     |
| Tue  | 11 00 | 00 00  |  |                  |                                     |
| Wed  | 11 00 | 00 00  |  |                  |                                     |
| Thur   | 11 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)<br><br>BANK HOLIDAYS<br>CHRISTMAS EVE<br>NEW YEARS EVE |                  |                                     |
| Fri  | 11 00 | 02 00  |  |                  |                                     |
| Sat  | 11 00 | 02 00  |  |                  |                                     |
| Sun  | 12 00 | 00 00  |  |                  |                                     |

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

Name **MR ANTHONY JOHN FIRTH**

Address **51, BUCKSTONE GROVE  
ALWOODLOY  
LEEDS**

Postcode **LS17 5HN**

Personal licence number (if known)

Issuing licensing authority (if known)

**N**

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)

(This section is currently blank.)

**O**

| Hours premises are open to the public<br>Standard days and timings<br>(please read guidance note 6) |       |        | State any seasonal variations (please read guidance note 4)   |
|---|-------|--------|---|
| Day   | Start | Finish |   |
| Mon   | 11 00 | 00 00  | Non standard timings. Where you intend to open the premises to be open to the public at different times from those listed in the column on the left, please list.<br>(please read guidance note 5)<br><br>BANK HOLIDAYS<br>CHRISTMAS EVE<br>NEW YEARS EVE |
| Tue   | 11 00 | 00 00  |   |
| Wed   | 11 00 | 00 00  |   |
| Thur  | 11 00 | 00 00  |   |
| Fri   | 11 00 | 02 00  |   |
| Sat   | 11 00 | 02 00  |   |
| Sun   | 11 00 | 00 00  |   |
|   |       |        |   |

Please tick  Yes

- 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 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 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 |  |  |
| Date      | 17 05 - 2012  |  |
| Capacity  | CLUB CHAIRMAN   |  |

**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 12). **If signing on behalf of the applicant please state in what capacity.**

|           |  |
|-----------|--|
| Signature |  |
| Date      |  |
| Capacity  |  |

**Contact Name (where not previously given) and address for correspondence associated with this application** (please read guidance note 19)

MR JASON LONDON  
 HIGH TREES  
 CHATELAIN  
 HUBY  
 NORTH YORKSHIRE

|   |              |           |          |
|---|--------------|-----------|----------|
| Post town   | LEEDS        | Post code | LS17 0BP |
| Telephone number (if any)   | 07764 570446 |           |          |
| If you would prefer us to correspond with you by e-mail, your e-mail address (optional) |              |           |          |

# Licensing Act 2003

## Proforma Risk Assessment V6

Please complete the details below:

|                   |   |
|-------------------|---|
| Applicant name:   | OLD LEODIENSIAN COMMUNITY AMATEUR SPORTS CLUB     |
| Business name:    |   |
| Business address: | CRAIG LANE<br>OFF KING LANE<br>ALWOODLEY<br>LEEDS |
|                   | Postcode: LS17 5PR                                |

### Guidance about this document

1. The Licensing Authority recommends that you complete this specially designed pro forma risk assessment to help you decide what should be entered in your operating schedule to show how you will promote the four licensing objectives.
2. Whilst the Licensing Authority cannot insist you use this document it takes the view that it assists responsible authorities in assessing the operating schedule, promotes discussions and partnership working and will reduce the number of representations and hearings.
3. If you do not use this risk assessment pro forma then you will need to demonstrate how you will meet the licensing objectives by providing other supporting evidence via your operating schedule.

### How to use this document

1. This document has four sections which correspond with the four licensing objectives. In each section you will find information on potential control measures (each with an individual code) which we suggest may help you meet the four licensing objectives.
2. Run through the questions at the beginning of each section and consider the potential control measures listed in the columns beneath.
3. If you are happy to volunteer the control measures as part of your application place a tick in the relevant box in the right hand column. You can then enter the corresponding codes in page 14 of your application form in the boxes which match up with the licensing objectives or simply write "see pro forma risk assessment". These measures will then appear on your licence.

