## **APPENDIX B**



SE3

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

## **Application For The Transfer Of A Sex Establishment Licence**

Local Government (Miscellaneous Provisions) Act 1982 As Amended

## Please read the following instructions

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.

Sect	ion 1 -	APPLICANT DETAILS				
1.	Is the	application for a:				
	$\boxtimes$	Sexual Ent. Venue		Sex Shop		Sex Cinema
Sect	ion 2 -	APPLICANT DETAILS				
2.	Is the	applicant:				
	☐ An	individual			(please answer qu	uestions 3 and 4)
	$\boxtimes$ A c	company or other corpo	rate boo	dy	(please answer qu	uestions 5 to 9)
	☐ A p	partnership or other uni	ncorpora	ated body	(please answer qu	uestions 10 to 12)
Indi	vidual A	Application				
3.	Full na	ame of applicant:				
	Forme	er or previous names:				
	Home	address:				
	Doot t				Doct code:	
	Post to				Post code:	
	•	none numbers:				
		of Birth:				
4.		lere any other persons i hose stated in question				premises/business other sses:
		ή				
Ca. 120						
		r other corporate body				
5.		of applicant (company LE DOOR HOLDINGS LII				
	Addre	ss of registered or princ	cipal offi	ce:		

	Post town: Post code:
	Registration number: 14553223
6.	Name and address of the applicant's directors and company secretary (please use additional sheet):
	DIRECTOR - NICHOLAS QUADRINI
7.	Are there any other persons responsible for the management of the premises/business other than those stated in question 5 and 6? Please state their names and addresses:
8.	State the names of all persons with a shareholding greater than 10% in the business:
	NICHOLAS QUADRINI
9.	Is the business a wholly owned subsidiary or another company or corporate body? If so state the name, place of registration and identity of the parent company's director and company secretary.
	NO
Dt-	
	nership or other incorporated body
10.	Name and address of applicant:
	N/A
11.	Name and address of applicant's partners:
	N/A
12.	Are there any other persons responsible for the management of the premises/business other than the partners? Please state their names:

	N/A	
All a	pplicants	
13.	a. Has the applicant been known by any other name?	Yes ☐ No 🏻
	b. Has the applicant ever been convicted of a criminal offence?	Yes □ No ⊠
	c. Has the applicant ever been refused a sex establishment licence?	Yes □ No ⊠
	d. Has the applicant even had a sex establishment licence revoked?	Yes □ No ⊠
	e. Has the applicant ever been served with a winding up petition?	Yes □ No ⊠
	If the answer to any of these questions is yes, please provide details:	
14.	Applicants' trading address or head office (other than the premises):	
15.	Will the business for which this licence is sought be carried on for the benefit	Yes 🗌 No 🖂
	of a person other than the applicant?	
	If the answer is yes, state the name, address, place of registration, registered	
	the identity of all directors, company secretary and those with a greater than 1 shareholding.	0%
16.	Does the applicant operate any other sex establishments, licensed or otherwise	e? Please
	state name, address, and type of sex establishment of each.	
	NO	

Sect	ion 3 - OPERATING SCHEDULE
17.	Please state the name and address of the business:
	PURPLE DOOR 5 YORK PLACE LEEDS LS1 2DR
18.	Has the applicant entered into any written or oral agreement in connection with the business, for example a management agreement, partnership agreement or profit share arrangement? Please provide details
19.	Please provide details of any lender, mortgage or others providing finance:
20.	Please provide details of any merchandising agreements:
Prei	mises management
21.	Please state the name of the person who will be in day to day control of the premises (the manager).
	a. Will the manager be based at the premises Yes $oximes$ No $oximes$
	b. Will the management of the premises be the manager's sole occupation Yes $oxtimes$ No $oxtimes$
22.	Who will be in control of the premises in the manager's absence (relief manager)?
	a. Will the relief manager be based at the premises in the absence of the $$ Yes $\boxtimes$ No $\square$ manager?
	If you have ticked no, please provide details
	ther information
23.	Please set out any further information you wish the authority to take into account.
	N/A

24,	Is there any information on this form you do not wish to be seen by members of the public? If so state which information and the reasons why you do not wish it to be seen.	
	PERSONAL DETAILS OF APPLICANT AND MANAGEMENT TO BE WITHHELD FOR SECURITY REASONS.	
Section 4 - CHECKLIST & ENCLOSURES		
Enclosures		

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Enclosures	
I have made or enclosed payment of the fee	$\boxtimes$
I have enclosed a completed form SE5 for each person named in questions 3 to 11	$\boxtimes$
I have enclosed a completed form SE5 for the Manager and Relief Manager	$\boxtimes$
Advertisement	
I declare that I have served a copy of this application on West Yorkshire Police.	$\boxtimes$
I declare that a public notice advertising this application has today been displayed upon the proposed premises where it may be conveniently read by the public and will remain thereon for a period of 21 days. A copy of the notice (SE6) and the standard declaration (SE7) is enclosed.	

A copy of the relevant press edition will be forwarded to Entertainment Licensing	
I understand that if I do not comply with the above requirements my application will be rejected	
Leeds City Council is under a duty to protect the public funds it administers, and to this enemy use the information you have provided on your application for the prevention and determined of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.	
Any person who, in connection with an application for a grant, renewal, variation or transfer sex establishment licence, makes a false statement which he knows to be false in any mater respect of which he does not believe to be true is guilty of an offence and liable on summary conviction to a fine not exceeding £20,000	ial
Section 5 – SIGNATURES	
Signature of applicant or applicant's solicitor or other duly authorised agent. If signing on the applicant please state in what capacity.	behalf of
Signature	
Date25.03.2024	
Capacity SOLICITOR AND AGENT FOR THE APPLICANT	
Contact Name (where not previously given) and address for correspondence associated wit application	:h this
Post town Post code	
Telephone number (if any)	
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)	
Section 6 – Consent of Existing Licence Holder	

I declare that within seven days of the date of this application a public notice advertising

this application will be publicised in the legal notices column of the local press.

I, RUBY MAY (2) LIMITED the current licence holder,

hereby give my consent for the licence to be transferred to

PURPLE DOOR HOLDINGS LIMITED with immediate effect.

Signature of the existing licence holder or solicitor or other duly authorised agent. If signing on behalf of the applicant please state in what capacity.		
Signature		
Date	20.03.2023	
Capacity	SOLICITOR AND AGENT FOR THE EXISTING LICENCE HOLDER	
Contact Name (where not previously given) and address for correspondence associated with this application		
Post town	Post code	
Telephone number (if any)		

## **Guidance Notes**

1. Please return this completed application form to:

Entertainment Licensing Department Civic Hall LEEDS LS1 1UR

- 2. Please make cheques/postal orders payable to Leeds City Council.
- 3. The fee can be found in a separate guidance note.
- 4. The applicant is responsible for serving a copy of this application on the **Licensing Officer**, **West Yorkshire Police**, **Leeds District Headquarters**, **Elland Road**, **Leeds**, **LS11 8BU**
- 5. Copies of this application may be forwarded to West Yorkshire Fire Service who will assess the application and inspect the premises, if necessary, to provide observations in relation to the structure, safety and suitability of the building for the purpose intended.
- 6. Furthermore, details of this application will be forwarded to the local Ward Members.

For further assistance or information please contact Entertainment Licensing on 0113 378 5029.