



Report of the Assistant Chief Executive (Corporate Governance)

Report to the Licensing Sub Committee

Date: Monday 18th January 2010

Subject: Application for the Grant of a Premises Licence for:
United Bar, 82 Elland Road, Leeds, LS11 0AB

Electoral Wards Affected:

Beeston and Holbeck

☒ X

Ward Members consulted
(referred to in report)

Specific Implications For:

Equality and Diversity ☐

Community Cohesion ☐

Narrowing the Gap ☐

Executive Summary

This report informs members of an application for the grant of a Premises Licence for premises situated at 82 Elland Road, Leeds, LS11 0AB trading as United Bar.

The responsible authorities are served with copies of the application by the applicant and Ward Members have been notified of the application.

1.0 Purpose of this Report

To advise Members of an application made under section 17 of the Licensing Act 2003 ("the Act") for a Premises Licence in respect of United Bar.

The Licensing Sub-Committee is required to consider this application due to the receipt of representations.

2.0 History of Premises

- 2.1 These Premises previously had the benefit of a Premises Licence, the Premises was known as "The Waggon and Horses." On August 7th 2009 the Licence was surrendered by the Licence holder.

3.0 The Application

- 3.1 The applicant is Mrs Kuljit Kaur Tura.
- 3.2 The location and the proximity to neighboring premises can be seen on the map provided, Members attention is drawn to **Appendix A**.

3.3 A copy of the application and operating schedule are attached as **Appendix B** to this report. For the assistance of members, the Operating Schedule shows:

i) **Proposed licensable activities**

- Recorded Music
- Supply of Alcohol

ii) **Proposed hours of licensable activities**

The proposed hours of licensable activities are as follows:

- Recorded Music
- Supply of Alcohol
Every Day 11:00 – 23:00

iii) **Steps to promote licensing objectives**

The applicant proposes to take the steps to promote the licensing objectives identified in section "P" of the application form.

Proposed times when the premises is open to the public

The premises propose to open to the public between the following hours:

Every Day 11:00 – 23:30

iv) **Proposed Designated Premises Supervisor**

Mrs Kuljit Kaur Tura intends to be the Designated Premises Supervisor

4.0 Relevant Representations

4.1 Under the Act representations can be received from responsible authorities or interested parties. Representations must be relevant and, in the case of an interested party, must not be frivolous or vexatious.

4.2 Responsible authorities have made the following representations:-

- **Leeds City Council Health and Safety**

Member's are invited to consider **Appendix C** of this report

- **West Yorkshire Police**

Member's are invited to consider **Appendix D** of this report

Following discussions between the applicants and the above party agreements have been reached. Consequently the parties have withdrawn their representations on the understanding that the agreed measures will be placed on the Premise Licence.

- **Leeds City Council Environmental Health – (Outstanding representation)**

Member's are invited to consider **Appendix E** of this report

5.0 Matters Relevant to the Application

5.1 Members of the Licensing sub committee must make decisions with a view to promoting the licensing objectives which are:

- the prevention of crime and disorder
- public safety
- the prevention of public nuisance
- the protection of children from harm

5.2 In making of their decision Members are obliged to have regard to the national Guidance and the Council's Licensing Policy. Members will be aware they must also have regard to the relevant representations made and evidence they hear.

6.0 Options Available to Members

6.1 The licensing sub-committee must take such of the following steps as it considers necessary for the promotion of the licensing objectives:

- Grant the application as requested.
- Grant the application whilst imposing additional conditions and/or altering in any way the proposed operating schedule
- Exclude any licensable activities to which the application relates.
- Refuse to specify the said person as the Designated Premises Supervisor.
- Reject whole or part of the application

6.2 Members of the Licensing sub committee are asked to note that they may not modify the conditions or reject the whole or part of the application merely because it considers it desirable to do so. It must actually be necessary in order to promote the licensing objectives.