✓

**Crime and Disorder**

**CCTV**

Does the premises have CCTV? YES  NO  N/A

If YES:

Was the siting and standard agreed with West Yorkshire Police (WYP)? YES  NO

Have you agreed a policy on the retention and security of the footage with WYP? YES  NO  N/A

If NO:

Have you consulted WYP about whether CCTV should be installed? YES  NO  N/A

(NB unless WYP have agreed CCTV is not required, a representation is likely)

| Suggested measures  | Code   | ✓ |
|---|--------|---|
| A suitable Closed-Circuit Television (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 .   | 6PF001 | ✓ |
| The CCTV system will cover all areas of the premises occupied by the public under the terms of the licence, including corridors and stairways (excluding WCs and changing rooms).   | 6PF002 |   |
| The CCTV system will cover the main entrance/s and exit/s and designated emergency egress routes from the premises.   | 6PF003 |   |
| The CCTV system will cover all external areas of the premises occupied by the public, i.e. queuing areas, beer gardens, smoking areas and car parks.  | 6PF004 |   |
| The location of CCTV cameras are identified on the site plan of the premises. No amendments to the locations of the cameras will be made without prior consultation with West Yorkshire Police/British Transport Police and the Licensing Authority   | 6PF005 |   |
| 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.   | 6PF006 |   |
| The CCTV system will contain the correct time and date stamp information.   | 6PF007 |   |
| The CCTV system will have sufficient storage retention capacity for a minimum of 31 days' continuous footage which will be of good quality.   | 6PF008 |   |
| 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.   | 6PF009 |   |
| 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. | 6PF010 |   |

|  |        |  |
|--|--------|--|
| The CCTV system will be capable of securing relevant pictures for review or export at a later date.  | 6PF011 |  |
| The CCTV system will be adequately maintained and be capable of transporting recorded material onto a removable media.   | 6PF012 |  |
| The CCTV system replay software must allow an authorised officer of the Licensing Authority or Responsible Authority to search the picture footage effectively and see all the information contained in the picture footage. | 6PF013 |  |
| It must be possible to replay exported files immediately e.g. no re-indexing of files or verification checks.  | 6PF014 |  |

### Designated Premises Supervisor (DPS)

|  |  |
|--|--|
| Will the DPS generally be on site?   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| Is the DPS contactable in emergency?   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| If the DPS is not to be generally on site, have you made arrangements to nominate the supervisor in his/her absence? | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| Is the Supervisor's Register bound with consecutively numbered pages?  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>                              |

| Suggested measures  | Code   | ✓ |
|---|--------|---|
| A Supervisor's 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.  | 6PF015 |   |
| 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. | 6PF016 |   |

### Door Supervisors and Other Security Staff

|   |  |
|---|--|
| Do you use registered door supervisors or security staff?                       | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| Are they Security Industry Authority (SIA) registered?                          | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| Do you specify a minimum number of door supervisors?                            | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| If YES, state the number of staff _____   |  |
| Days (and times) employed _____   |  |
| Has this been agreed with WYP?  | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>            |
| Do you have a policy with the door supervisor or security company which covers: |  |
| • Vetting customers entering the premises?                                      | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| • Is there a prominently displayed written search policy on the premises?       | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| • Controlling customers entering, within or leaving the premises?               | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |



|   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• Safeguarding the public within and immediately outside the premises?</li> </ul>                | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| <ul style="list-style-type: none"> <li>• Notifying WYP at the earliest opportunity of any problems or incidents?</li> </ul>             | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| <ul style="list-style-type: none"> <li>• Exclusion of persons who have had too much to drink or appear inclined to disorder?</li> </ul> | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| Do you have a Daily Record Register within which door supervisors/security staff sign on and off duty?                                  | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| Is the Daily Record Register bound with consecutively numbered pages?   | YES <input type="checkbox"/> NO <input type="checkbox"/>   |
| Can you identify who was on duty at any particular time?  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| Do you have an Incident Report Register?  | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| Is the Incident Report Register bound with consecutively numbered pages?  | YES <input type="checkbox"/> NO <input type="checkbox"/>   |

