



**PREM1**

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.

**I/We** *T.J. MORRIS LIMITED* **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

HOME BARGAINS, CENTRE WEST RETAIL PARK, STANNINGLEY ROAD, LEEDS, LS12 3AS

Telephone number of premises (if any)

[REDACTED]

Non-domestic rateable value of premises

£125001

**Part 2 – Applicant Details**

Please state whether you are applying for a premises licence as:

- |   | Please tick as appropriate          |                             |
|---|-------------------------------------|-----------------------------|
| a) an individual or individuals*                      | <input type="checkbox"/>            | please complete section (A) |
| b) a person other than an individual*                 | <input checked="" type="checkbox"/> |                             |
| i. as a limited company/limited liability partnership | <input type="checkbox"/>            | please complete section (B) |
| ii. as a partnership (other than limited liability)   | <input type="checkbox"/>            | please complete section (B) |
| iii. as an unincorporated association or              | <input type="checkbox"/>            | please complete section (B) |
| iv. other (for example a statutory corporation)       | <input type="checkbox"/>            | please complete section (B) |
| c) a recognised club                                  | <input type="checkbox"/>            | please complete section (B) |
| d) a charity  | <input type="checkbox"/>            | please complete section (B) |

- e) the proprietor of an educational establishment please complete section (B)
- f) a health service body please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales  please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that part) in an independent hospital in England please complete section (B)
- h) the chief officer of police of a police force in England and Wales please complete section (B)

\*If you are applying as a person described in (a) or (b) please confirm (by ticking yes to one box below:

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or **X**
- I am making the application pursuant to a
  - statutory function or
  - a function discharged by virtue of HIS Majesty's prerogative

**(A) INDIVIDUAL APPLICANTS** (fill in as applicable)

Full Name \_\_\_\_\_

Please tick yes

Date of Birth

I am 18 years old or over

Nationality

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone number

Email address (optional)

Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service (please see note 15 for information).

**SECOND INDIVIDUAL APPLICANT** (if applicable)

Full Name

Please tick yes

Date of Birth

I am 18 years old or over

Nationality

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone number

Email address (optional)

Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service (please see note 15 for information).

**(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<br>T.J. MORRIS LIMITED  |
| Address<br>T.J. MORRIS LIMITED, AXIS BUSINESS PARK, PORTAL WAY, GILLMOSS, LIVERPOOL, L11 0JA                             |
| Registered number (where applicable)<br>01505036   |
| Description of applicant (for example, partnership, company, unincorporated association etc.)<br>PRIVATE LIMITED COMPANY |
| Telephone number (if any)<br>[REDACTED]  |
| E-mail address (optional)<br>[REDACTED]  |

**Part 3 Operating Schedule**

When do you want the premises licence to start?

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

|   |
|---|
| Please give a general description of the premises (please read guidance note 1)<br>RETAIL STORE |
|---|

If 5,000 or more people are expected to attend the premises

at any one time, please state the number expected to attend

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

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 late night refreshment** (if ticking yes, fill in box I)

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

✓

**In all cases complete boxes K, L and M**

# A

| <b>Plays</b><br>Standard days and timings<br>(please read guidance note 7) |       |        | <b>Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)</b>   | Indoors  |  |
|--|-------|--------|--|----------|--|
|  |       |        |  | Outdoors |  |
|  |       |        |  | Both     |  |
| Day  | Start | Finish |  |          |  |
| Mon  |       |        | <b>Please give further details here (please read guidance note 4)</b>  |          |  |
|  |       |        |  |          |  |
| Tue  |       |        |  |          |  |
|  |       |        |  |          |  |
| Wed  |       |        | <b>State any seasonal variations for performing play (please read guidance note 5)</b>   |          |  |
|  |       |        |  |          |  |
| Thur   |       |        |  |          |  |
|  |       |        |  |          |  |
| Fri  |       |        | <b>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 6)</b> |          |  |
|  |       |        |  |          |  |
| Sat  |       |        |  |          |  |
| Sun  |       |        |  |          |  |

