

Appendix 1



**Application for a premises licence to be granted under
the Licensing Act 2003**

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 Dr Sreenath Krishnan Nair & Dr Arya Madhavan
(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			
Sanderlings, Willingham Road Market Rasen LN8 3RE Lincolnshire			
Post town	Market Rasen	Postcode	LN8 3RE

Telephone number at premises (if any)	07857978725
Non-domestic rateable value of premises	Not non (We contacted the County council for more details about the business rates, but we are advised that the business rate is not applicable to us).

Part 2 - Applicant details

Please tick as appropriate

Please state whether you are applying for a premises licence as

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
- i as a limited company/limited liability partnership please complete section (B)
- ii as a partnership (other than limited liability) 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 (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 applicant (fill in as applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (e.g. Rev)	DR
Surname Krishnan Nair			First names Sreenath Syamala Devi		
[REDACTED]th			I am 18 years old or over <input checked="" type="checkbox"/> (Please tick)		
Nationality [REDACTED]					
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 (see note 15 for information)					
Current residential address if different from premises address		Sanderlings Willingham Road, Market Rasen LN8 3RE			
Post town	Market Rasen		Postcode	LN8 3RE	
Contact telephone number			07857978725		
E-mail address		[REDACTED]			

Second individual applicant (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (e.g. Rev)	DR
Surname Madhavan			First names Arya Namangalathu		
[REDACTED]h			I am 18 years old or over <input checked="" type="checkbox"/> (Please tick)		
Nationality - [REDACTED]					
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 (see note 15 for information)					
Current residential address if different from premises address		Sanderlings Willingham Road, Market Rasen LN8 3RE			
Post town	Market Rasen		Postcode	LN8 3RE	
Contact telephone number			07857978725		
E-mail address		[REDACTED]			

(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.

Description of applicant (for example, partnership, company, unincorporated association etc.)

Part 3 – Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
2	0	1 2 20 2 0

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 (see guidance note 1)

The residential home premise is an independent house set in .40 acres of land. The building is 3000 sqft with a large car park. The house is located in Willingham road and CCTV operated.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

NO

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)

Please tick all that apply

Provision of regulated entertainment (see guidance note 2)

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

B

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

C

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

D

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

E

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

F

Recorded music Standard days and timings <i>(see guidance note 7)</i>			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> <i>(see guidance note 3)</i>	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> <i>(see guidance note 4)</i> Recorded music will be played to create the atmosphere. The volume will be maintained low.		
Mon					
	15.00	00.00			
Tue					
	15.00	00.00			
Wed			<u>State any seasonal variations for the playing of recorded music</u> <i>(see guidance note 5)</i>		
	15.00	00.00			
Thur					
	15.00	00.00	Seasonal variation will be requested separately through Temporary event notice.		
Fri			<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> <i>(see guidance note 6)</i>		
	15.00	00.00			
Sat	15.00	00.00			
			N/A		
Sun					
	15.00	00.00			

G

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

H

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

I

Late night refreshment Standard days and timings (see guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (see guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (see guidance note 4)		
Mon	23:00	00:00			
Tue	23:00	00:00			
			<u>State any seasonal variations for the provision of late night refreshment</u> (see guidance note 5)		
Wed	23:00	00:00			
Thur	23:00	00:00			
			<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> (see guidance note 6)		
Fri	23:00	00:00			
Sat	23:00	00:00			
Sun	23:00	00:00			

J

Supply of alcohol Standard days and timings (see guidance note 7)			Will the supply of alcohol be for consumption – please tick (see guidance note 8)	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 (see guidance note 5) Seasonal variation will be requested separately through Temporary event notice.		
Mon	15.00	00.00			
Tue	15.00	00.00			
Wed	15.00	00.00			
Thur	15.00	00.00			
Fri	15.00	00.00			
Sat	15.00	00.00			
Sun	15.00	00.00			
			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 (see guidance note 6)		

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 Dr Sreenath Krishnan Nair	
Date of birth [REDACTED]	
Home address Sanderlings Willingham Road Market Rasen	
Postcode	LN8 3RE
Personal licence number (if known) Not known	
Issuing licensing authority (if known) Not 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 (see guidance note 9).

No adult entertainment will be permitted in the premises rising concerns in respect of children.

L

Hours premises are open to the public Standard days and timings (see guidance note 7)			<u>State any seasonal variations</u> (see guidance note 5)
Day	Start	Finish	
Mon			<p><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> (see guidance note 6)</p>
	15.00	00.30	
Tue			
	15.00	00.30	
Wed			
	15.00	00.30	
Thur			
	15.00	00.30	
Fri			
	15.00	00.30	
Sat			
	15.00	00.30	
Sun			
	15.00	00.30	

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) (see guidance note 10)

All four licencing objectives will be maintained throughout during on premises and off premises sale of alcohol. A responsible consumption of the alcohol will be encouraged on premises and all the following measures will be undertaken to promote the licencing objectives.