| Suggested measures  | Code   | ✓ |
|---|--------|---|
| The minimum number of door supervisors for the premises is _____<br>Please specify days and hours door supervisors operate on the premises.   | 6PF017 |   |
| The Premises Licence Holder (PLH)/Designated Premises Supervisor (DPS) will ensure that a 'Daily Record Register' is maintained on the premises by the door staff.  | 6PF018 |   |
| 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 individual's signature).  | 6PF019 |   |
| The Daily Record Register will be retained on the premises for a period of twelve months from the date of the last entry.   | 6PF020 |   |
| Security staff/designated supervisors will be familiar with the premises policy concerning the admission, exclusion and safeguarding of customers whilst in the premises.   | 6PF021 | ✓ |
| The PLH/DPS 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.  | 6PF022 |   |
| 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. | 6PF023 |   |
| The Incident Report Register will be produced for inspection immediately on the request of an authorised officer.   | 6PF024 |   |

## Drugs and Offensive Weapons

|   |  |
|---|--|
| Do you have a policy and procedure to prevent use of illegal drugs or weapons (e.g. a search policy)? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| Has this been agreed with WYP?  | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| Does the policy include:  |  |
| • recording any search  | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| • seizing drugs/weapons found   | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| • a purpose made secure receptacle for items seized   | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| • informing the police of any search and seizure  | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |
| • prominently display notices to inform customers of the policy                                       | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| A policy for searching patrons at the entrance to premises will be adopted and prominently displayed on the premises.  | 6PF025 |   |
| The PLH/DPS will inform West Yorkshire Police as soon as practicably of any search resulting in a seizure of drugs or offensive weapons.   | 6PF026 |   |
| A suitable purpose-made receptacle for the safe retention of illegal substances will be provided and arrangements made for the safe disposal of its contents as agreed with West Yorkshire Police or British Transport Police.   | 6PF027 |   |
| Notices will be prominently displayed at the entrances of the premises which state: <ul style="list-style-type: none"> <li>• a search will be conducted as a condition of entry to premises;</li> <li>• Incidents of crime and disorder will be reported to the police and a full recorded entry will be made in the incident report register.</li> <li>• Entry to the premises will be refused to any person who appears to be drunk, acting in a threatening manner or is violent; or appears to be under the influence of drugs.</li> <li>• entry will be refused to any person who has been convicted of an offence of drunkenness, violent or threatening behaviour or the use or distribution of illegal substances</li> </ul> | 6PF028 |   |

## Communication

|  |  |
|--|--|
| Do you subscribe to a form of communication link (radio/text/pager system). The system shall be recognised by the current Business Crime Reduction Partnership for the city, Leeds City Council and West Yorkshire Police. | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| Has this been agreed with WYP?   | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>            |

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| There will be a communication link via radio to other venues in the city centre. This will be the system recognised by the current Business Crime Reduction Partnership for the city, Leeds City Council and West Yorkshire Police | 6PF029 |   |

|   |        |  |
|---|--------|--|
| Such communication link will be kept in working order at all times when licensable activities are taking place  | 6PF030 |  |
| The communication link will be available to the Designated Premises Supervisor or other nominated supervisor and be monitored by that person at all times that licensed activities are being carried out. | 6PF031 |  |
| Any police instructions or directions given via the link will be complied with whenever given.  | 6PF032 |  |
| All incidents of crime or disorder will be reported via the link to an agreed police contact point.   | 6PF033 |  |

**Responsible Sale of Alcohol (cont)**

|   |  |
|---|--|
| <u>Proof of Age</u>   |  |
| Have you adopted a proof of Age Scheme?   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| Have all staff been instructed of the steps required to prevent under age sales of alcohol?   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| <u>Glass and Bottles</u>  |  |
| Do you have a policy for the frequent collection of glasses and bottles?  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| Do you take steps to prevent glasses/bottles being removed from the premises, e.g. instruction to door/bar staff, display of notices?                                     | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| Do you use plastic or toughened polycarbonate (or similar) drinking glasses/bottles when necessary?   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| <u>Alcohol Designated Public Places Orders</u>  |  |
| If your premises are in the area of an Alcohol Designated Public Places Order (DPPO), do you prominently display notices advising customers of the Order and its effects? | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/> |

