

Leeds City Council

**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 Land Securities Trinity Limited

(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 | | | |
| Unit 2.36 (formerly Pintura) Trinity Leeds Albion Street | | | |
| Post town | Leeds | Postcode | LS1 5AY |

ENTERTAINMENT LICENSING

06 FEB 2019

RECEIVED

| | |
|---|----------|
| Telephone number at premises (if any) | |
| Non-domestic rateable value of premises | £101,000 |

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 * | | |
| i. as a limited company | <input checked="" type="checkbox"/> | please complete section (B) |
| ii. as a partnership | <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 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 (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 <input type="checkbox"/> | Mrs <input type="checkbox"/> | Miss <input type="checkbox"/> | Ms <input type="checkbox"/> | Other Title (for example, Rev) | |
| Surname | | | First names | | |
| Date of birth | | | | | |
| Nationality | | | | | |
| I am 18 years old or over | | | | <input type="checkbox"/> | Please tick yes |
| Current postal address if different from premises address | | | | | |
| Post town | | | | Postcode | |
| Daytime contact telephone number | | | | | |
| E-mail address (optional) | | | | | |
| Where applicable (if demonstrating a right to work via the Home Office online right to work checking) | | | | | |

service), the 9-digit 'share code' provided to the applicant by that service (please see note 15 for information)

SECOND INDIVIDUAL APPLICANT (if applicable)

| | | | | | |
|--|------------------------------|-------------------------------|-----------------------------|--------------------------------|-----------------|
| Mr <input type="checkbox"/> | Mrs <input type="checkbox"/> | Miss <input type="checkbox"/> | Ms <input type="checkbox"/> | Other Title (for example, Rev) | |
| Surname | | | First names | | |
| Date of birth | | | | | |
| Nationality | | | | | |
| I am 18 years old or over | | | | <input type="checkbox"/> | Please tick yes |
| Current postal address if different from premises address | | | | | |
| Post town | | Postcode | | | |
| Daytime contact telephone number | | | | | |
| E-mail address (optional) | | | | | |
| Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit '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 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 Land Securities Trinity Limited |
| Address 100 Victoria Street London SW1E 5JL |
| Registered number (where applicable) 06316299 |

| |
|--|
| Description of applicant (for example, partnership, company, unincorporated association etc.) Private Limited Company |
| Telephone number (if any) |
| E-mail address (optional) |

Part 3 Operating Schedule

When do you want the premises licence to start?

| | | |
|----|----|------|
| DD | MM | YYYY |
| A | S | A P |

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

| | | |
|----|----|------|
| DD | MM | YYYY |
| | | |

| |
|---|
| <p>Please give a general description of the premises (please read guidance note 1)</p> <p>The premises is a restaurant/bar at Unit 2.36 of the Trinity Shopping Centre.</p> <p>The premises formerly traded as Pintura and the company holding the Premises Licence became insolvent, the landlord not appreciating he could have transferred the licence to hold until a new tenant was available.</p> <p>The application is made on behalf of the landlord, currently looking for a tenant to take on a lease of the premises, DPS variation application will be made once a tenant has been finalised.</p> |
|---|

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 Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick any that apply

- 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) performances 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)

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

In all cases complete boxes K, L and M

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 (please read guidance note 2) | | Indoors | <input type="checkbox"/> |
| | | | | | Outdoors | <input type="checkbox"/> |
| Day | Start | Finish | | | Both | <input type="checkbox"/> |
| Mon | | | Please give further details here (please read guidance note 3) | | | |
| Tue | | | | | | |
| Wed | | | State any seasonal variations for performing plays (please read guidance note 4) | | | |
| Thur | | | | | | |
| Fri | | | 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 | | | | | | |
| 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 (please read guidance note 2) | | Indoors | <input type="checkbox"/> |
| | | | | | Outdoors | <input type="checkbox"/> |
| Day | Start | Finish | | | Both | <input type="checkbox"/> |
| Mon | | | Please give further details here (please read guidance note 3) | | | |
| Tue | | | | | | |

| | | | |
|------|--|--|---|
| Wed | | | State any seasonal variations for the exhibition of films (please read guidance note 4) |
| Thur | | | |
| Fri | | | 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 | | | |
| Sun | | | |

C

| | | | |
|---|-------|--------|--|
| Indoor sporting events Standard days and timings (please read guidance note 6) | | | Please give further details (please read guidance note 3) |
| Day | Start | Finish | |
| Mon | | | State any seasonal variations for indoor sporting events (please read guidance note 4) |
| Tue | | | |
| Wed | | | 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) |
| Thur | | | |
| Fri | | | |
| Sat | | | |
| Sun | | | |

