

Bromsgrove District 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 McColl Property Solutions Limited (trading as St John's Wine Rooms)

(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

12 St John's Street Bromsgrove WORCS			
Post town	Bromsgrove	Postcode	B61 8QY
Telephone number at premises (if any)		01527 877727	
Non-domestic rateable value of premises		N/A	

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- 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) 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		
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)					

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		
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)					

(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 McColl Property Solutions Limited
Address 12 St John's Street Bromsgrove WORCS
Registered number (where applicable) 09038399
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company
Telephone number (if any) 01527 877727
E-mail address (optional) info@stjohnswinerooms.co.uk

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
0	1	0 3 2 0 1 7

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

DD	MM	YYYY

Please give a general description of the premises (please read guidance note 1)

We plan to open a prestigious, independent restaurant and wine bar targeted at the professional market, with a target age range of 30's and 40's.

We will sell fresh, well cooked food from lunchtime onwards and will offer a wide selection of food and drink, including fine wines.

The venue has four rooms. The main room and secret room are on the ground floor, whilst our landing and triple aspect rooms are on the first floor. We also have a roof terrace and a paved patio area, as well as a garden. There is also a pavement to the front of the building at ground level.

We would like all areas covered for our proposed licensable activities, including the sale of alcohol.

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

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Wed			
Thur			
Fri			<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> (please read guidance note 5)
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"/>
			Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4) 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)	
Mon				
Tue				
Wed				
Thur				
Fri				
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 checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3) Live music will be provided from time to time to support special events or evenings within normal licensing hours		
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 4) Live music may be provided to support Christmas and New Years eve party nights in December and to support bank holiday events		
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) Special events/evenings 20.00 to 23.00 Christmas party nights in December 20.00 to 24.00 New Years eve party 20.00 to 24.00 Bank holiday events 20.00 to 24.00		
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) Recorded background music will be played regularly but this will be incidental to the main activities.		
Mon					
Tue			Please give further details here (please read guidance note 3) Recorded music will be provided from time to time to support special events or evenings within normal licensing hours		
Wed					
Thur			State any seasonal variations for the performance of live music (please read guidance note 4) Recorded music may be provided to support special evenings/events, Christmas and New Years eve party nights in December and to support bank holiday events		
Fri					
Sat					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	
			Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)	
Mon				
Tue				
Wed			State any seasonal variations for the performance of dance (please read guidance note 4)	
Thur				
Fri			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)	
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	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			Please give further details here (please read guidance note 3)		
Wed					
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)		
Fri					
Sat			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)		
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 type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) We plan for our restaurant to be open until midnight on Friday and Saturday.		
Mon					
Tue					
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 4) Special evenings or events Christmas party nights in December New Years eve party night Bank Holiday events		
Thur					
Fri					
	23.00	24.00	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) Special evenings or events 23.00 to 24.00 Christmas party nights in December 23.00 to 24.00 New Years eve party night 23.00 to 01.00 Bank Holiday events 23.00 to 24.00		
Sat					
	23.00	24.00			
Sun					

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) Special evenings or events (eg @Italian food celebration’) Christmas party nights in December New Years eve party night Bank Holiday events 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) Special evenings or events 11.00 to 24.00 Christmas party nights in December 11.00 to 24.00 New Years eve party night 11.00 to 0100 Bank Holiday events 11.00 to 24.00		
Mon	11.00	23.00			
Tue	11.00	23.00			
Wed	11.00	23.00			
Thur	11.00	23.00			
Fri	11.00	24.00			
Sat	11.00	24.00			
Sun	11.00	23.00			

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

Name Stephen Collett	
Address	
Postcode	
Personal licence number (if known) 16/06530/PERSLI	
Issuing licensing authority (if known) Bromsgrove District Council	

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 8).

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			<u>State any seasonal variations</u> (please read guidance note 4)
Day	Start	Finish	
Mon			<u>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</u> (please read guidance note 5)
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

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 owners of the company are all proud Bromsgrovians. Having invested substantially in acquiring the historic Steps House, we plan to lovingly restore it to its former glory. However, plan a is to develop a prestigious restaurant and wine bar next door, offering the people of Bromsgrove an independent business serving great food and drink. We will be targeting the professional market, people in their 30's and 40's will be core target market, because there is simply nowhere for this segment of the population to eat and drink in the town centre. The emphasis will be on quality food and drink and this will be reflected in our retail prices which will help to ensure that we attract our targeted market. Additionally, our range of beer on sale will be limited, whilst our wine list will be extensive.

b) The prevention of crime and disorder

CCTV will be fitted extensively throughout the premises, in each room on all floors, and outside. There will be at least 15 cameras in operation.
External lighting will be a further safeguard.
A clearly focused target market and customer with appropriate retail pricing.
We plan to join the local licensed retailer groups and associations, as well as any neighbourhood groups.

c) Public safety

CCTV (as above)
External lighting.
Fire doors, smoke detectors and alarm system well ahead of any standard requirements
A clearly focused target market

d) The prevention of public nuisance

CCTV
External lighting
A responsible business policy will be in place, including noise reduction measures
A clearly focused target market

e) The protection of children from harm

A clearly focused target market. Our age target is 30's and 40's and so our offering is likely to be unattractive to younger people.
 A close control over the admission of people to the premises.
 We plan to become part of the Challenge 25 scheme.