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| The PLH/DPS staff will ask for proof of age from any person appearing to be under the age of 21/25 who attempts to purchase alcohol at the premises.<br>Or   | 6PF034 | ✓ |
| The PLH/DPS staff will ask for acceptable evidence (as agreed by WYP / WYTSS) from any person appearing to be under the age of 21/25 who attempts to purchase alcohol at the premises.   | 6PF035 |   |
| <u>Glass and Bottles</u><br>Drinks, open bottles and glasses will not be taken from the premises at any time. 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. | 6PF036 | ✓ |
| The PLH/DPS will prominently display notices which inform customers that open bottles or glasses may not be taken off the premises.  | 6PF037 | ✓ |

|  |        |  |
|--|--------|--|
| Plastic or toughened polycarbonate (or similar) glasses/bottles will be used in all outdoor areas.   | 6PF038 |  |
| Plastic or toughened polycarbonate (or similar) glasses/bottles will be used when requested by West Yorkshire Police / British Transport Police (e.g. football match days)                             | 6PF039 |  |
| <u>Alcohol Designated Public Places Orders</u><br>Notices indicating the existence and effect of an Alcohol Designated Public Places Order will be prominently displayed at the exits to the premises. | 6PF040 |  |

**Responsible Sale of Alcohol (cont)**

|   |  |
|---|--|
| <u>Membership of a Recognised Body</u><br>Do you belong to a Licensees Association/Body   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| If YES, please state which body ... <i>NORTH LEADS / PUB WATCH</i> .....  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| <u>Exclusion from Premises</u><br>Do you operate a system of excluding customers who are known to cause problems?   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| If YES:   | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>            |
| • is this your own system or  |  |
| • a system run by a local licensees body  | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| <u>Dispersal Policy</u><br>Do you have a written dispersal policy (e.g. A policy on how you disperse your clientele from your premises to reduce the risk of anti social behaviour) | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| If YES:   |  |
| • Was this agreed with WYP (and BTP where applicable)?  | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>            |
| • Are all bar and door staff trained on the policy?   | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>            |

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| The PLH/DPS will belong to a recognised trade body or Pub Watch Scheme where one exists, whose aims include the promotion of the licensing objectives  | 6PF041 |   |
| The PLH/DPS will operate to a written dispersal policy which ensures the safe and gradual dispersal of customers from the premises. The policy will be agreed with WYP. The PLH/DPS will ensure that staff receive training on the policy. | 6PF042 |   |

**Entertainment of an Adult Nature e.g. Strip Tease Dancing or Nude Dancing**

|  |  |
|--|--|
| Do you provide any entertainment consisting of striptease or nude dancing including where dancers are wearing 'see through' clothing or the show includes sexual stimulation?                        | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| Please note that should you provide relevant entertainment more than 12 occasions per 12 month period or more frequently than monthly you will be required to apply for a Sex Establishment licence. |  |

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| Entertainers will be aged no less than 18 years.   | 6PF043 |   |
| Price lists will be clearly displayed at each table and at each entrance to the premises.  | 6PF044 |   |
| Entertainers will only be present in the licensed area in a state of nudity when they are performing on stage or providing a private dance.  | 6PF045 |   |
| Any person on the premises who can be observed from outside the premises will be properly and decently dressed.  | 6PF046 |   |
| Entertainers will only perform on the stage area, or in areas identified on the plan attached to the licence.  | 6PF047 |   |
| Relevant entertainment will only be performed by the entertainer. There must be no audience participation. There must be no physical contact between entertainers.   | 6PF048 |   |
| Customers will not touch the breasts or genital area of entertainers. Entertainers will not directly or indirectly touch the breasts or genital area of customers.   | 6PF049 |   |
| Any performance will be restricted to dancing and the removal of clothes. There will not be any other form of sexual activity or stimulation which, for the avoidance of doubt, includes kissing.  | 6PF050 |   |
| Sex toys must not be used and penetration of the genital area by any means must not take place.  | 6PF051 |   |
| Customers will not be permitted to throw money at the entertainers.  | 6PF052 |   |
| All areas used for private dances must be visible to supervision and must not have closing doors or curtains that prevent performances from being observed.  | 6PF053 |   |
| All areas used for private dances must be directly supervised by either a SIA registered door supervisor, or a member of staff who has direct contact with SIA registered door supervisors working on the premises at all times the booths/areas are in use. Direct supervision does not include remote supervision by CCTV. | 6PF054 |   |

