

Herefordshire Application for a premises licence Licensing Act 2003

* required information

Section 1 of 19				
You can save the form at any t	ime and resume it later. You do not need to be	logged in when you resume.		
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.		
Your reference	Tesco - Whitecross Rd	You can put what you want here to help yo track applications if you make lots of them. is passed to the authority.		
Are you an agent acting on be	half of the applicant?	Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.		
Applicant Details				
* First name	Tesco Stores Ltd			
* Family name	Tesco]		
* E-mail	licensing.team@uk.tesco.com]		
Main telephone number	01707 634175	Include country code.		
Other telephone number]		
🔲 Indicate here if you wou	Id prefer not to be contacted by telephone			
Are you:				
 Applying as a business of 	or organisation, including as a sole trader	A sole trader is a business owned by one person without any special legal structure.		
 Applying as an individu 	al	Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.		
Applicant Business				
* Is your business registered in the UK with Companies House?	Yes O No			
* Registration number	519500]		
* Business name	Tesco Stores Ltd	If your business is registered, use its registered name.		
* VAT number GB	220430231	Put "none" if you are not registered for VAT.		
* Legal status	Public Limited Company]		

Continued from previous page				
* Your position in the business	Licence Manager			
Home country	United Kingdom	The country where the headquarters of your business is located.		
Registered Address		Address registered with Companies House.		
* Building number or name	Tesco House			
* Street	Delamare Road			
District				
* City or town	Cheshunt			
County or administrative area	Herts			
* Postcode	EN8 9SL			
* Country	United Kingdom			
Section 2 of 19				
PREMISES DETAILS				
	ply for a premises licence under section 17 of t he premises) and I/we are making this applicat of the Licensing Act 2003.			
Premises Address				
Are you able to provide a post	al address, OS map reference or description of t	he premises?		
Address OS map reference ODescription				
Postal Address Of Premises				
Building number or name	141			
Street	Whitecross Road			
District				
City or town	Hereford			
County or administrative area	Hertfordshire			
Postcode	HR4 0LS			
Country	United Kingdom			
Further Details				
Telephone number				
Non-domestic rateable value of premises (£)				

Secti	on 3 of 19
APPL	ICATION DETAILS
In wh	nat capacity are you applying for the premises licence?
	An individual or individuals
\times	A limited company
	A partnership
	An unincorporated association
	A recognised club
	A charity
	The proprietor of an educational establishment
	A health service body
	A person who is registered under part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales
	A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England
	The chief officer of police of a police force in England and Wales
	Other (for example a statutory corporation)
Cont	firm The Following
\boxtimes	l am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities
	I am making the application pursuant to a statutory function
	l am making the application pursuant to a function discharged by virtue of Her Majesty's prerogative
Secti	on 4 of 19
NON	INDIVIDUAL APPLICANTS
	ide name and registered address of applicant in full. Where appropriate give any registered number. In the case of a nership or other joint venture (other than a body corporate), give the name and address of each party concerned.
Non	Individual Applicant's Name
Nam	e
Deta	ils
-	stered number (where

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

Continued from previous page	
Address	
Building number or name	
Street	
District	
City or town	
County or administrative area	
Postcode	
Country	United Kingdom
Contact Details	
E-mail	
Telephone number	
Other telephone number	
	Add another applicant
Section 5 of 19	
OPERATING SCHEDULE	
When do you want the premises licence to start?	10 / 08 / 2014 dd mm yyyy
If you wish the licence to be valid only for a limited period, when do you want it to end	dd mm yyyy
Provide a general description o	of the premises
licensing objectives. Where you	ses, its general situation and layout and any other information which could be relevant to the ur application includes off-supplies of alcohol and you intend to provide a place for plies you must include a description of where the place will be and its proximity to the
-	selling a range of goods and services. This includes the sale of alcohol for consumption off the onsumption off the supermarket sales floor as shown on the
If 5,000 or more people are expected to attend the premises at any one time, state the number expected to attend	

Continued from previous page	
Section 6 of 19	
PROVISION OF PLAYS	
Will you be providing plays?	
⊖ Yes	No
Section 7 of 19	
PROVISION OF FILMS	
Will you be providing films?	
⊖ Yes	No
Section 8 of 19	
PROVISION OF INDOOR SPORT	ING EVENTS
Will you be providing indoor spo	orting events?
⊖ Yes	No
Section 9 of 19	
PROVISION OF BOXING OR WR	ESTLING ENTERTAINMENTS
Will you be providing boxing or	wrestling entertainments?
⊖ Yes	No
Section 10 of 19	
PROVISION OF LIVE MUSIC	
Will you be providing live music	
⊖ Yes	No
Section 11 of 19	
PROVISION OF RECORDED MU	SIC
Will you be providing recorded r	nusic?
⊖ Yes) No
Section 12 of 19	
PROVISION OF PERFORMANCE	S OF DANCE
Will you be providing performar	ces of dance?
⊖ Yes () No
Section 13 of 19	
PROVISION OF ANYTHING OF A	SIMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF
Will you be providing anything s performances of dance?	imilar to live music, recorded music or
⊖ Yes	No
Section 14 of 19	
LATE NIGHT REFRESHMENT	
Will you be providing late night	refreshment?