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.

IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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 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.

Signature	DAVID MCNALLY
Date	02/12/2016
Capacity	DIRECTOR

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)

Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail :			

Notes for Guidance

1. 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.
2. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
3. 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.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. 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.
7. 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'.
8. 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.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

Consent of individual to being specified as premises supervisor

Stephen Collett

I _____
[full name of prospective premises supervisor]

Of

_____ *[home address of prospective premises supervisor]*

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

Premises license application

_____ *[type of application]*

by

McColl Property Solutions Limited t/a St John's Wine Rooms

_____ *[name of applicant]*

relating to a premises licence

_____ *[number of existing licence, if any]*

for

12 St John's Street
Bromsgrove
WORCS
B61 8QY

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

and any premises licence to be granted or varied in respect of this application made by

McColl Property Solutions Limited t/a St John's Wine Rooms

[name of applicant]

concerning the supply of alcohol at

12 St John's Street
Bromsgrove
WORCS
B61 8QY

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

16/06530/PERSLI

[insert personal licence number, if any]

Personal licence issuing authority

Bromsgrove District Council

[insert name and address and telephone number of personal licence issuing authority, if any]

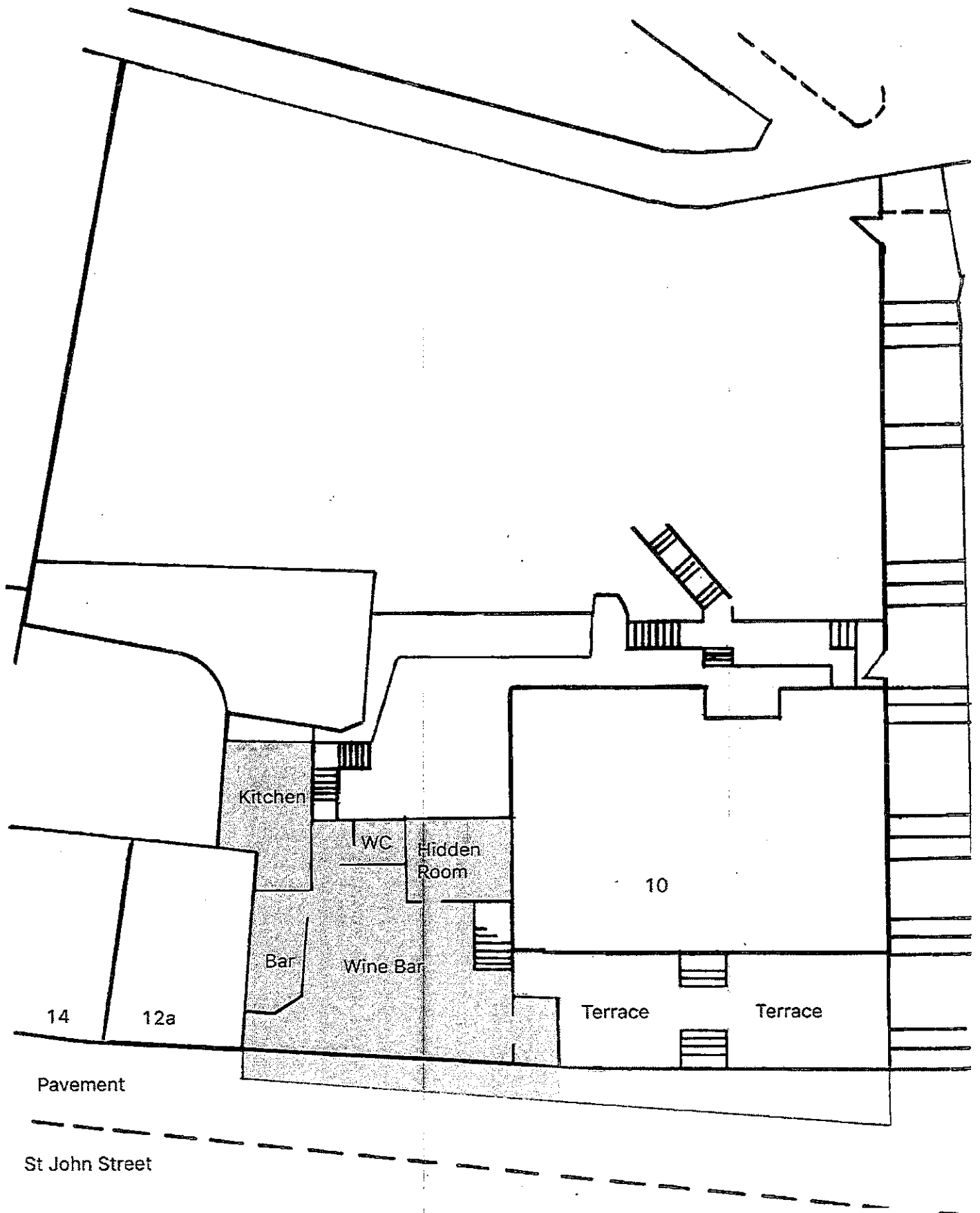
Signed

Name (please print)