# B

| <b>Films</b><br>Standard days and timings<br>(please read guidance note 7) |       |        | <b>Will the exhibition of a films take place indoors or outdoors or both – please tick (please read guidance note 3)</b>  | Indoors  |  |
|--|-------|--------|---|----------|--|
|  |       |        |   | Outdoors |  |
|  |       |        |   | Both     |  |
| Day  | Start | Finish |   |          |  |
| Mon  |       |        | <b>Please give further details here (please read guidance note 4)</b>   |          |  |
|  |       |        |   |          |  |
| Tue  |       |        |   |          |  |
|  |       |        |   |          |  |
| Wed  |       |        | <b>State any seasonal variations for the exhibition of films (please read guidance note 5)</b>  |          |  |
|  |       |        |   |          |  |
| Thur   |       |        |   |          |  |
|  |       |        |   |          |  |
| Fri  |       |        | <b>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 6)</b> |          |  |
|  |       |        |   |          |  |
| Sat  |       |        |   |          |  |
| Sun  |       |        |   |          |  |

# C

|   |              |               |   |
|---|--------------|---------------|---|
| <b>Indoor sporting events</b><br>Standard days and timings<br>(please read guidance note 7) |              |               | <b>Please give further details</b> (please read guidance note 4)  |
| <b>Day</b>  | <b>Start</b> | <b>Finish</b> |   |
| <b>Mon</b>  |              |               | <b>State any seasonal variations for indoor sporting events</b> (please read guidance note 5)   |
|   |              |               |   |
| <b>Tue</b>  |              |               |   |
|   |              |               |   |
| <b>Wed</b>  |              |               | <b>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.</b> (please read guidance note 6) |
|   |              |               |   |
| <b>Thur</b>   |              |               |   |
|   |              |               |   |
| <b>Fri</b>  |              |               |   |
|   |              |               |   |
| <b>Sat</b>  |              |               |   |
|   |              |               |   |
| <b>Sun</b>  |              |               |   |
|   |              |               |   |

# D

|  |              |               |  |                 |  |
|--|--------------|---------------|--|-----------------|--|
| <b>Boxing or wrestling entertainment</b><br>Standard days and timings<br>(please read guidance note 7) |              |               | <b>Will the boxing or wrestling entertainment take place indoors or outdoors or both</b> – please tick (please read guidance note 3)   | <b>Indoors</b>  |  |
| <b>Day</b>   | <b>Start</b> | <b>Finish</b> |  | <b>Outdoors</b> |  |
| <b>Mon</b>   |              |               | <b>Please give further details here</b> (please read guidance note 4)  | <b>Both</b>     |  |
|  |              |               |  |                 |  |
| <b>Tue</b>   |              |               | <b>State any seasonal variations for the boxing or wrestling entertainment</b> (please read guidance note 5)   |                 |  |
|  |              |               |  |                 |  |
| <b>Wed</b>   |              |               |  |                 |  |
|  |              |               |  |                 |  |
| <b>Thur</b>  |              |               | <b>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.</b> (please read guidance note 6) |                 |  |
|  |              |               |  |                 |  |
| <b>Fri</b>   |              |               |  |                 |  |
|  |              |               |  |                 |  |
| <b>Sat</b>   |              |               |  |                 |  |
|  |              |               |  |                 |  |
| <b>Sun</b>   |              |               |  |                 |  |
|  |              |               |  |                 |  |



# E

|   |              |               |   |                 |  |
|---|--------------|---------------|---|-----------------|--|
| <b>Live music</b><br>Standard days and timings<br>(please read guidance note 7) |              |               | <b>Will the performance of live music take place indoors or outdoors or both – please tick</b> (please read guidance note 3)  | <b>Indoors</b>  |  |
|   |              |               |   | <b>Outdoors</b> |  |
|   |              |               |   | <b>Both</b>     |  |
| <b>Day</b>  | <b>Start</b> | <b>Finish</b> | <b>Please give further details here</b> (please read guidance note 4)   |                 |  |
| <b>Mon</b>  |              |               |   |                 |  |
| <b>Tue</b>  |              |               | <b>State any seasonal variations for the performance of live music</b> (please read guidance note 5)  |                 |  |
| <b>Wed</b>  |              |               |   |                 |  |
| <b>Thur</b>   |              |               | <b>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.</b><br>(Please read guidance note 6) |                 |  |
| <b>Fri</b>  |              |               |   |                 |  |
| <b>Sat</b>  |              |               |   |                 |  |
| <b>Sun</b>  |              |               |   |                 |  |
|   |              |               |   |                 |  |