Background Papers

- Guidance issued under s182 Licensing Act 2003
- Leeds City Council Licensing Policy



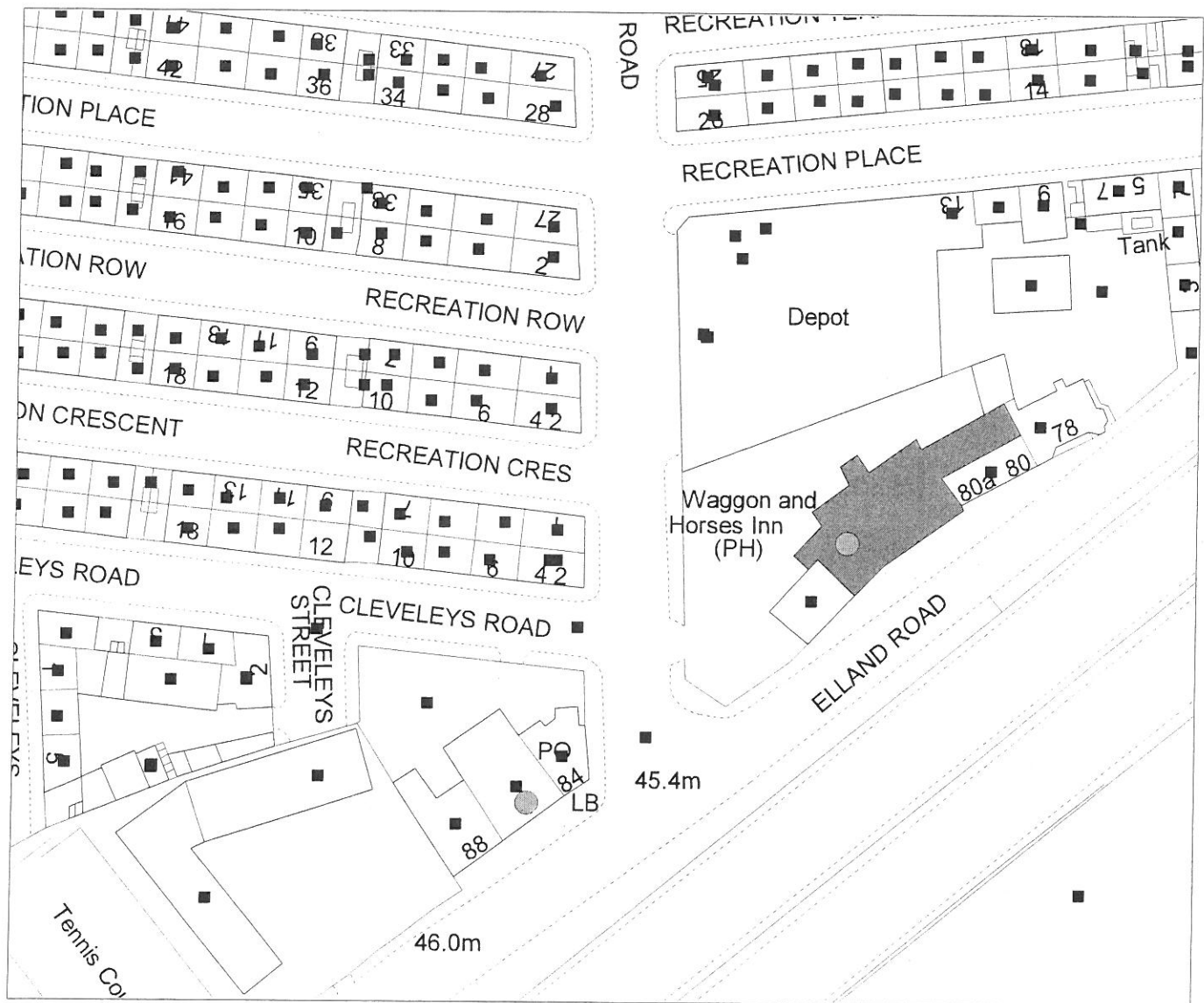
Leeds
CITY COUNCIL

Appendix A

Leeds City Council
Entertainment Licensing

Grant of a Premises Licence: PREM 02819

United Bar (formally Waggon and Horses), 82 Elland Road, Leeds, LS11



Miles 0.002 0.004 0.006 0.008 0.01 0.012 0.014 0.016 0.018 0.02 0.022 0.024 0.026