D

| | | | | | |
|---|-------|--------|---|----------|--------------------------|
| Boxing or wrestling entertainments Standard days and timings (please read guidance note 6) | | | Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2) | Indoors | <input type="checkbox"/> |
| | | | | Outdoors | <input type="checkbox"/> |
| Day | Start | Finish | Both <input type="checkbox"/> | | |
| 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) | | |
| 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

| | | | | | |
|---|-------|--------|---|----------|--------------------------|
| 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 (please read guidance note 2) | Indoors | <input type="checkbox"/> |
| | | | | Outdoors | <input type="checkbox"/> |
| Day | Start | Finish | Both <input type="checkbox"/> | | |
| Mon | | | Please give further details here (please read guidance note 3) | | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the performance of live music (please read guidance note 4) | | |
| Thur | | | | | |
| Fri | | | 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 (please read guidance note 5) | | |
| | | | | | |
| | | | | | |

| | | | |
|-----|--|--|--|
| Sat | | | |
| | | | |
| Sun | | | |
| | | | |

F

| | | | | | |
|---|-------|--------|---|----------|-------------------------------------|
| Recorded music Standard days and timings (please read guidance note 6) | | | <u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 2) | Indoors | <input checked="" type="checkbox"/> |
| | | | | Outdoors | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Day | Start | Finish | <u>Please give further details here</u> (please read guidance note 3) | | |
| Mon | 11:00 | 02:30 | | | |
| Tue | 11:00 | 02:30 | <u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4) | | |
| Wed | 11:00 | 02:30 | | | |
| Thur | 11:00 | 02:30 | <u>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</u> (please read guidance note 5) | | |
| Fri | 11:00 | 02:30 | | | |
| Sat | 11:00 | 02:30 | At the start of British Summertime, the terminal hour for all licensable activities shall be extended by one hour. | | |
| Sun | 11:00 | 02:30 | | | |
| | | | From the end of normal permitted hours on New Year's Eve until the start of permitted hours on New Year's Day. | | |

G

| | | | | | |
|--|-------|--------|---|----------|--------------------------|
| Performances of dance Standard days and timings (please read guidance note 6) | | | <u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 2) | Indoors | <input type="checkbox"/> |
| | | | | Outdoors | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Day | Start | Finish | <u>Please give further details here</u> (please read guidance note 3) | | |
| Mon | | | | | |
| Tue | | | <u>State any seasonal variations for the performance of dance</u> (please read | | |
| Wed | | | | | |

| | | | |
|------|--|--|--|
| | | | guidance note 4) |
| Thur | | | <u>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)</u> |
| Fri | | | |
| 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 | <u>Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)</u> | Indoors | <input type="checkbox"/> |
| Mon | | | | Outdoors | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Tue | | | <u>Please give further details here (please read guidance note 3)</u> | | |
| Wed | | | | | |
| Thur | | | <u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)</u> | | |
| Fri | | | | | |
| Sat | | | <u>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)</u> | | |
| Sun | | | | | |

I

| | | | | | |
|---|--------------|---------------|--|----------|-------------------------------------|
| 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 (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 | 23:00 | 03:00 | | | |
| | | | | | |
| Tue | 23:00 | 03:00 | | | |
| | | | | | |
| Wed | 23:00 | 03:00 | State any seasonal variations for the provision of late night refreshment (please read guidance note 4) | | |
| | | | | | |
| Thur | 23:00 | 03:00 | | | |
| | | | | | |
| Fri | 23:00 | 03:00 | 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) | | |
| | | | | | |
| Sat | 23:00 | 03:00 | At the start of British Summertime, the terminal hour for all licensable activities shall be extended by one hour. | | |
| | | | | | |
| Sun | 23:00 | 03:00 | From the end of normal permitted hours on New Year’s Eve until the start of permitted hours on New Year’s Day. | | |
| | | | | | |