**Public Safety**

**Management Arrangements**

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| 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 is open.  | 6PF055 | ✓ |
| 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.  | 6PF056 | ✓ |
| During opening hours the cellar door must be kept locked or adequately supervised to prevent unauthorised access by the public.  | 6PF057 | ✓ |
| A suitably 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.   | 6PF058 | ✓ |
| Empty bottles and glasses will be collected regularly paying particular attention to balcony areas and raised levels.  | 6PF059 | ✓ |
| Electrical installations will be inspected on a periodic basis (at least every 3 years or at a frequency specified in writing) by a suitably qualified and competent person. Inspection records/certificates will be kept and made available at the request of an authorised officer. If used, any temporary electrical wiring and distributions will also be inspected. Inspection records/certificates will be kept. These will be made available at the request of an authorised officer.   | 6PF060 | ✓ |
| <p>One of the following protective measures shall be used for all socket-outlets which may be used for the connection for lighting, video or sound amplification equipment and display models:</p> <p>a) Each socket-outlet circuit will be protected by a residual current device having a rated residual operating current not exceeding 30mA, or</p> <p>b) Each individual socket-outlet will be protected by an integral residual current device having a rated residual operating current not exceeding 30mA.</p> <p>The current operation of all residual current devices will be checked regularly by pressing the test button. If the device does not switch off the supply, an electrical contractor should be consulted. At the same time action should be taken to prohibit the use of socket outlets associated with a faulty residual current device.</p> | 6PF061 |   |

## General Housekeeping

|   |  |
|---|--|
| Do you have written procedures for the inspection of: |  |
| • Furnishings and fabrics                             | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| • Suspended decorations/lights/amplification systems  | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| • Guarding to stairs/balconies/landings/ramps         | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| • Condition of floor surfaces                         | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| • Provision of safety glazing                         | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| • Guardings to fires or open flames                   | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| Regular safety checks of guardings to stairs, balconies, landings and ramps will be undertaken, and a supervision policy will be maintained to prevent people from inappropriate behaviour, including climbing which may lead to a fall from height. | 6PF062 |   |
| Safety glass that is impact resistant or shielded to protect it from impact will be used in all areas where the public may come into contact with it.  | 6PF063 |   |
| A written spillage policy will be kept to ensure spillages are dealt with in a timely and safe manner.   | 6PF064 |   |

## Refreshments

|  |  |
|--|--|
| Do you prepare hot food / drinks in proximity to the public? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| If YES:<br>Has the risk of scalding or burns been assessed?  | YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>            |

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| Members of the public will be prevented from accessing hot food and drink preparation areas to prevent risk of scald or burns. | 6PF065 |   |

## First Aid

|   |  |
|---|--|
| Do you have staff trained in First Aid?   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| If YES, please state numbers <u>2</u>   |  |
| Do you provide facilities for treatment of minor injuries (e.g. First Aid box)?   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| Do you have procedures for dealing with customers who are unwell including those who appear to be affected by drugs / alcohol)? | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |

| Suggested measures  | Code   | ✓ |
|---|--------|---|
| A suitably trained First Aider or appointed person will be provided at all times when the premises are open.  | 6PF066 |   |
| An appropriately qualified medical practitioner will be present throughout any sporting entertainment.  | 6PF067 |   |
| Staff holding a current qualification issued by a recognised national body in rescue and life safety procedures will be stationed and remain in the vicinity of the water at all material times.  | 6PF068 |   |
| Adequate and appropriate First Aid equipment and materials will be available on the premises at all times.  | 6PF069 | ✓ |
| 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. | 6PF070 | ✓ |