This map is based upon the Ordnance Survey's Digital Data with the Permission of the Ordnance Survey on behalf of the Controller of Her Majesty's Stationary Office

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Date:	08 January 2010
Scale:	1:267

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 that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

I/We KULJIT KAUR TUCIA

(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 <u>THE UNITED BAR</u> <u>82 ELLAND ROAD</u> <u>LEEDS</u>	
Post Town <u>LEEDS</u>	Postcode <u>LS11 0AB</u>

Telephone number at premises (if any)

077674 82818

Non-domestic rateable value of premises

£ 9500

Part 2 - Applicant details

Please state whether you are applying for a premises licence as

Please tick ☒ Yes

- | | |
|---|---|
| a) An individual or individuals* | <input checked="" type="checkbox"/> please complete section (A) |
| b) a person other than an individual* | |
| i) as a limited company | <input type="checkbox"/> please complete section (B) |
| ii) as a partnership | <input type="checkbox"/> please complete section (B) |
| iii) an unincorporated association or | <input type="checkbox"/> please complete section (B) |
| iv) other (for example, a statutory corporation) | <input type="checkbox"/> please complete section (B) |
| c) a recognised club | <input type="checkbox"/> please complete section (B) |
| d) a charity | <input type="checkbox"/> please complete section (B) |
| e) the proprietor of an educational establishment | <input type="checkbox"/> 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 ☐ please complete section (B)
- h) the chief officer of a police force in England & Wales ☐ please complete section (B)

*If you are applying as a person described in (a) or (b), please confirm:

- I am carrying on or proposing to carry on a business which involves the premise for licensable activities, or: ☒
- I am making the application pursuant to a
 - statutory function or Please tick ☒ Yes
 - a function discharged by virtue of Her Majesty's prerogative ☐

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr ☐

Mrs ☒

Miss ☐

Ms ☐

Other title ☐
(Rev, Dr, etc)

Surname:

TURA

First Name:

KULTIT

I am 18 years old or over.

Please tick ☒ Yes

Current postal
address if different
from premises
address

58 TALBOT ROAD

Post Town

LEEDS

Postcode

LS8 1AH

Daytime contact telephone number

07767472818

E-mail address
(optional)

SECOND INDIVIDUAL APPLICANT (IF APPLICABLE)

Mr ☐

Mrs ☐

Miss ☐

Ms ☐

Other title ☐
Rev, Dr, etc)

Surname:

First Name:

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

**E-mail address
(optional)**

(B) OTHER APPLICANTS

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

Name:
Address:
Registered number (where applicable)
Description of applicant (for example partnership, company, unincorporated association etc)
Telephone number (if any)
Email address (optional)

Part 3 - Operating Schedule

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	

If more than 5000 people are expected to attend the premises at any one time, please state the number expected to attend.

N/A

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

TERRACED PREMISES WITH CAR
PARK PREVIOUSLY OPERATES
AS PUBLIC HOUSE AS
'WAGON & HORSES'

What licensable activities do you intend to carry on from the premises?
(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment:

- | | Please tick ✓ Yes |
|--|-------------------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input checked="" type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g)
(if ticking yes, fill in box H) | <input type="checkbox"/> |

Provision of entertainment facilities for:

- | | |
|--|--------------------------|
| i) making music (if ticking yes, fill in box I) | <input type="checkbox"/> |
| j) dancing (if ticking yes, fill in box J) | <input type="checkbox"/> |
| k) entertainment of a similar description to that falling within (i) or (j)(if ticking yes, fill in box K) | <input type="checkbox"/> |

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

☒

M) Supply of alcohol (if ticking yes, fill in box M)