J

| | | | | | |
|--|--------------|---------------|---|------------------|-------------------------------------|
| Supply of alcohol Standard days and timings (please read guidance note 6) | | | Will the supply of alcohol be for consumption – please tick (please read guidance note 7) | On the premises | <input type="checkbox"/> |
| | | | | Off the premises | <input type="checkbox"/> |
| | | | | Both | <input checked="" type="checkbox"/> |
| Day | Start | Finish | State any seasonal variations for the supply of alcohol (please read guidance note 4) | | |
| Mon | 11:00 | 02:30 | | | |
| | | | | | |
| Tue | 11:00 | 02:30 | | | |
| | | | | | |
| Wed | 11:00 | 02:30 | | | |
| | | | | | |
| Thur | 11:00 | 02:30 | 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) | | |
| | | | | | |
| Fri | 11:00 | 02:30 | At the start of British Summertime, the terminal hour for all licensable activities shall be extended by one hour. | | |
| | | | | | |

| | | | |
|-----|-------|-------|--|
| Sat | 11:00 | 02:30 | From the end of normal permitted hours on New Year's Eve until the start of permitted hours on New Year's Day. |
| | | | |
| Sun | 11:00 | 02:30 | |
| | | | |

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

| | |
|--|--|
| Name TBC | |
| Date of Birth | |
| Address | |
| Postcode | |
| Personal licence number (if known) | |
| Issuing licensing authority (if known) | |

K

| |
|--|
| <p>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).</p> <p>N/A</p> |
|--|

L

| | | | |
|--|--------------|---------------|---|
| Hours premises are open to the public Standard days and timings (please read guidance note 6) | | | State any seasonal variations (please read guidance note 4) Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 5) At the start of British Summertime, the terminal hour for all licensable activities shall be extended by one hour. From the end of normal permitted hours on New Year's Eve until the start of permitted hours on New Year's Day. |
| Day | Start | Finish | |
| Mon | 11:00 | 03:00 | |
| | | | |
| Tue | 11:00 | 03:00 | |
| | | | |
| Wed | 11:00 | 03:00 | |
| | | | |
| Thur | 11:00 | 03:00 | |
| | | | |
| Fri | 11:00 | 03:00 | |
| | | | |
| Sat | 11:00 | 03:00 | |
| | | | |
| Sun | 11:00 | 03:00 | |
| | | | |

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

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

The application is made on behalf of the landlord, currently looking for a tenant to take on a lease of the premises, DPS variation application will be made once a tenant has been finalised.

1. There will be a minimum of the following covers on each floor as listed below, at all times that licensable activities are taking place:

- Ground Floor – 42
- First Floor – 22
- Mezzanine Floor – 22.

b) The prevention of crime and disorder

1. 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.
2. The CCTV system will cover the main entrance/s and exit/s and designated emergency egress routes from the premises.
3. 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.
4. The CCTV system will contain the correct time and date stamp information.
5. The CCTV system will have sufficient storage retention capacity for a minimum of 31 days' continuous footage which will be of good quality.
6. 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.
7. 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.
8. 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.
9. Such communication links will be kept in working order at all times when licensable activities are taking place.
10. 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 taking place.
11. 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.
12. The need for door staff will be risk assessed by the PLH/DPS and employed when deemed necessary.
13. When door staff are employed, 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.
14. The Supervisor's 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 month and produced for inspection on request to an authorised officer.

c) Public safety

15. 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.
16. 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.
17. 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.
4. A written spillage policy will be kept to ensure spillages are dealt with in a timely and safe manner.
5. Adequate and appropriate First Aid equipment and materials will be available on the premises at all times.

d) The prevention of public nuisance

1. Noise from a licensable activity at the premises will be inaudible at the nearest noise sensitive premises.
2. Licensable activities will be conducted and the facilities for licensed activities will be designated 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.
3. The PLH/DPS will ensure that the outside area is used in a manner which does not cause disturbance to nearby residents and business in the vicinity. Patrons will not use this area after 23:00 daily (save for smokers).

e) The protection of children from harm

1. The PLH/DPS 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.
2. 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 who attempts to purchase alcohol at the premises.

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.
- 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.
-

[Applicable to all individual applicants, including those in a 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 PURSUANT 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 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.**

| | |
|--------------------|--|
| Declaration | <ul style="list-style-type: none"> [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] 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) 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, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15) |
| Signature | <i>Woods Whur</i> |
| Date | 06 February 2019 |
| Capacity | Woods Whur 2014 Limited - Solicitors for the Applicant |

For joint applications, signature of 2nd applicant or 2nd 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 postal address for correspondence associated with this application (please read guidance note 13)

Paddy Whur
Woods Whur 2014 Limited
Devonshire House
38 York Place

| | | | |
|-----------|-------|----------|---------|
| Post town | Leeds | Postcode | 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)
Paddy@woodswhur.co.uk