

**Application to vary a premises licence 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 Blue Star Power Limited

*(Insert name(s) of applicant)*

being the premises licence holder, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

<b>Premises licence number</b> PR00397
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**Part 1 – Premises Details**

Postal address of premises or, if none, ordnance survey map reference or description Site plan attached.			
Marden Post Office & Stores Marden			
Post town	Hereford	Postcode	HR1 3EW

Telephone number at premises (if any)	01432 880386
Non-domestic rateable value of premises	£11,000

**Part 2 – Applicant details**

Daytime contact telephone number	01432 880386		
E-mail address (optional)	mardenstores@gmail.com		
Current postal address if different from premises address			
Post town		Postcode	

**Part 3 - Variation**

Please tick as appropriate

Do you want the proposed variation to have effect as soon as possible?     Yes     No

If not, from what date do you want the variation to take effect?    DD    MM    YYYY  

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Do you want the proposed variation to have effect in relation to the introduction of the late night levy? (Please see guidance note 1)     Yes     No

**Please describe briefly the nature of the proposed variation** (Please see guidance note 2)

To change the licence form an Off Licence to a On and Off Licence.

The premises is a convenience store and post office, situated in Marden Village, Herefordshire.

There are areas inside and outside that will be used for customers who purchase alcohol from these premises.

The premises have been extended and a site plan is enclosed.

If your proposed variation would mean that 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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#### Part 4 Operating Schedule

Please complete those parts of the Operating Schedule below which would be subject to change if this application to vary is successful.

- | <b>Provision of regulated entertainment (Please see guidance note 3)</b>                                    | <b>Please tick all that apply</b> |
|---|-----------------------------------|
| a) plays (if ticking yes, fill in box A)  | <input type="checkbox"/>          |
| b) films (if ticking yes, fill in box B)  | <input type="checkbox"/>          |
| c) indoor sporting events (if ticking yes, fill in box C)   | <input type="checkbox"/>          |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D)  | <input type="checkbox"/>          |
| e) live music (if ticking yes, fill in box E)   | <input type="checkbox"/>          |
| f) recorded music (if ticking yes, fill in box F)   | <input type="checkbox"/>          |
| g) performances of dance (if ticking yes, fill in box G)  | <input type="checkbox"/>          |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/>          |

**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

Plays Standard days and timings (please read guidance note 8)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 4)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 5)		
Mon					
			State any seasonal variations for performing plays (please read guidance note 6)		
Tue					
			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 7)		
Wed					
Thur					
Fri					
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 8)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 4)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 5)		
Mon					
			State any seasonal variations for the exhibition of films (please read guidance note 6)		
Tue					
			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 7)		
Wed					
Thur					
Fri					
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 8)			<u>Please give further details</u> (please read guidance note 5)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 6)
Wed			
Thur			<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 7)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 8)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 4)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 5)		
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 6)		
Thur					
Fri			<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> (please read guidance note 7)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 8)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 4)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 5)		
Mon					
			State any seasonal variations for the performance of live music (please read guidance note 6)		
Tue					
			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 7)		
Wed					
Thur					
Fri					
Sat					
Sun					



F

Recorded music Standard days and timings (please read guidance note 8)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 4)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 5)		
Mon					
Tue			State any seasonal variations for the playing of recorded music (please read guidance note 6)		
Wed					
Thur			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 (please read guidance note 7)		
Fri					
Sat					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 8)			Indoors <input type="checkbox"/>
Day	Start	Finish	
Mon			<b>Will the performance of dance take place indoors or outdoors or both – please tick</b> (please read guidance note 4)
Tue			
Wed			<b>Please give further details here</b> (please read guidance note 5)
Thur			
Fri			<b>State any seasonal variations for the performance of dance</b> (please read guidance note 6)
Sat			
Sun			
			<b>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</b> (please read guidance note 7)

H

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 8)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 4)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 5)		
Wed					
Thur			<b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 6)		
Fri					
Sat			<b><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></b> (please read guidance note 7)		
Sun					

I

<b>Late night refreshment</b> Standard days and timings (please read guidance note 8)			<b><u>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 4)	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 5)		
Mon					
Tue			<b><u>State any seasonal variations for the provision of late night refreshment</u></b> (please read guidance note 6)		
Wed					
Thur			<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 7)		
Fri					
Sat					
Sun					