Continued from previous page			⊖ Yes	lacksquare	No
Section 15 of 19					
SUPPLY OF ALCOHOL					
Will you be selling or supplying alcohol?					
Standard Days And Timings					
MONDAY			Give timings in 24 hour clock	ζ.	
Start 06:00	End	23:00	(e.g., 16:00) and only give de	tails	
Start	End		of the week when you intend to be used for the activity.	i the	premises
TUESDAY					
Start 06:00	End	23:00			
Start	End				
WEDNESDAY			I		
Start 06:00	End	23:00			
Start Start	End	23.00			
	LIIU				
THURSDAY					
Start 06:00	End	23:00			
Start	End				
FRIDAY					
Start 06:00	End	23:00			
Start	End				
SATURDAY					
Start 06:00	End	23:00			
Start	End				
SUNDAY					
Start 06:00	End	23:00			
Start	End				
Will the sale of alcohol be for consumption:			If the sale of alcohol is for co	nsun	nption on
 On the premises Off the premises 	Both		the premises select on, if the is for consumption away from		
			select off. If the sale of alcoho	ol is f	or
			consumption on the premise from the premises select bot		u away
State any seasonal variations					
For example (but not exclusively) where the activity will occ	urona	additional da	ays during the summer month	s.	

Non-standard timings. Where the premises will be used for the supply of alcohol at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

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

Name		
First name	Greg	
Family name	Bartley	
Enter the contact's address		
Building number or name		
Street		
District		
City or town		
County or administrative area		
Postcode		
Country		
Personal Licence number (if known)		
Issuing licensing authority (if known)		
PROPOSED DESIGNATED PRE	MISES SUPERVISOR CONSENT	

How will the consent form of the proposed designated premises supervisor be supplied to the authority?

- \bigcirc Electronically, by the proposed designated premises supervisor
- As an attachment to this application

Reference number for consent	
form (if known)	

If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.

Continued from previous	page			
Section 16 of 19				
ADULT ENTERTAINMENT				
Highlight any adult entertainment or services, activities, or other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children				
rise to concern in respe	ct of children, regard	less of whether you in	itend childre	y to the use of the premises which may give n to have access to the premises, for example gambling machines etc.
Section 17 of 19				
HOURS PREMISES ARE	OPEN TO THE PUBL	IC		
Standard Days And Ti	mings			
MONDAY				Give timings in 24 hour clock.
	Start 06:00	End	23:00	(e.g., 16:00) and only give details for the days of the week when you intend the premises
	Start	End		to be used for the activity.
TUESDAY				
	Start 06:00	End	23:00	
	Start	End		
WEDNESDAY				
	Start 06:00	End	23:00	
	Start	End		
THURSDAY				
	Start 06:00	End	23:00	
	Start	End		
FRIDAY				
	Start 06:00	End	23:00	
	Start	End		
SATURDAY				
	Start 06:00	End	23:00	
	Start	End		
SUNDAY				
	Start 06:00	End	23:00	
	Start	End		
State any seasonal variations				

For example (but not exclusively) where the activity will occur on additional days during the summer months.

Non standard timings. Where you intend to use the premises to be open to the members and guests at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

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LICENSING OBJECTIVES

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

a) General – all four licensing objectives (b,c,d,e)

List here steps you will take to promote all four licensing objectives together.

We are a national retailer that sells alcohol as part of a broad offering of goods and services. We have held off-licences in our stores for many years and are an approved British Institute of Inn-keeping examination centre. We have written training policies and formal training programmes are in place, which ensure our people are equipped to meet all licensing objectives. All training and revision/refresher materials are reviewed regularly. All stores currently comply with our 'Think 25' policy, this is brought to customer's attention through point of sale material within the store. We take legal compliance very seriously and in addition to local training we employ a central alcohol licensing compliance manager and have a compliance committee.

b) The prevention of crime and disorder

The premises will have digital CCTV system that covers many areas of the shop floor, including the proposed area which will be used for beer and wine, should we be successful with our application.

Images will be retained for a minimum of 21 days and made available on enforcement request.

