

# 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 Mr Dawit Berih

*(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			
Indigo 81 Roundhay Road			
Post town	Leeds	Postcode	LS8 5AQ

Telephone number at premises (if any)	██████████
Non-domestic rateable value of premises	£5.200

### 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 checked="" type="checkbox"/> please complete section (A)
b) a person other than an individual *	
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	<input type="checkbox"/> please complete section (B)
f) a health service body	<input type="checkbox"/> 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

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)

M r	<input checked="" type="checkbox"/>	Mrs	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Ms	<input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b> BERIH				<b>First names</b> Dawit, Keflamariam					
<b>Date of birth:</b> [REDACTED]		I am 18 years old or over		<input checked="" type="checkbox"/>		Please tick yes			
<b>Nationality:</b> [REDACTED]		<b>Place of Birth:</b> [REDACTED]							
Current residential address if different from premises address			[REDACTED]						
Post town		[REDACTED]			Postcode		[REDACTED]		
<b>Daytime contact telephone number</b>				[REDACTED]					
<b>E-mail address (optional)</b>		[REDACTED]							

**SECOND INDIVIDUAL APPLICANT** (if applicable)

M r	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Ms	<input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b>				<b>First names</b>					
<b>Date of birth</b>		I am 18 years old or over		<input type="checkbox"/>		Please tick yes			
<b>Nationality</b>									
Current postal address if different from premises address									
Post town					Postcode				
<b>Daytime contact telephone number</b>									
<b>E-mail address (optional)</b>									

**(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)
E-mail address (optional)

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD							
	M			YYY			
1	2	0	3	2	0	2	2

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

DD	M			YYYY			

<p>Please give a general description of the premises (please read guidance note 1)</p> <p>Small grocery store, situated in a commercial / residential area on a main road outside the town centre.</p> <p>A night hatch will be in use between the hours of 23:00 and 06:00 every day</p>
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If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

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

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

Provision of regulated entertainment (please read guidance note 2)

Please tick all 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) X

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

**A**

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

**B**

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

C

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

**D**

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



**E**

<b>Live music</b> Standard days and timings (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)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 4)		
Mon	-----	-----			
Tue	-----	-----	<b>State any seasonal variations for the performance of live music</b> (please read guidance note 5)		
Wed	-----	-----			
Thur	-----	-----	<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> (please read guidance note 6)		
Fri	-----	-----			
Sat	-----	-----			
Sun	-----	-----			

**F**

<b>Recorded music</b> Standard days and timings (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)	Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 4)					
Mon	-----	-----						
Tue	-----	-----						
Wed	-----	-----				<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 5)		
Thur	-----	-----						
Fri	-----	-----				<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> (please read guidance note 6)		
Sat	-----	-----						
Sun	-----	-----						

# G

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

# H

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

# I

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

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)  <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</b> (please read guidance note 6)		
Mon	00.00	23.59			
Tue	00.00	23.59			
Wed	00.00	23.59			
Thur	00.00	23.59			
Fri	00.00	23.59			
Sat	00.00	23.59			
Sun	00.00	23.59			

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

Name Mr Dawit Berih	
Date of birth: [REDACTED]	Place of birth: [REDACTED] Nationality: [REDACTED]
Address [REDACTED]	
Postcode	[REDACTED]
Personal licence number (if known) [REDACTED]	
Issuing licensing authority (if known) [REDACTED]	

**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).

None

L

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 7)			<b>State any seasonal variations</b> (please read guidance note 5)
Day	Start	Finish	
Mon	00.00	23.59	<b>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</b> (please read guidance note 6)
Tue	00.00	23.59	
Wed	00.00	23.59	
Thur	00.00	23.59	
Fri	00.00	23.59	
Sat	00.00	23.59	
Sun	00.00	23.59	

