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 JUNIPER TREE CATERING LTD

(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

 A "Pop-Up Bar" on the site of

 The former Salterns Harbourside Hotel

 38 Salterns Way

 Post Town
 Poole

 Postcode
 BH14 8JR

Telephone number at premises (if any)	None at present
Non-domestic rateable value of premises	£None

Please tick as appropriate

Part 2 - Applicant details

a)

b)

c)

d)

e)

f)

g)

ga)

Please state whether you are applying for a premises licence as

independent hospital in England

an individual or individuals * please complete section (A) a person other than an individual * as a limited company/limited liability \boxtimes please complete section (B) i partnership ii as a partnership (other than limited please complete section (B) liability) as an unincorporated association or please complete section (B) iii iv other (for example a statutory corporation) please complete section (B) a recognised club please complete section (B) a charity please complete section (B) the proprietor of an educational establishment please complete section (B) a health service body please complete section (B) a person who is registered under Part 2 of the please complete section (B) Care Standards Act 2000 (c14) in respect of an independent hospital in Wales a person who is registered under Chapter 2 of please complete section (B) Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an

h)	the chief officer of police of a police force in	please complete section (B)
	England and Wales	

* 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

(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 Juniper Tree Catering Ltd
Address 12 Ashley Road Bournemouth BH1 4LQ
Registered number (where applicable) 11057805
Description of applicant (for example, partnership, company, unincorporated association etc.) Private Limited Company
Telephone number (if any) 07740097408 (Norman Gomes)
E-mail address (optional) Norman_gomes@hotmail.com

Part 3 Operating Schedule

When do you want the premises licence to start?

AS SOON AS POSSIBLE

DD)	MN	Л	YY	ΥY	r

 \boxtimes

DD		MM			YYYY		

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

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

A purpose built wooden cabin to cater for the retail sale of hot and cold food and drink (including alcoholic beverages) to consume on the terrace adjoining the cabin and adjacent lawned area or to take away to consume elsewhere.

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

Not applicable

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)

Prov	vision 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)					
Pro	<u>Provision of late night refreshment</u> (if ticking yes, fill in box I)					
<u>Sup</u>	Supply of alcohol (if ticking yes, fill in box J)					

In all cases complete boxes K, L and M

PLEASE NOTE THAT BOXES A TO I ARE BLANK AND HAVE NOT BEEN REPRODUCED IN THE INTEREST OF SAVING PAPER AND SUSTAINABILITY GENERALLY

J

Supply of alcohol Standard days and timings (please read guidance note 7)		nd read	Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises Off the premises	
Day	Start	Finish		Both	\square
Mon	08:00	23:00	State any seasonal variations for the supply of read guidance note 5)	alcohol (please	e
Tue	08:00	23:00	None.		
Wed	08:00	23:00			
Thur	08:00	23:00	Non standard timings. Where you intend to us for the supply of alcohol at different times to the supply of alc	nose listed in t	_
Fri	08:00	23:00	column on the left, please list (please read guida None.	nce note 6)	
Sat	08:00	23:00			
Sun	08:00	23:00			

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 Norman Gomes				
•]			
L				
Personal licence number (if known) BOP_M006048				
Issuing licensing authority (if known) Borough of Poole (now BCP 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 9).

No adult entertainment, services activities etc will be provided.

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)		olic nd read	State any seasonal variations (please read guidance note 5) None.
Day	Start	Finish	
Mon	08:00	23:00	
Tue	08:00	23:00	
Wed	08:00	23:00	
Thur	08:00	23:00	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 (please read guidance note 6)
Fri	08:00	23:00	None.
Sat	08:00	23:00	
Sun	08:00	23:00	

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)

The relevant mandatory conditions shall apply to the licence.

b) The prevention of crime and disorder

A selection of non-alcoholic beverages and light (food) refreshment shall be available at all times the premises are open.

The exterior terrace and serving area shall be covered by CCTV. Recordings shall be date and time stamped and retained for a minimum of 30 days. Facilities shall be made available for police and other authorised officers to view a play back of any recording immediately on request and to be provided with copies in playable format as soon as is reasonably practical.

The premises shall maintain an incident book and refusals register and use the same to record: All occasions when the supply of alcohol is refused and the reason for that refusal; and Any incident involving criminal, disorderly or anti-social behaviour occurring in the immediate vicinity of the premises and what action was taken regarding the same. The incident book and refusals register shall be checked by the DPS or their deputy at least weekly and signed and dated to that effect. The incident book and refusal register shall also be

c) Public safety

Note for information – there are no issues of public safety associated with this application and the applicant does not propose any specific conditions to promote this licensing objective.

made available for inspection by police and other authorised officers on request.

d) The prevention of public nuisance

The holder of the licence shall ensure that litter bins are made available for the use of customers and shall arrange for staff to regularly remove any litter whilst the premises are open and when they close each day and to dispose of the same responsibly.

Note that no music or other entertainment will be provided and no "noise conditions" are therefore proposed.

e) The protection of children from harm

The premises shall operate a "Challenge 25" scheme whereby any customer who appears to be under the age of 25 will be required to provide photographic proof of age in one or other of the forms prescribed by the mandatory conditions, before being served with alcohol.

All staff involved in the sale or supply of alcohol will be trained in licensing matters, this to include:

Prohibited sales (to those under 18 or who are drunk);

The age verification (Challenge 25) policy;

The conditions applying to the licence.

A written record of all training (and refresher training which must take place at least once every 6 months) will be maintained and made available for inspection by police or other authorised officers.

Μ

Checklist:

Please tick to indicate agreement

•	I have made or enclosed payment of the fee.	\boxtimes
•	I have enclosed the plan of the premises.	\boxtimes
•	I have sent copies of this application and the plan to responsible authorities and others where applicable.	\square
•	I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.	\boxtimes
•	I understand that I must now advertise my application.	\boxtimes
•	I understand that if I do not comply with the above requirements my application will be rejected.	\boxtimes
•	[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 (please read 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 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. **Part 4 – Signatures** (please read 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	 [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 (please read 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 (please see note 15) 	
Signature	Philip J Day for Laceys Solicitors LLP	
Date	19 th April 2021	
Capacity	Solicitors for the Applicant	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14) Philip Day Laceys Solicitors LLP				
9 Poole Road				
Post town	Bournemouth		Postcode	BH2 5QR
Telephone number (if any)01202 755216				
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) p.day@laceyssolicitors.co.uk				

Notes for Guidance

The Notes do not form part of the application form and have not been reproduced in the interest of sustainability.