Ordinarily, a member of the Management team will be on the premises all the time the store is open. A person will have responsibility for the premises whilst the premises are open.

c) Public safety

A person will have responsibility for the premises whilst the premises are open. Management will be trained to support the running of the premises including looking after our customers and staff. The store will adhere to all rules and regulations relating to public safety.

d) The prevention of public nuisance

We intend to be an active member of the community. We welcome the opportunity to liaise with Police and enforcement authorities should the need arise.

e) The protection of children from harm

All staff will be trained and regularly refreshed in the corporate 'Think 25' Policy. Staff will be trained to look at the customer and 'Think 25' when selling alcohol.

A till prompt will appear on the initial sale of alcohol that will remind the seller of their responsibilities including not to sell alcohol to anyone under the age of 18.

The store will display signage around the premises informing both staff and customers of our 'Think 25' policy on alcohol.

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PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

Premises Licence Fees are determined by the non domestic rateable value of the premises.

To find out a premises non domestic rateable value go to the Valuation Office Agency site at http://www.voa.gov.uk/business_rates/index.htm

Band A - No RV to £4300	£100.00
Band B - £4301 to £33000	£190.00
Band C - £33001 to £87000	£315.00
Band D - £87001 to £125000	£450.00*
Band E - £125001 and over	£635.00*

*If the premises rateable value is in Bands D or E and the premises is primarily used for the consumption of alcohol on the premises then you are required to pay a higher fee.

Band D - £87001 to £125000	£900.00
Band E - £125001 and over	£1,905.00

There is an exemption from the payment of fees in relation to the provision of regulated entertainment at church halls, chapel halls or premises of a similar nature, village halls, parish or community halls, or other premises of a similar nature. The costs associated with these licences will be met by central Government. If, however, the licence also authorises the use of the premises for the supply of alcohol or the provision of late night refreshment, a fee will be required.

Schools and sixth form colleges are exempt from the fees associated with the authorisation of regulated entertainment where the entertainment is provided by and at the school or college and for the purposes of the school or college.

If you operate a large event you are subject to ADDITIONAL fees based upon the number in attendance at any one time.

Capacity 5000-9999	£1,000.00
Capacity 10000 -14999	£2,000.00
Capacity 15000-19999	£4,000.00
Capacity 20000-29999	£8,000.00
Capacity 30000-39999	£16,000.00
Capacity 40000-49999	£24,000.00
Capacity 50000-59999	£32,000.00
Capacity 60000-69999	£40,000.00
Capacity 70000-79999	£48,000.00
Capacity 80000-89999	£56,000.00
Capacity 90000 and over	£64,000.00
* Fee amount (£)	315.00

DECLARATION

[,] I/we understand it is an offence, liable on conviction to a fine up to level 5 on the standard scale, under section 158 of the licensing act 2003, to make a false statement in or in connection with this application.

 \times

Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

 * Capacity * Date 02 07 2014 dd mm yyyy 	* Full name	Greg Bartley
	* Capacity	Licence Manager
dd mm yyyy	* Date	
		dd mm yyyy

Add another signatory

Once you're finished you need to do the following:

1. Save this form to your computer by clicking file/save as...

2. Go back to <u>https://www.gov.uk/apply-for-a-licence/premises-licence/herefordshire/apply-1</u> to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

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

OFFICE USE ONLY

Applicant reference number	Tesco - Whitecross Rd
Fee paid	
Payment provider reference	
ELMS Payment Reference	
Payment status	
Payment authorisation code	
Payment authorisation date	
Date and time submitted	
Approval deadline	
Error message	
Is Digitally signed	
< Previous <u>1</u> <u>2</u> <u>3</u> <u>4</u>	<u>5 6 7 8 9 10 11 12 13 14 15 16 17 18 19</u> Next >

Consent of individual to being specified as premises supervisor

l,				
	[Insert full name of applicant]	GREG BARTLEY		
of				

[Insert full home address and postcode]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for a new premises licence to specify an individual as designated premises supervisor under section 17 of the Licensing Act 2003 by Tesco Stores Ltd relating to a premises licence:

[Insert existing Premises Licence Number if any]

for

Tesco Stores Ltd 141 Whitecross Road Hereford Hertfordshire HR4 0LS

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

and any premises licence to be granted or varied in respect of the application made by Tesco Stores Ltd concerning the supply of alcohol at the above premises.

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.