# F

|   |              |               |   |                 |  |
|---|--------------|---------------|---|-----------------|--|
| <b>Recorded music</b><br>Standard days and timings<br>(please read guidance note 7) |              |               | <b>Will the playing of recorded music take place indoors or outdoors or both – please tick</b> (please read guidance note 3)  | <b>Indoors</b>  |  |
|   |              |               |   | <b>Outdoors</b> |  |
|   |              |               |   | <b>Both</b>     |  |
| <b>Day</b>  | <b>Start</b> | <b>Finish</b> | <b>Please give further details here</b> (please read guidance note 4)   |                 |  |
| <b>Mon</b>  |              |               |   |                 |  |
| <b>Tue</b>  |              |               | <b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 5)  |                 |  |
| <b>Wed</b>  |              |               |   |                 |  |
| <b>Thur</b>   |              |               | <b>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.</b><br>(please read guidance note 6) |                 |  |
| <b>Fri</b>  |              |               |   |                 |  |
| <b>Sat</b>  |              |               |   |                 |  |
| <b>Sun</b>  |              |               |   |                 |  |
|   |              |               |   |                 |  |

## G

|   |              |               |   |                 |  |
|---|--------------|---------------|---|-----------------|--|
| <b>Performance of dance</b><br>Standard days and timings<br>(please read guidance note 7) |              |               | <b>Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)</b>   | <b>Indoors</b>  |  |
|   |              |               |   | <b>Outdoors</b> |  |
|   |              |               |   | <b>Both</b>     |  |
| <b>Day</b>  | <b>Start</b> | <b>Finish</b> | <b>Please give further details here (please read guidance note 4)</b>   |                 |  |
| <b>Mon</b>  |              |               |   |                 |  |
| <b>Tue</b>  |              |               | <b>State any seasonal variations for the performance of dance (please read guidance note 5)</b>   |                 |  |
| <b>Wed</b>  |              |               |   |                 |  |
| <b>Thur</b>   |              |               | <b>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 6)</b> |                 |  |
| <b>Fri</b>  |              |               |   |                 |  |
| <b>Sat</b>  |              |               |   |                 |  |
| <b>Sun</b>  |              |               |   |                 |  |

## 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 7) |              |               | <b>Please give a description of the type of entertainment you will be providing</b>   |                 |  |
|   |              |               | <b>Will the entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)</b>  | <b>Indoors</b>  |  |
|   |              |               |   | <b>Outdoors</b> |  |
|   |              |               |   | <b>Both</b>     |  |
| <b>Day</b>  | <b>Start</b> | <b>Finish</b> | <b>Please give further details here (please read guidance note 4)</b>   |                 |  |
| <b>Mon</b>  |              |               |   |                 |  |
| <b>Tue</b>  |              |               | <b>State any seasonal variations for the entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)</b>  |                 |  |
| <b>Wed</b>  |              |               |   |                 |  |
| <b>Thur</b>   |              |               | <b>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 6)</b> |                 |  |
| <b>Fri</b>  |              |               |   |                 |  |
| <b>Sat</b>  |              |               |   |                 |  |
| <b>Sun</b>  |              |               |   |                 |  |

**I**

|   |              |               |  |                 |  |
|---|--------------|---------------|--|-----------------|--|
| <b>Late night refreshment</b><br>Standard days and timings<br>(please read guidance note 7) |              |               | <b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)</b>   | <b>Indoors</b>  |  |
|   |              |               |  | <b>Outdoors</b> |  |
| <b>Day</b>  | <b>Start</b> | <b>Finish</b> | <b>Both</b>  |                 |  |
| <b>Mon</b>  |              |               |  |                 |  |
| <b>Tue</b>  |              |               |  |                 |  |
| <b>Wed</b>  |              |               | <b>Please give further details here (please read guidance note 4)</b>  |                 |  |
| <b>Thur</b>   |              |               |  |                 |  |
| <b>Fri</b>  |              |               | <b>State any seasonal variations for the provision of late night refreshment (please read guidance note 5)</b>   |                 |  |
| <b>Sat</b>  |              |               |  |                 |  |
| <b>Sun</b>  |              |               | <b>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 6)</b> |                 |  |