☒

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

A

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

B

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

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details here (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			State any seasonal variations for indoor sporting events (please read guidance note 4)
Wed			
Thurs			Non standard timings. Where you intend to use the premises indoor sporting events at different times to those listed in the column on the left, please list (please read guidance note 5).
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainment Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or out doors or both - Please tick [Y] (Please read guidance note 2).	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish		
Mon			Please give further details here (please read guidance note 3)	
Tue				
Wed			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)	
Thurs				
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

Live Music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both - Please tick [Y] (Please read guidance note 2).	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish		
Mon			<u>Please give further details here</u> (please read guidance note 3)	
Tue				
Wed			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 4)	
Thurs				
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 5).	
Sat				
Sun				

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both - Please tick [Y] (Please read guidance note 2).	Indoors <input checked="" type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish		
Mon	11	23.00	<u>Please give further details here</u> (please read guidance note 3)	
Tue	11	23.00		
Wed	11	23.00	<u>State any seasonal variations for playing recorded music</u> (please read guidance note 4)	
Thurs	11	23.00		
Fri	11	23.00	<u>Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5).	
Sat	11	23.00		
Sun	11	23.00		

G

Performance of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both - Please tick [Y] (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 performance of dance (please read guidance note 4)	
Thurs				
Fri			Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list (please read guidance note 5).	
Sat				
Sun				

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing	
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both - Please tick [Y] (Please read guidance note 2).	Indoors <input type="checkbox"/>
Mon				Outdoors <input type="checkbox"/>
Tue			Please give further details here (please read guidance note 3)	Both <input type="checkbox"/>
Wed				
Thurs			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)	
Fri				
Sat			Non standard timings. Where you intend to use the premises for 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).	
Sun				

Provision of facilities for making music Standard days and timings (please read guidance note 6)			Please give a description of the facilities for making music you will be providing	
Day	Start	Finish	Will the facilities for making music be indoors or outdoors or both - Please tick [Y] (Please read guidance note 2).	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)	
Tue				
Wed				
Thurs			State any seasonal variations for the provision of facilities for making music (please read guidance note 4)	
Fri				
Sat			Non standard timings. Where you intend to use the premises for 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).	
Sun				

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both - Please tick [Y] (Please read guidance note 2).	
Day	Start	Finish	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>	
Mon			Please give further details here (please read guidance note 3)	
Tue				
Wed			State any seasonal variations for providing dancing facilities (please read guidance note 4)	
Thurs				
Fri			Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list (please read guidance note 5).	
Sat				
Sun				

K

Provision of facilities for entertainment of a similar description to that falling within I or J Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment facility you will be providing	
Day	Start	Finish	Will the entertainment facility be indoors or outdoors or both - Please tick [Y] (Please read guidance note 2).	
Mon			Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Tue			Please give further details here (please read guidance note 3)	
Wed				
Thurs			State any seasonal variations for the Provision of facilities for entertainment of a similar description to that falling within J or K (please read guidance note 4)	
Fri				
Sat			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).	
Sun				

L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both - please tick [Y] (Please read guidance note 2)	
Day	Start	Finish	Indoors	<input type="checkbox"/>
Mon			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Tue			Please give further details here (please read guidance note 3)	
Wed				
Thurs			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)	
Fri				
Sat			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).	
Sun				

M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption (Please tick [Y]) Please read guidance note 7).	On the premises <input checked="" type="checkbox"/> Off the premises <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)	
Mon	11	23		
Tue	11	23		
Wed	11	23		
Thurs	11	23		
Fri	11	23		
Sat	11	23		
Sun	11	23	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).	