J

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 8)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 9)	On the premises	<input type="checkbox"/>			
				Off the premises	<input type="checkbox"/>			
				Both	X			
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 6)					
Mon	08.00	23.00						
Tue	08.00	23.00						
Wed	08.00	23.00						
Thur	08.00	23.00				<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 7)		
Fri	08.00	23.00						
Sat	08.00	23.00						
Sun	10.00	22.30						

K

<p><b>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</b> (please read guidance note 10).</p> <p>None</p>
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L

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 8)			<b>State any seasonal variations</b> (please read guidance note 6)
Day	Start	Finish	
Mon	07.00	23.00	
Tue	07.00	23.00	
Wed	07.00	23.00	
Thur	07.00	23.00	
Fri	07.00	23.00	
Sat	07.00	23.00	
Sun	07.00	23.00	
			<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 7)

Please identify those conditions currently imposed on the licence which you believe could be removed as a consequence of the proposed variation you are seeking.

At present the store closes at 18.00 but this will be extended to 23.00

Please tick as appropriate

- I have enclosed the premises licence
- I have enclosed the relevant part of the premises licence

If you have not ticked one of these boxes, please fill in reasons for not including the licence or part of it below

Reasons why I have not enclosed the premises licence or relevant part of premises licence.

**M** Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

**a) General – all four licensing objectives (b, c, d and e) (please read guidance note 11)**

Limit of people attendance Supervision on site at all times. The site has security cameras and lock down procedures	
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**b) The prevention of crime and disorder**

Supervision on site at all times. The site has theft / security processes and procedures Monitoring of persistent alcohol abuse from any person(s)	
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**c) Public safety**

Aware of overcrowding and limit of numbers. Signage to promote H&S and fire hazard	
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**d) The prevention of public nuisance**

Monitoring of noise levels Awareness of litter Providing smoking areas Aware of light pollution to neighbouring houses	
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**e) The protection of children from harm**

Security onsite Supervision at all times Evening hours children to be under adult supervision	
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Checklist:

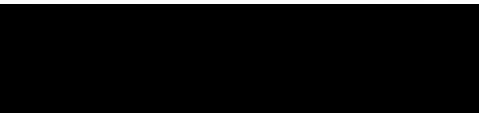
Please tick to indicate agreement

- I have made or enclosed payment of the fee; or X
- I have not made or enclosed payment of the fee because this application has been made in relation to the introduction of the late night levy.
- I have sent copies of this application and the plan to responsible authorities and others where applicable. X
- I understand that I must now advertise my application. X
- I have enclosed the premises licence or relevant part of it or explanation. X
- I understand that if I do not comply with the above requirements my application will be rejected. 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.**

**Part 5 – Signatures** (please read guidance note 12)

**Signature of applicant (the current premises licence holder) or applicant’s solicitor or other duly authorised agent** (please read guidance note 13). **If signing on behalf of the applicant, please state in what capacity.**