## Special Effects

|  |  |
|--|--|
| Do you use special effects on the premises, e.g. strobes, lasers, smoke machines or fireworks?   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| If yes, please give details :  |  |
| <i>ON OR ABOUT 5TH NOVEMBER FIREWORK DISPLAY. ADDITIONAL PUBLIC LIABILITY INSURANCE IS TAKEN OUT. MEMBERS OF THE PUBLIC ARE KEPT THE REQUISITE DISTANCE FROM THE BONFIRE AND FIREWORKS. FIREWORKS ARE SET OFF BY AUTHORISED PERSONNEL.</i> |  |

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| 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. | 6PF071 |   |
| 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.                       | 6PF072 |   |



**Public Nuisance**

**Noise and Vibration**

Noise and vibration

Identify the potential sources of noise and vibration which apply to your premises:

- Amplified music
- Unamplified music
- Singing and speech
- Waste disposal, including bottle bins
- Plant and machinery, including extraction systems
- Food preparation
- Cleaning

Identify where sources of noise may occur outside your premises:

- Beer garden
- Play area
- Car park
- Temporary structure
- Plant and equipment

Identify which measures are in place/proposed:

- Soundproofing
- Air conditioning to allow windows to be kept closed
- Sound limiters
- Use of lobby doors
- Cooling down period with reduced music volume
- Fixed and appropriate times for collection of waste
- Restricted use of outdoor areas
- No external loud speakers

Are the premises located near noise sensitive properties, e.g. residential areas, residential homes, hospitals? YES  NO  N/A

Applicants should refer to the Clean Neighbourhoods and Environment Act 2005 which has amended the Noise Act 1996 to introduce "night noise offences" for licensed premises in completing this section.

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| Licensable activities will be conducted and the facilities for licensed activities will be designed and operated so as to prevent the transmission of audible noise or perceptible vibration through the fabric of the building or structure to adjoining properties | 6PF073 | ✓ |
| Noise from a licensable activity at the premises will be inaudible at the nearest noise sensitive premises.  | 6PF074 |   |
| There will be no external loudspeakers   | 6PF075 | ✓ |
| Bottles will not be placed in any external receptacle after 23.00 hours and 07.00 hours to minimise noise disturbance to neighbouring properties   | 6PF076 | ✓ |

|   |        |   |
|---|--------|---|
| Noise from plant or machinery will be inaudible at the nearest noise sensitive premises during the operation of the plant or machinery. Plant and machinery will be regularly serviced and maintained to meet this level.   | 6PF077 |   |
| The PLH/DPS will ensure patrons use beer gardens, external areas and play areas in a manner which does not cause disturbance to nearby residents and business in the vicinity. Patrons will not use such areas after 21:00/22:00/23:00*<br>*Please delete as appropriate. | 6PF078 |   |
| The activities of persons using the external areas will be monitored after 23:00hrs and they will be reminded to have regard to the needs of local residents and to refrain from shouting and anti social behaviour etc when necessary,                                   | 6PF079 | ✓ |
| The PLH/DPS will adopt a "cooling down" period where music volume is reduced towards the closing time of the premises.  | 6PF080 |   |

**Litter**

Does the premises sell takeaway food, drinks or other produce/packaging which may generate litter/waste? YES  NO  N/A

If YES, please identify the steps taken to prevent nuisance caused by litter:

.....

.....