**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 10)

## **1. CCTV**

- 1.1** The premises will install and maintain a digital CCTV system
- 1.2.** The CCTV system to have sufficient hard drive storage capacity to store for a minimum of 31 days.
- 1.3** The CCTV system will be capable of obtaining clear facial recognition images and a clear head and shoulders image of every person entering the premises.
- 1.4** A CCTV log will be completed on a weekly basis to record and ensure that all elements of the CCTV System will be maintained in good working order including the recordings of date and time.
- 1.5** Only nominated staff will be trained in the operation of the CCTV system to ensure rapid data retrieval & downloads of footage can be provided to a Police Constable upon reasonable request in accordance with the Data Protection Act.
- 1.6** CCTV to be continually recording during licensable hours
- 1.7** In the event of a failure of the CCTV system for any reason, a record of the failure will be recorded in the premises log and immediate steps will be made to rectify the problem.
- 1.8** A written alcohol register will be kept at the premises to record persons authorised to sell alcohol under the premises licence.

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

### **2. Incident / Refusals Register**

- 2.1** An incident log must be kept at the premises.  
and must record; *All crimes or incidents of disorder, relevant to the licensing objectives.*  
*Major Incidents will be will be reported to 101.*  
All entries in the Incident Log will be retained for a period of 12 months from the date it occurred and will be made available for viewing on demand by a Police Constable,
- 3.** When the Designated Premises Supervisor is not on duty, a contact telephone number will be available at all times on the premises and a nominated member of staff will have permission to provide that contact number to a Police Constable upon demand.
- 4:** All spirits will be stored and sold behind the counter



**5:** Roller shutters have been installed at the front of the premises and a strong security door at the rear

**6.** No customers will be allowed to enter the premises between the hours of 23:00 and 06:00 on any day and all sales during those hours will be made through a service hatch located next to the front door.

**7:** All staff will be trained in Age Restricted Products and training records will be stored on the premises.

### **c) Public safety**

No risk has been assessed under the Licensing Act 2003

### **d) The prevention of public nuisance**

**8.** Prominent, clear and legible signage will be displayed at all exits to the premises requesting the public to respect the needs of local residents and to leave the premises and the area quickly and quietly.

**8.1** All waste products will be stored in suitable containers

**8.2** The Management will ensure that no exterior lighting fixed to the shop premises will cause a nuisance to any nearby residential properties

**8.3** The Management and staff will provide a waste bin directly outside the shop front and encourage customers especially children to put all waste in the bin

**8.4** The Management and staff will monitor the exterior of the shop via the CCTV system on a regular basis and aim to keep the exterior of the premises free from litter at all times

**8.5** The Management and staff will use their best endeavours to disperse groups of 3 or more persons that appear to be loitering outside the shop

**8.6** Deliveries to the premises to be made at a reasonable time conducted in a manner that will not cause a nuisance to the occupiers of any nearby residential properties.

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

**8.7** A written register of refusals of the sales of alcohol will be operated on the premises. Such records will be kept for a period of 12 months and produced to a Police Constable upon demand.

### **9. Challenge 25**

**9.1** The premises will operate a Challenge 25 scheme. This scheme will be written down and kept at the premises.

**9.2** All staff involved in the sales of alcohol at the premises will be trained in Challenge 25. Training records will be kept on the premises.

**9.3** Clear and legible Challenge 25 signage will also be displayed at the entrance to the premises and behind the counter.

**9.4** 'Proxy signs' will be on display where the alcohol is displayed warning customer not to purchase alcohol for other persons under the age of 18

**9.5** The premises shall display a minimum of 2 'Customer Refusal Policies' in prominent positions where customers can easily read it.

#### **Checklist:**

**Please tick to indicate agreement**

- I have made or enclosed payment of the fee. ( to be paid over the phone) **X**
- I have enclosed the plan of the premises. **X**
- I have sent copies of this application and the plan to responsible authorities and others where applicable. *Electronic application*
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable. **X**
- I understand that I must now advertise my application. **X**
- 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 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 (please read note 15). **X**

*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*