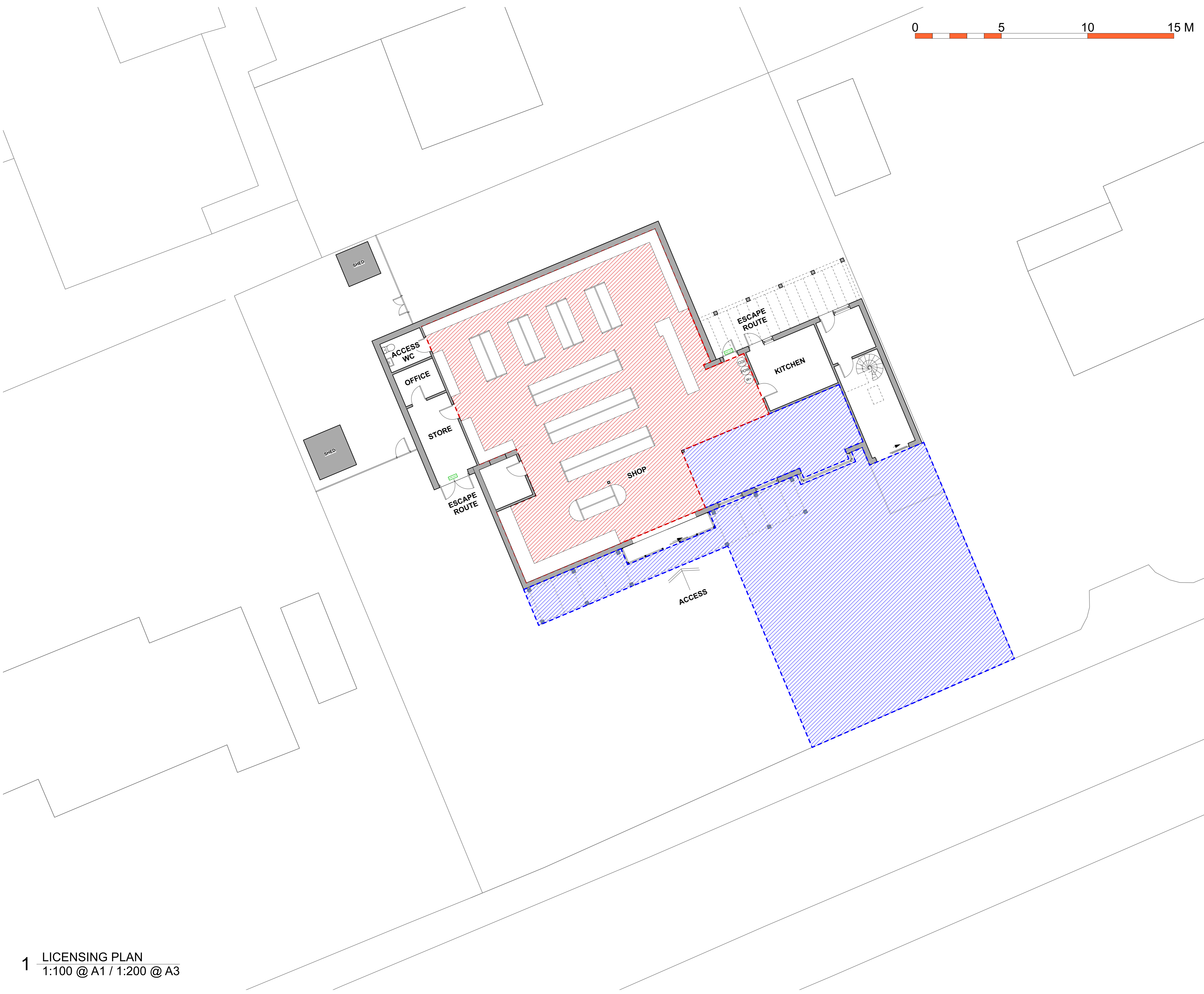
Signature		
Date	8/11/2022	
Capacity	Current Licence Holder	

**Where the premises licence is jointly held, signature of 2nd applicant (the current premises licence holder) or 2nd applicant’s solicitor or other authorised agent** (please read guidance note 14). **If signing on behalf of the applicant, please state in what capacity.**

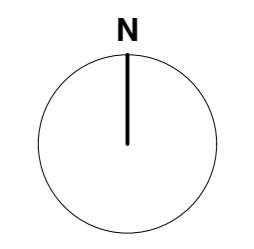
Signature	
Date	
Capacity	

**Contact name (where not previously given) and address for correspondence associated with this application** (please read guidance note 15)

<p>Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 15)</p>			
<b>Post town</b>		<b>Post code</b>	
<b>Telephone number (if any)</b>			



- 1 Do not scale off this drawing.
- 2 Any discrepancies to be referred to the Architect.
- 3 This drawing is to be read in conjunction with all relevant specifications and other drawings issued by the Architect, and other specialists
- 4 This drawing is copyright and is not to be reproduced without RRA permission.
- 5 IF IN DOUBT, ASK.



- KEY**
- Licensable Activity  
223 SQ.M
  - Area alcohol to be consumed  
242 SQ.M

FIRE EXIT Escape route

Fire extinguishers

- CO2 Carbon dioxide
- POW Powder
- W+ Water plus

Revisions in accordance with Licencing Officer comments			
Revision Description	Date	Check	Rev
20221114-			A



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Client :  
MR DAVIES

Project :  
MARDEN SHOP & POST OFFICE,  
MARDEN, HEREFORDSHIRE  
HR1 3EW

Drawing Title :  
PROPOSED LICENSE PLAN

Status	Date	Drawn By
STAT. AUTHORITY	MAY 2022	RJ
Drawing No.	Revision	Scale
3564 P(0) 101	A	1:100 @ A1