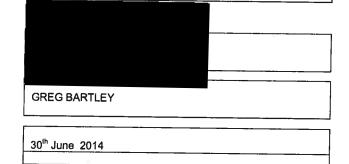
Personal licence number

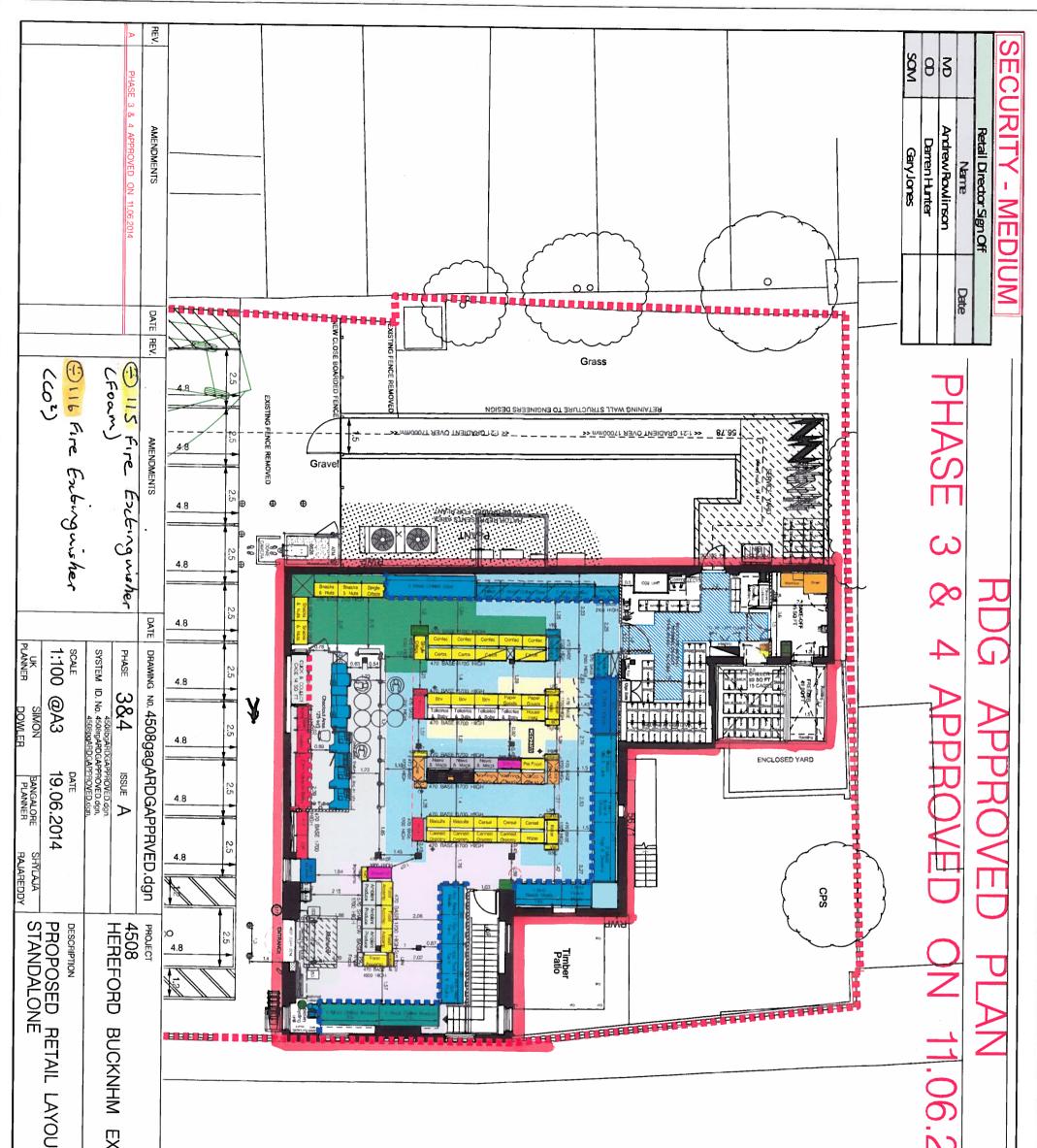
Personal Licence issuing authority

Signed

Name (Please Print)

Date





	CROSS ROAD		014
TESCO STORES LIMITED EXPRESS GROUP P.O. BOX 400, CIRRUS BUILDING, SHIRE PARK WELWAN GARDEN CITY, HERTS, AL7 1GA THE COPRESIT NAME IN AND RELEVANCE TO THE RELOW OF THE STATE AND RELEVANCE AND THE RELOW OF THE STATE AND RELOW.	ARE Match (O), Med/ 6 2 2 Mail March (O), Med/ 6 3 3 Mail Ref (March (O), Med/ 6 3 3 Mail Ref (March (O), Med/ 6 3 3 Mail Ref (March (O), Med/ 6 0 0 0 Mail Ref (March (O), Med/ 2 1 1 1 Mail Ref (March (O), Med/ 2 3 3 3 Mail Ref (March (O), Med/ 1 1 1 1 Mail Ref (March (O), Med/ 1 1 1 1 Mail Ref (March (O), Med/ 1 1 1 1 Mail State Teal 1 1 1 1 1 Mail State Teal 1 1 1 1 1 1 Mail State Teal 1 1 1 1 1 1 1 1 1	UNOC Multic Marchal - Marchale 3	Strongy Strongy Register Strongy Register Strongy Register Strongy Register Strongy Register Strongy Strongy