

APPENDIX 2

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 Dolce Vita Poole Ltd

(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

Premises licence number BH183074

Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description 149 Commercial Road		
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Post town	Poole	Postcode
		BH14 0JD
Telephone number at premises (if any)		
Non-domestic rateable value of premises	£ 11500	

Part 2 – Applicant details

Daytime contact telephone number	01202 747775		
E-mail address (optional)			
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 x ☐ No

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

DD	MM	YYYY

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 x

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

Dolce Vita is a family owned Italian Restaurant which runs alongside Drift a cocktail bar. It has been based in Ashley Cross since 2014.

We would like to be able to offer our customers the opportunity to stay on site a little longer as we feel that there is a market for this and customers have been asking if it could be possible. An updated plan has been submitted.

Amendment of the hours of business on a Friday & Saturday plus bank and public holidays only.

Additional 50 mins for supply of alcohol & late night refreshment, from 02.00 to 02.50 hrs.

Additional Closing of 30 mins to 03.00 hrs.

Additional recorded music of 30 mins till 02.30 hrs.

All Bank Holidays and Public holidays to operate as above new hours.

All current conditions to remain with one exception.

2.5 Currently reads there will be no customer admittance after 1.30, this is to be removed.

Condition 2.2 to be amended along with the new security condition offered.

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:

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.

Provision of regulated entertainment (Please see guidance note 3) Please tick all that apply

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

Provision of late night refreshment (if ticking yes, fill in box I) x ☐

Supply of alcohol (if ticking yes, fill in box J) x ☐

In all cases complete boxes K, L and M

Recorded music Standard days and timings (please read guidance note 8)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 4)	Indoors	<input checked="" type="radio"/> <input type="checkbox"/>
				Outdoors	<input type="radio"/>
				Both	<input type="radio"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 5)		
Tue					
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 6)		
Thur					
Fri	09:00	02:30	<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> (please read guidance note 7)		
Sat	09:00	02:30	All Bank Holidays and Public holidays to operate these hours		
Sun					

Late night refreshment Standard days and timings (please read guidance note 8)			<u>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</u> (please read guidance note 4)	Indoors	<input checked="" type="radio"/> <input type="checkbox"/>
				Outdoors	<input type="radio"/>
				Both	<input type="radio"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 5)		
Tue					
Wed					

			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 6)		
Thur					
Fri	23:00	02:50	<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> (please read guidance note 7)		
Sat	23:00	02:50	All Bank Holidays and Public holidays to operate these hours		
Sun					
Supply of alcohol Standard days and timings (please read guidance note 8)			Will the supply of alcohol be for consumption – please tick (please read guidance note 9)	On the premises	<input type="radio"/>
				Off the premises	<input type="radio"/>
Day	Start	Finish		Both	<input checked="" type="radio"/> <input type="checkbox"/>
Mon			<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 6)		
Tue					
Wed					
Thur			<u>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</u> (please read guidance note 7)		
Fri	09:00	02:50	All Bank Holidays and Public holidays to operate these hours		
Sat	09:00	02:50			
Sun					

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 10). None

Hours premises are open to the public Standard days and timings (please read guidance note 8)			State any seasonal variations (please read guidance note 6)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thur			
Fri	09:00	03:00	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 7) All Bank Holidays and Public holidays to operate these hours
Sat	09:00	03:00	
Sun			

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. Remove 2.5

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)

All existing conditions to remain with exception of condition 2.5 which is to be removed and an amendment to 2.2 with updated security details, as below.

b) The prevention of crime and disorder

There will be an increase in the number of SIA to 3 from 23:00hrs to 03.30 or until the last customer has left the area.
Staff and security to use radios to communicate internally with each other at all times.
Security will be in contact with Pubwatch in the area and receive updates.

c) Public safety

d) The prevention of public nuisance

Recorded music will be reduced to a lower level between 12.30 and 02.30.
All music will be turned off by 02.30.
All existing conditions with regard to public nuisance will remain.
All customers shall be asked to leave quietly, clear signs shall be displayed to remind customers to leave quietly and have regard for neighbours.

e) The protection of children from harm

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee; or ☐
- 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.
- I understand that I must now advertise my application. ☒ ☐
- I have enclosed the premises licence or relevant part of it or explanation. ☐ I understand that
- xif I do not comply with the above requirements my application will ☐ be rejected.

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	L.johnson
Date	17/6/25
Capacity	Agent for Applicant

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)

Lesley Johnson

Post town		Post code
Telephone number (if any)		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)		