State the name and details of the individual whom you wish to specify on the licence as premises supervisor	
Name	KULTIT TURA
Address	58 TALBOT ROAD
Postcode	LS 8 1A11
Personal Licensing Number (if known)	
Issue Licensing Authority (if known)	LEEDS

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)

N/A

O

Hours premises are open to the public

Standard days and timings
(please read guidance note 6)

Day	Start	Finish
Mon	11	23:30
Tue	11	23:30
Wed	11	23:30
Thurs	11	23:30
Fri	11	23:30
Sat	11	23:30
Sun	11	23:30

State any seasonal variations (please read guidance note 4)

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

P

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

a) General—all four licensing objectives (b, c, d, e) (please read guidance note 9)

PERSONAL LICENCE HOLDER OR DESIGNATED
PERSON ON PREMISES AT ALL TIMES
TRAINING TO ALL STAFF
CCTV INSTALLATION

b) The prevention of crime & disorder

CCTV system installed.
door staff at peak times
ADEQUATE LIGHTING
AGE/ID PROOF

c) Public safety

REGULAR SAFETY INSPECTION
FIRST AID PROVISION

d) The prevention of public nuisance

LITTER BINS TO BE PROVIDED
NOTICES RE LITTER & NOISE

e) The protection of children from harm

PROOF OF AGE REQUIREMENTS
STAFF TRAINING

- Please tick ✓ Yes

Part 4--Signatures (please read guidance note 10)

Signature: Harjit K Tura
Date: 13/10/09
Capacity: APPLICANT

Signature: _____

Date: _____

Capacity: _____

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

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

Consent of individual to being specified as premises supervisor

I [KULTIT TURA] of
full name of prospective premises supervisor

[58 TALBOT ROAD LEEDS LS2 1AD]
home address of prospective premises supervisor

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

[LIQUOR LICENCES - PREMISES] by [KULTIT TURA]
type of application name of applicant

relating to a premises licence [NEW] for
number of existing licence, if any

[THE UNITED BAR 82 ELLAND ROAD LEEDS LS11 0AD] and any
name and address of premises to which the application relates
premises licence to be granted or varied in respect of this application made by

[KULTIT TURA] concerning the supply of alcohol at
name of applicant

[THE UNITED BAR 82 ELLAND ROAD LEEDS]. I also
name and address of premises to which application relates
confirm that I am applying for, intend to apply for or currently hold a personal licence,
details of which I set out below.

Personal licence number [PER/05203/09]
insert personal licence number, if any

Personal licence issuing authority
LEEDS
[]
insert name and address and telephone number of personal licence issuing authority, if any

[Kultit Kura] signed
KULTIT KURA

[13/11/09] name (please print)

.....dated

APPENDIX C

Digwa Cousins
D&C Solicaors
277 Roundhay Road
Harehills
Leeds
LS8 4HS



Health and Safety Services

Leeds City Council
Millshaw Park Way
Churwell
Leeds
LS11 0LS

Contact: MS C A Copley
Tel: 0113 3950686
Fax: 0113 247 6282
Claire.copley@leeds.gov.uk
Your reference: RSD/TURA
Our reference:
3 December 2009

Dear Sir/ madam

Licensing Act 2003
Premises : The United Bar , 82 Elland Road Leeds.

Thank you for submitting your application for the above premises.

Health and Safety Services are of the opinion that your application contains insufficient information about how you intend to meet the licensing objective/s.

We therefore confirm that we are submitting a formal representation against your application on the grounds of **insufficient information on public safety measure**.

However, Health and Safety Services are of the opinion that the said objectives could be met should you be prepared to incorporate certain identified measures within your operating schedule.

Please find enclosed a document which at Part 1 contains the suggested measures which this authority considers are proportionate and appropriate to the nature of your application.

Should you be in agreement with the suggested measures then please signify this by completing and signing Part 2 of the enclosed form and return the complete document to this office as soon as possible, but no later than **14 December 2009**.

Upon receipt of your consent at Part 2, it will be taken that you signify your wishes for the licensing authority to amend your operating schedule to incorporate the proposed measures.

Alternatively should you disagree with the proposed measures, then please complete Part 3 and again return the complete document to this office as soon as possible, but no later than the stated date.



PART 1 - to be completed by the Responsible Authority

Health and Safety Service – Proposed controlled measures under the Licensing Act 2003

Name & Address of Premises : The United Bar , 82 Elland Road Leeds.