b) The prevention of crime and disorder

A CCTV system shall be installed, recording and maintained in working order and operated at the premises to the satisfaction of Lincolnshire Police, specifically:

- a) There shall be a minimum of one high resolution colour camera, fitted in a weatherproof housing, for external coverage of the entrance.
- b) There shall be a minimum of one high-resolution colour camera fitted to each public entrance/exit. To provide a quality head and shoulder image for facial recognition/identification purposes of all persons entering the premises.
- c) There shall be sufficient cameras able to cope with the normal operating illumination to reasonably cover all licensed public areas.
- d) Recordings must be kept for a minimum of 28 days and endorsed with the accurate, correct time/date (BST/GMT adjusted).
- e) Police and/or Authorised Licensing Officers shall be able on attendance to view immediate playback of any incident without the necessity for download.
- f) Recordings of incidents at the premises must be provided to the police following lawful request.
- G) A member of staff shall be on the premises at all times they are open to the public who is capable of operating the CCTV system and providing recordings on request. When this is not possible recordings shall be provided within 24 hours of the original request.
- H) Recording equipment shall be housed in a secure room/cabinet where access and operation is strictly limited to authorised persons.
- i) All equipment shall have constant time/date generation, which must be checked for accuracy on trading days.
- j) The CCTV system should be maintained and checked every 12 months, with the installing company, or if this is not possible another reputable company, producing a letter of compliance.
- k) In the event of a system malfunction, the Designated Premises Supervisor or the Premises Licence Holder must record details of this malfunction in the premises refusals/incident book.

Alcohol will only be served as ancillary to food (to clarify, no sales of alcohol unless accompanied with food)

All food will be pre-ordered on take away orders.

All special events, admittance only to persons who have pre booked.

On special events all drinks will be served and decanted in plastic drinking vessels.

Patrons shall not be allowed to enter or leave the premises whilst in the possession of any alcoholic drink in unsealed containers. For the purpose of clarity, this means any

drink that contains alcohol and leaving the premises includes leaving for any reason whether temporarily or otherwise.

c) Public safety

An incident/refusals book shall be kept at the premises, in which details of crime and/or disorder relating to the premises shall be recorded. The Incident book shall contain the following details;

- Time, date and location of incident/refusals.
- Nature of the Incident/refusal.
- Names, addresses and contact details of persons involved.
- Result of the incident/refusals.
- Action taken to prevent further such incidents.

Each entry signed by the DPS or other responsible person employed at the premises and so authorised by the DPS; and

Retained for a period of no less than 12 months and made available to Lincolnshire Police for inspection upon request.

d) The prevention of public nuisance

Refuse such as bottles shall be disposed of from the premises at a time when it is not likely to cause a disturbance to residents.

Customer notices to be displayed at all exits asking patrons to please leave the premises quietly and to respect the needs of the local residents.

All deliveries of stock must be between the hours of 0800-1800 Monday to Friday.

e) The protection of children from harm

The premises shall operate the "Challenge 25" Proof of Age Policy to prevent the sale or supply of alcohol to persons under 18 years of age. The policy shall require any person who appears to be under the age of 25 years to produce one of the following forms of identification:

A recognised proof of age card credited under the British Retail Consortiums Proof of Age Standards Scheme (PASS);

Photo driving licence;

Passport.

Notices shall be prominently displayed advising customers of the "Challenge 25" policy. All point of sale staff shall undergo training in the challenge 25 proof of age scheme and all other relevant policies with a record kept of the date of training, signed by the member of staff and the trainer. Each entry shall be retained for a period of 12 months from date of completion. This record shall be made available for inspection by Lincolnshire Police Officers or other relevant authority.

All payment for online/telephone orders must be by way of Credit Card or Pay Pal. (Debit Card and Cash payments will be only be accepted on orders picked up from or special events held on the premises.)

Checklist:

Please tick to indicate agreement

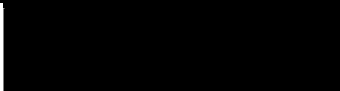
- I have made or enclosed payment of the fee.
- I have enclosed the plan of the premises.
- I have sent copies of this application and the plan to responsible authorities and others where applicable.
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, 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 (*see 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.

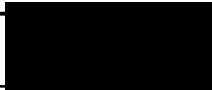
It is an offence under section 24b of the Immigration Act 1971 for a person to work when they know, or have reasonable cause to believe, that they are disqualified from doing so by reason of their immigration status. Those who employ an adult without leave or who is subject to conditions as to employment will be liable to 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 (see 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	<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 (see 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 (see guidance note 15)
Signature	
Date	20 Nov 20
Capacity	Applicant

For joint applications, signature of 2nd applicant or 2nd applicant’s solicitor or other authorised agent (see guidance note 13). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	20 Nov 20
Capacity	Co-Applicant

Contact name (where not previously given) and postal address for correspondence associated with this application (see guidance note 14)			
Indian Curry Pot Sanderlings, Willingham Road Market Rasen LN8 3RE			
Post town	Market Rasen	Postcode	LN8 3RE
Telephone number (if any)	07857978725		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