- Provision of litter bins
- Display of notices to customers
- Warnings/advice on packaging
- Instructions to staff to periodically clear litter from the street around the premises
- Other (please specify) .....

| Suggested measures  | Code   | ✓ |
|---|--------|---|
| The PLH/DPS will ensure that litter arising from people using the premises is cleared away regularly and that promotional materials such as flyers do not create litter | 6PF081 |   |

**Transport/Pedestrian Movement**

Do you have a procedure to ensure that local residents and businesses are not disturbed by customers entering and or leaving your premises: YES  NO  N/A

If YES:

What steps do you take to ensure that the procedure(s) works?  
*DESIGNATED COLLECTION POINT FOR TRUS. NOTICES ASKING CUSTOMERS TO HAVE REGARD TO LOCAL RESIDENTS WHEN LEAVING THE PREMISES.*

|  |        |  |
|--|--------|--|
| 05   |        |  |
| There will be sufficient physical screening of the relevant entertainment from view of those under 18 years. | 6PF094 |  |

**Performers Under 18**

Do entertainment performances include performances by children and young persons under 18 years of age? YES  NO  N/A

NOTE The Children (Performance) Regulations 1968 as amended – continue to apply but are not conditions on the licence as that would be duplication

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| The PLH/DPS will provide an adequate number of suitable adult supervisors who can provide care for the children as they move from stage to dressing room etc, and to ensure that all children can be accounted for in case of an evacuation or an emergency. | 6PF095 |   |
| The venue will be suitable to accommodate safely the numbers of children intended.   | 6PF096 |   |
| All supervisors and crew will receive instruction on the fire procedures applicable to the venue prior to the arrival of the children  | 6PF097 |   |
| The PLH/DPS will ensure that all special effects e.g. flashing lights, dry ice, smoke etc are suitable for the children involved in the performance.   | 6PF098 |   |

**Entertainment and/or Facilities Specifically Provided for Children**

Is any entertainment/facilities specifically provided for children? YES  NO  N/A

If yes are the children unaccompanied or supervised by staff without parental presence (including where parents are elsewhere in the licensed premises). YES  NO  N/A

Do you provide young persons discos or similar entertainment? YES  NO  N/A

| Suggested measures   | Code   | ✓ |
|--|--------|---|
| The PLH/DPS will ensure that an adult supervisor is stationed in the area(s) or levels which are occupied by children. The supervisors will be placed in the vicinity to exits to the premises. There will be one supervisor per 50 children at all times.   | 6PF099 |   |
| For closely seated audiences, i.e. theatres and cinemas, the ratio of supervisors will be 1 per 25 children, provided that where the children are in the charge of an adult organiser such organisers will be regarded as attendants to an extent not exceeding half of the number of attendants required by the above condition 4PF088. | 6PF100 |   |
| No child will be permitted to occupy the front row of any balcony gallery or tier, unless accompanied by and in the charge of a person who appears to have attained the age of 16 years.   | 6PF101 |   |

|  |        |  |
|--|--------|--|
| Close supervision will be held when children use balconies and other raised areas.   | 6PF102 |  |
| Upon egress from the premises the Licensee will deploy staff on exit doors and within the vicinity of the premises to ensure the safe dispersal of children and the premises will not close until all children have left the area. | 6PF103 |  |

**Child Protection Measures**

Do you have a system for ensuring the suitability of staff who work closely with children? YES  NO  N/A

If YES state measures used:  
*CRB checks and AA/AD/ADTS*

Are your premises located near any adult orientated premises e.g. an adult retail sex shop or amusement arcade? YES  NO  N/A

| Suggested measures  | Code   | ✓ |
|---|--------|---|
| The PLH/DPS will perform the necessary background checks including relevant police checks on all potential staff before offering them employment. The Licensee will report any child related concerns to the police he/she has about potential staff, existing staff and customers. | 6PF104 |   |
| The PLH/DPS will ensure staff receive training to deal with unaccompanied children on the premises and prevent them from harm.  | 6PF105 |   |
| The PLH/DPS will comply with the written guidance for protecting children from harm issued by Leeds City Council, Department of Social Services.  | 6PF106 |   |
| The PLH/DPS will liaise with any adult orientated premises close to his/her premises which the Licensee suspects are at risk of admitting underage children from his/her own premises.  | 6PF107 |   |