**J**

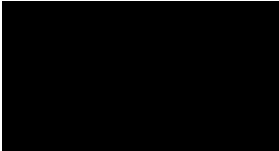
|  |              |               |  |                         |          |
|--|--------------|---------------|--|-------------------------|----------|
| <b>Supply of alcohol</b><br>Standard days and timings<br>(please read guidance note 7) |              |               | <b>Will the supply of alcohol be for consumption on or off the premises or both – please tick (please read guidance note 8)</b>  | <b>On the premises</b>  |          |
|  |              |               |  | <b>Off the premises</b> | <b>X</b> |
| <b>Day</b>   | <b>Start</b> | <b>Finish</b> | <b>Both</b>  |                         |          |
| <b>Mon</b>   | 06:00        | 00:00         |  |                         |          |
| <b>Tue</b>   | 06:00        | 00:00         |  |                         |          |
| <b>Wed</b>   | 06:00        | 00:00         | <b>State any seasonal variations for the supply of alcohol (please read guidance note 5)</b>   |                         |          |
| <b>Thur</b>  | 06:00        | 00:00         |  |                         |          |
| <b>Fri</b>   | 06:00        | 00:00         | <b>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 6)</b> |                         |          |
| <b>Sat</b>   | 06:00        | 00:00         |  |                         |          |
| <b>Sun</b>   | 06:00        | 00:00         |  |                         |          |

**State the name and details of the individual whom you wish to specify on the licence as the designated premises supervisor (please see declaration about the entitlement to work in the checklist at the end of the form)**

**Name**

GARY EGERTON

**Address**



**Personal licence number (if known)**



**Issuing licensing authority (if known)**



**K**

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 9)

**L**

|  |              |               |   |
|--|--------------|---------------|---|
| <b>Hours premises are open to the public</b><br>Standard days and timings<br>(please read guidance note 7) |              |               | <b>State any seasonal variations</b> (please read guidance note 5)  |
| <b>Day</b>   | <b>Start</b> | <b>Finish</b> | <b>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.</b><br>(please read guidance note 6) |
| <b>Mon</b>   | 06:00        | 00:00         |   |
|  |              |               |   |
| <b>Tue</b>   | 06:00        | 00:00         |   |
|  |              |               |   |
| <b>Wed</b>   | 06:00        | 00:00         |   |
|  |              |               |   |
| <b>Thur</b>  | 06:00        | 00:00         |   |
|  |              |               |   |
| <b>Fri</b>   | 06:00        | 00:00         |   |
|  |              |               |   |
| <b>Sat</b>   | 06:00        | 00:00         |   |
|  |              |               |   |

|            |       |       |  |
|------------|-------|-------|--|
| <b>Sun</b> | 06:00 | 00:00 |  |
|            |       |       |  |

# M

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

**a) General – all four licensing objectives (b, c, d, e) (please read guidance note 10)**

SEE ATTACHED PROPOSED CONDITIONS DOCUMENT

**b) The prevention of crime and disorder**

SEE ATTACHED PROPOSED CONDITIONS DOCUMENT

**c) Public safety**

SEE ATTACHED PROPOSED CONDITIONS DOCUMENT

**d) The prevention of public nuisance**

SEE ATTACHED PROPOSED CONDITIONS DOCUMENT

**e) The protection of children from harm**

SEE ATTACHED PROPOSED CONDITIONS DOCUMENT

## Checklist

Please tick to indicate agreement

- I have made or enclosed payment of the fee
- I have enclosed the plan of the premises
- I have sent copies of this application and the plan to responsible authorities and others where applicable **X**
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable
- I understand that I must now advertise my application
- I understand that if I do not comply with the above requirements my application will be rejected **X**

[Applicable to all individual applicants, including those in partnership which is not a limited liability partnership, but not companies or limited liability partnerships]

- I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15)

**IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.**

**IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION ASYLUM AND NATIONALITY ACT 2006 AND PURUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.**