Having considered the application under the Licensing Act 2003 for the above premises, the Health and Safety Service considers that the following measures are proportionate and necessary in order to promote the following licensing objective/s:

- Public safety

Measures proposed:

No	Potential Control Measures
	Public Safety :- Management Arrangements
	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.
	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.
	Public Safety :- Fire/Electrical Safety
	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. 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.
	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: a) Each socket-outlet circuit shall be protected by a residual current device having a rated residual operating current not exceeding 30mA. or b) Each individual socket-outlet shall be protected by an integral residual current device having a rated residual operating current not exceeding 30mA. The current operation of all residual current devices shall 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.
	Public Safety :- General Housekeeping
	A written spillage policy will be kept to ensure spillages are dealt with in a timely and safe manner
	Public Safety :- First Aid
	A suitably trained First Aider or appointed person will be provided at all times when the premises are open.
	Adequate and appropriate First Aid equipment and materials will be available on the premises.
	Public Safety :- Special Effects
	No strobes, lasers, smoke machines or any other special effects, will be used at the

PART 2 – to be completed by the applicant or applicant's representative

Consent for proposed controlled measures under the Licensing Act 2003

Name & Address of Premises : The United Bar , 82 Elland Road Leeds.

I/~~We~~..... KURJIT KAUR TORA.....

confirm that I am / ~~we~~ are the applicant / the applicants representative (delete as appropriate) for the premises as stated above.

In signing this document I/~~we~~ agree with the measures proposed by the Health and Safety Service, and we provide our consent for the Licensing Authority to incorporate the said measures into the operating schedule for the stated premises.

Signed :

Kurjit Tora

Dated :

7/12/09

Please return this document to:

INSPECTOR NAME: C A Copley

Health & Safety Services

Leeds City Council

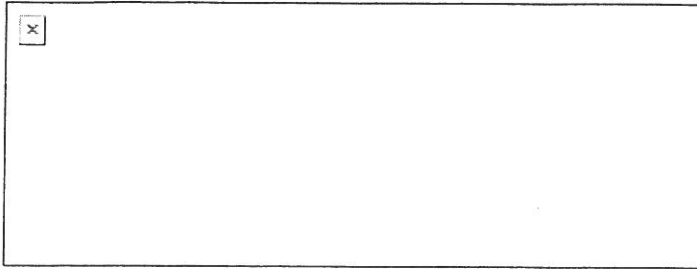
Millshaw Park Way

Churwell

Leeds LS11 0LS

Fax: 0113 247 6282

RECEIVED

**Leeds District Licensing Department****Licensing Department**

Millgarth Police Station
Millgarth Street
Leeds
LS2 7HX

Tel: 0113-2414023

Fax: 0113-2413123

Email:

catherine.arkle@westyorkshire.pnn.police.uk

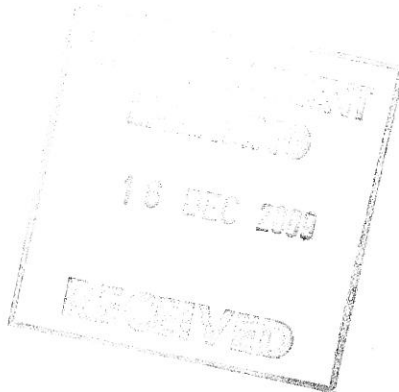
Website:

Your ref:

Our ref:

16th December 2009

Kuljit Tura
58, Talbot Road
Leeds
LS8 1AH



cc. Entertainment Licensing Section, Leeds City Council, Civic Hall, Leeds, LS1 1UR
Digwa Cousins Solicitors, 277, Roundhay Road, Harehills, Leeds, LS8 4HS

RE: THE UNITED BAR, 82, ELLAND ROAD, LEEDS, LS11 0AB
NEW PREMISES LICENCE – LICENSING ACT 2003:
POLICE – LETTER OF REPRESENTATION – ‘QUALIFIED’ OBJECTION:

Thank you for submitting your application for the above premises, received at the address above on 23rd November 2009.