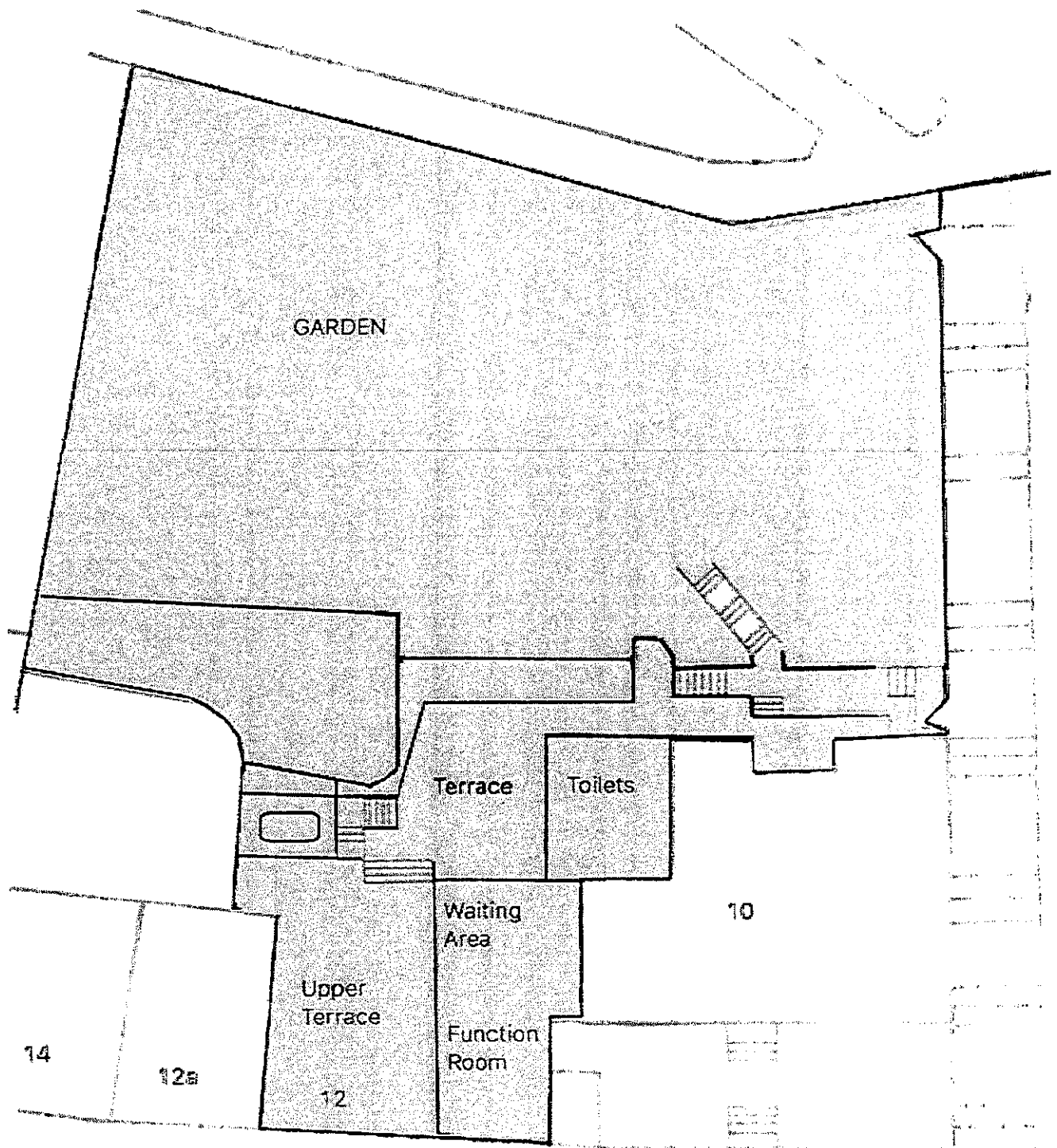
Stephen Collett

Date

02/12/2016



St John's Wine Rooms
 12 St John Street, Bromsgrove
 Ground Floor Plan
 Showing Area For Licensing Activities
 Scale 1-200



Pavement

St John St

St John's Wine Rooms
12 St John Street, Bromsgrove
First Floor and Garden
Showing Area For Licensing Activities
Scale 1-200