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Licensing Section
Leeds City Council
Entertainment Licensing
Civic Hall
LEEDS
LS1 1UR

Our ref CRG/KB/URB001-1-0/1595

Your ref

26 February 2014

Dear Sir

La Boheme, Cross York Street - Premises Licence Transfer

We act on behalf of Urban Edge Group Limited and we are instructed to submit an application to transfer the premises licence in respect of the above named premises.

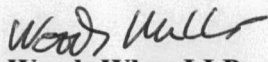
Accordingly, we enclose the following:

- 1 Notice of application
- 2 Consent form
- 3 Cheque in the sum of £33.50

If there are any issues with the completion of the attached forms which cause you concern or if you believe there is some omission, please contact Christopher Rees-Gay at this office.

We should be obliged if you would acknowledge safe receipt of this letter and enclosures.

Yours faithfully


Woods Whur LLP

Enc

Application to transfer 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 Urban Edge Group Limited
(Insert name of applicant)

apply to transfer the premises licence described below under section 42 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number PREM/02505/007

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description La Boheme, Cross York Street,	
Post town Leeds	Post code LS2 7EE
Telephone number at premises (if any)	

Please give a brief description of the premises Bar/Restaurant
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Name of current premises licence holder Wildcard Leisure Limited
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Part 2 - Applicant details

In what capacity are you applying for the premises licence to be transferred to you?

- Please tick yes
- a) an individual or individuals* please complete section (A)

 - b) a person other than an individual *
 - i. as a limited company please complete section (B)
 - ii. as a partnership please complete section (B)
 - iii. as an unincorporated association or please complete section (B)
 - iv. other (for example a statutory corporation) please complete section (B)

- c) a recognised club 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) an individual 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 respect of 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

I am 18 years old or over Please tick yes

Current postal address if different from premises address

Post town Post code

Daytime contact telephone number

E-mail address
(optional)

SECOND INDIVIDUAL APPLICANT (fill in as 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

Post code

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 Urban Edge Group Limited
Address URBAN EDGE GROUP LIMITED 16 - 24 UNDERWOOD STREET LONDON N1 7JQ
Registered number (where applicable) 02795728

If you have not enclosed premises licence referred to above please give the reasons why not.
It is not held by the proposed Premises Licence Holder. As such an extra fee of £10.50 has been paid for a re-issue of the premises licence.

- I have made or enclosed payment of the fee
- I have enclosed the consent form signed by the existing premises licence holder or my statement as to why it is not enclosed
- I have enclosed the premises licence or relevant part of it or explanation
- I have sent a copy of this application to the chief officer of police today
- 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 2)

Signature of applicant or applicant’s solicitor or other duly authorised agent (See guidance note 3). If signing on behalf of the applicant please state in what capacity.

Signature *Woods Whur LLP*
.....

Date 26 February 2014
.....

Capacity Woods Whur LLP (Solicitors for the Applicant)
.....

For joint applicants signature of second applicant, second applicant’s solicitor or other authorised agent (please read guidance note 4). If signing on behalf of the applicant please state in what capacity.

Signature
.....

Date
.....

Capacity
.....

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5)

Chris Rees-Gay
Woods Whur LLP
Devonshire House
38 York Place

Post town
Leeds

Post Code
LS1 2ED

Telephone number (if any) 0113 234 3055

If you would prefer us to correspond with you by e-mail your e-mail address (optional)
chris@woodswhur.co.uk

Consent of premises licence holder to transfer

I/we Wildcard Leisure Limited

[full name of premises licence holder(s)]

the premises licence holder of premises licence number

PREM/02505/007

[insert premises licence number]

relating to

La Boheme, Cross York Street, Leeds, LS2 7EE

[name and address of premises to which the application relates]

hereby give my consent for the transfer of premises licence number

PREM/02505/007

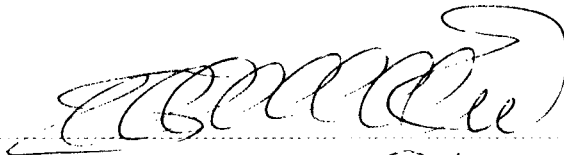
[insert premises licence number]

to

Urban Edge Group Limited

[full name of transferee]

signed



name
(please print)

Michael Sitalo

dated

25 February 2014