West Yorkshire Police are of the opinion that your application contains insufficient information about how you intend to meet the licensing objectives.

We therefore confirm that we are submitting a formal representation against your application on the grounds of:-

1. the prevention of crime & disorder
2. the prevention of public nuisance, and
3. the protection of children from harm.

However, West Yorkshire Police are also of the opinion that the said objectives could be met should you be prepared to incorporate certain identified measures within your operating schedule as conditions, in **addition** to what you may have offered in your application.

Please find enclosed a document which at **Part 1** contains the suggested measures which this authority considers are proportionate and appropriate to the nature of your application.

Should you be in agreement with the suggested measures then please signify this by completing and signing **Part 2** of the enclosed form and return the complete document to this office as soon as possible, but no later than asap.

NOT PROTECTIVELY MARKED

Upon receipt of your consent at **Part 2**, it will be taken that you signify your wishes for the licensing authority to amend your operating schedule to incorporate the proposed measures as conditions.

Alternatively should you disagree with the proposed measures, then please complete **Part 3** and again return the complete document to this office as soon as possible, but no later than asap.

PART 1 - to be completed by the Responsible Authority:

West Yorkshire Police propose the following control measures / conditions under the Licensing Act 2003 (in addition to those that you may have already offered), for the premises:-

**THE UNITED BAR,
82, ELLAND ROAD,
LEEDS,
LS11 0AB**

Having considered the application under the Licensing Act 2003 for the above premises, West Yorkshire Police considers that the following measures are relevant, proportionate and necessary in order to promote the following licensing objectives:-

- the prevention of crime & disorder
- the prevention of public nuisance
- the protection of children from harm

Measures / Additional measures proposed:

- ✍ A suitable CCTV system will be maintained and be operational on the premises at all times when licensed activities are being carried out;
- ✍ CCTV security footage will be made secure and retained for a minimum period of 31 days time to the satisfaction of WYP;
- ✍ 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.
- ✍ 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;
- ✳ The PLH/DPS and all members of staff will ask for proof of age from any person appearing to be under the age of 21 who attempts to purchase alcohol at the premises;
- ✍ On Leeds Utd home match days doorstaff shall be on duty at the premises;
- ✍ 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;
- ✍ 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;
- ✳ The Incident Report Register will be produced for inspection immediately on the request of an authorised officer;

NOT PROTECTIVELY MARKED

NOT PROTECTIVELY MARKED

- * Plastic or toughened polycarbonate (or similar) glasses/bottles shall be used on all Leeds Utd home match days and glassware will not be taken from the premises at any time;**
- 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;**
- The PLH/DPS shall restrict opening hours upon reasonable request from West Yorkshire Police on certain problematic Leeds United match days.**

West Yorkshire Police are satisfied that the proposed measures are not adequately dealt with by other legislation.

By signing the declaration enclosed overleaf at **Part 2**, the applicant agrees to incorporate the proposed measures as conditions within the Operating Schedule for the said premises.

Upon the satisfactory completion of the declaration, West Yorkshire Police will provide notice to the Licensing Authority that our representation is withdrawn in accordance with schedule 10(a) of the Licensing Act 2003 (Hearings) Regulations 2005.

Cath Arkle
PC 5548
City & Holbeck Licensing Officer

Date:

NOT PROTECTIVELY MARKED

NOT PROTECTIVELY MARKED**PART 2 – to be completed by the applicant or applicant's representative:**

Consent for all proposed control measures / conditions under the Licensing Act 2003.

Name & Address of Premises:

THE UNITED BAR,
82, ELLAND ROAD,
LEEDS,
LS11 0AB

I / We KULTI? Kaur Tura

confirm that I am / ~~we are~~ the applicant / ~~the applicants representative~~ (delete as appropriate) for the premises as stated above.

In signing this document:-

- I / ~~we~~ agree with the measures proposed by West Yorkshire Police,
- I / ~~we~~ provide our consent for the Licensing Authority to incorporate the said measures into the operating schedule for the stated premises as conditions, and furthermore,
- I / ~~we~~ confirm the premises will then operate in accordance with those conditions agreed to.