**Part 4 – Signatures** (please read guidance note 11)

**Signature of applicant or applicant's solicitor or other duly authorised agent.** (See guidance note 12). **If signing on behalf of the applicant please state in what capacity.**

|             |   |
|-------------|---|
| Declaration | [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] <ul style="list-style-type: none"> <li>I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15).</li> <li>The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15).</li> </ul> |
| Signature   |   |
| Date        |   |
| Capacity    |   |

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

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

|   |                  |
|---|------------------|
| <b>Contact Name (where not previously given) and address for correspondence associated with this application</b> (please read guidance note 14) |                  |
| GOSSCHALKS LLP<br>GOSSCHALKS LLP<br>61 QUEENS GARDENS<br>HULL<br>HU1 3DZ  |                  |
| <b>Post town</b>  | <b>Post code</b> |
| <b>Telephone number (if any)</b>  |                  |
| <b>If you would prefer us to correspond with you by e-mail, your e-mail address (optional)</b>  |                  |
|    |                  |

**Notes for Guidance**

- Describe the premises, for example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies, you must include a description of where the place will be and its proximity to the premises.
- In terms of specific regulated entertainments please note that:
  - Plays: no licence is required for performances between 08:00 and 23.00 on any day, provided that the audience does not exceed 500.



- any entertainment taking place on the premises of the school where the entertainment is provided by or on behalf of the school proprietor; and
  - any entertainment (excluding films and a boxing or wrestling entertainment) taking place at a travelling circus, provided that (a) it takes place within a moveable structure that accommodates the audience, and (b) that the travelling circus has not been located on the same site for more than 28 consecutive days.
3. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
  4. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
  5. For example (but not exclusively), where the activity will occur on additional days during the summer months.
  6. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
  7. Please give timings in 24 hour clock (e.g. 16.00) and only give details for the days of the week when you intend the premises to be used for the activity.
  8. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
  9. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
  10. Please list here steps you will take to promote all four licensing objectives together.
  11. The application form must be signed.
  12. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
  13. Where there is more than one applicant, each of the applicants or their respective agent must sign the application form.
  14. This is the address which we shall use to correspond with you about this application.

**15. Entitlement to work/immigration status for individual applicants and applications from partnerships which are not limited liability partnerships:**

A licence may not be held by an individual or an individual in a partnership who is resident in the UK who:

- does not have the right to live and work in the UK; or
- is subject to a condition preventing him or her from doing work relating to the carrying on of a licensable activity.

Any premises licence issued in respect of an application made on or after 6 April 2017 will become invalid if the holder ceases to be entitled to work in the UK.

Applicants must demonstrate that they have an entitlement to work in the UK and are not subject to a condition preventing them from doing work relating to the carrying on of a licensable activity.

They do this in one of two ways:

- 1) by providing with this application copies or scanned copies of the documents which an applicant has provided, to demonstrate their entitlement to work in the UK (which do not need to be certified) as per information published on gov.uk and in guidance.
- 2) by providing their 'share code' to enable the licensing authority to carry out a check using the Home Office online right to work checking service (see below).

### **Home Office online right to work checking service**

As an alternative to providing a copy of original documents, stated above, applicants may demonstrate their right to work by allowing the licensing authority to carry out a check with the Home Office online right to work checking service.

To demonstrate their right to work via the Home Office online right to work checking service, applicants should include in this application their share code (provided to them upon accessing the service at <https://www.gov.uk/prove-right-to-work>) which, along with the applicant's date of birth, will allow the licensing authority to carry out the check.

In order to establish the applicant's right to work, the check will need to indicate that the applicant is allowed to work in the United Kingdom and is not subject to a condition preventing them from doing work relating to the carrying on of a licensable activity.

An online check will not be possible in all circumstances because not all applicants will have an immigration status that can be shared digitally. The Home Office online right to work checking service sets out what information and/or documentation applicants will need in order to access the service. Applicants who are unable to obtain a share code from the service should submit copy documents as set out above.

Your right to work will be checked as part of your licensing application and this could involve us checking your immigration status with the Home Office. We may otherwise share information with the Home Office. We may otherwise share information with the Home Office. Your licence application will not be determined until you have complied with this guidance.