Signed:

Kuljit Tura

Dated:

17/12/09

NOT PROTECTIVELY MARKED



Mrs Kuljit Tura
58 Talbot Road
Moortown
Leeds
LS8 1AH

Environmental Protection Team
Leeds City Council
Kent Road
Pudsey
Leeds
LS28 9BN

Contact: Mrs Rachael Teale
Tel: 0113 214 6247
Fax: 0113 214 6250
rachael.teale@leeds.gov.uk

Your reference:

Our reference: PREM/02819
16 December 2009

APPLICATION FOR LICENSED ACTIVITY

PART A

Thank you for submitting your application for licensed activities at:

NAME OF VENUE: THE UNITED BAR

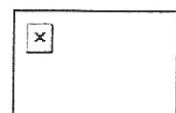
ADDRESS: 82 ELLAND ROAD, HOLBECK, LEEDS, LS11 0AB

We write to inform you we shall be objecting to your application and a copy of this letter will be sent to the licensing section of the Authority.

Leeds City Council's Health and Environmental Action Services are of the opinion your application contains insufficient information about how you intend to meet the licensing objective relating to public nuisance. Listed below are the particular items which we consider need incorporating into your operating schedule in order to meet the said licensing objectives.

If you are willing to adopt the measures to prevent public nuisance suggested in this letter then we shall withdraw our objection.

We also wish to inform you of your obligations under The Licensing Act 2003 and to assist you in addressing the issues raised in this letter. An application for conversion of an existing licence, variation of an existing licence or a new licence must promote the Licensing Objectives as prescribed in Section 4 (2) of the Act. These objectives are the prevention of crime and disorder, public safety, the prevention of public nuisance and the protection of children from harm. Environmental Health are primarily concerned with the prevention of public nuisance. However the onus is on applicants to provide information on any additional steps that they will take to promote the Licensing Objectives in relation to their applications for variations.



Should you agree with the Health and Environmental Action Services assessment of measures necessary to prevent public nuisance appropriate to your application please signify this in the declaration in part B of this letter and then return it to the Environmental Protection Team.

The premises is situated on Elland Road with commercial premises to the rear and residential premises to the west. The nearest noise sensitive premises is approximately 25 meters away. The application is for the sale of alcohol and provision of recorded music. The proposed opening hours of the premises are 11.00 until 23.30.

Under the previous ownership, this department received complaints concerning litter and noise from deliveries in the interest of amenity of the area the following conditions are recommended.

Noise and Vibration

1. Noise from the premises shall be inaudible at the nearest noise sensitive premises (i) after 23.00 hours and (ii) at any time when entertainment, as defined by paragraph 2 of schedule 1 of the Licensing Act 2003, takes place on more than 30 occasions per year.
2. No bottles shall be placed in the external receptacle after 23.00 hours to minimise noise disturbance to neighbouring properties.
3. Deliveries and collections should not be made between the hours of 22.00 and 07.00 the following day.
4. There shall be no external loudspeakers.

Litter

5. The PLH/DPS shall ensure that litter arising from people using the premises is cleared away regularly and that promotional materials such as flyers do not create litter.

Yours faithfully

Mrs Rachael Teale
Senior Environmental Health Officer

PART B

On behalf of (specify company name):

I am the applicant / representative authorised by the applicant (delete as appropriate)

In signing this document I agree with the measures to prevent public nuisance suggested by Leeds City Council's Health and Environmental Action Services and will operate in accordance with those measures at premises known as

Name of venue: The United Bar

(delete as appropriate)

and I would request that the Local Authority accept this letter signifying my wishes to incorporate the measures to prevent public nuisance into the operating schedule submitted as part of my application should it be granted, or

- Indicate alternative :

Signed	
Date	

Print Name	
Full Address	
Postcode	
Telephone number:	Mobile:

Please return this document to:

Environmental Protection Team
Leeds City Council
Kent Road
Pudsey
Leeds
LS28 9BN

