

Premise Licence - THE FLAG

Applicant's details

Name: christine westbrook

Address: [REDACTED]

Email address: [REDACTED]

Phone numbers:

[REDACTED]

Date of birth: [REDACTED]

Applicant's nationality: BRITISH

Is the applicant entitled to work in the UK:Yes

Does the Main applicant have a 'Right To Work Share Code' supplied by the Home Office?

No

Enter the 9 digit 'Right to Work Share Code';

In what capacity are you applying for the premises licence?an individual or individuals

Persons applying as individual(s) or persons other than individual(s), please confirm:am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities

Premise Details

Name of premises: THE FLAG

Company name: THE CHEQUERED FLAG

Company number:

Phone number of premise: 07841374441

Address:

32 Borough Street

Castle Donington

DE74 2LA

Please give a description of the premises: AN EXISTING BAR .GROUND FLOOR

ONLY.SINGLE DOOR ENTRANCE FROM THE STREET ,
RETAIL SALES AREA WITH BAR COUNTER , TO THE REAR IS A CHILLER CONTROLLED
CELLAR . SINGLE TOILET AN REAR KITCHEN , A REAR DOOR OPENS TO A SHARED
ASSESS TO A SIDE STREET OFF CHURCH LANE ,
FIRE ACCESS VIA THE FRONT AND REAR DOOR

Non-domestic rateable value of premise: Band A - None to £4,300

Premise licence

When do you want the premises licence to start?01/04/2024

Do you wish the licence to be valid for a limited period?No

Do you expect 5,000 or more people to attend the premises at any one time?No

Opening Days

Monday: Yes

Opening time: 16:00

Closing time: 22:30

Tuesday: Yes

Opening time: 16:00

Closing time: 22:30

Wednesday: **Yes**

Opening time: 16:00

Closing time: 22:30

Thursday: Yes

Opening time: 16:00

Closing time: 22:30

Friday: Yes

Opening time: 14:00

Closing time: 23:00

Saturday: Yes

Opening time:

Closing time:

Sunday: Yes

Opening time: 12:00

Closing time: 22:30

List the times when you intend the premises to be open to the public at different times than those listed above. For example (but not exclusively), where the activity will occur on additional days during the summer months.

MAY MARKET . THE WAKES . DOWNLOAD

State any season variations for the hours the premises will be open to the public. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

CHRISTMAS EVE NEW YEARS EVE

Licensable activities

Plays: No

Films: No

Indoor sporting events: No

Boxing or wrestling: No

Live music: No

Recorded music: No

Performance of dance: No

Anything of a similar description to the above that does not fit into a single

category: No

Provision of late night refreshment: No

Supply of alcohol: Yes

Standard Days and Timings

Monday start time: 16:00

Monday finish time: 22:00

Tuesday start time: 16:00

Tuesday finish time: 22:00

Wednesday start time: 16:00

Wednesday finish time: 10:00

Thursday start time: 16:00

Thursday finish time: 10:00

Friday start time: 14:00

Friday finish time: 10:30

Saturday start time: 12:00

Saturday finish time: 10:30

Sunday start time: 12:00

Sunday finish time: 10:00

List the times when you intend to use the premises for the activities at different times than those listed above. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

12,00 TO 11,30

Additional details of the activities

Where will the activities take place. Where taking place in a building or other structure please select as appropriate (indoors may include a tent).

Both

Please give further details of the indoor sporting event here. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not

exclusively) whether or not music will be amplified or unamplified.

N/A

State any seasonal variations for the activities. For example (but not exclusively), where the activity will occur on additional days during the summer months.

Designated Premise Supervisor

Title: Mrs

First Name: CHRISTINE

Surname: WESTBROOK

Date of birth: [REDACTED]

Age: [REDACTED]

Place of birth: [REDACTED]

Personal licence number (if known): NWL11578

Do they live within the District: Yes

Address:

[REDACTED]

[REDACTED]

[REDACTED]

Do you have the consent form signed by the individual you wish to be designated premises supervisor? Yes

Licensing Objectives

General - all licensing objectives: CLEARLY DISPLAY ABV VOLUMES FOR ALL BEERS CIDER WINES AND SPIRITS . CARRY NON ALCOHOL PRODUCT . CLEARLY DISPLAY SERVICE BY VOLUME ACROSS ALL ALCHOLIC DRINKS . HAVE A MANAGEMENT PLAN REGARDING FIRE , ENVIRONMENT , CHANGES TO REGULATIONS . ENSURE ALL STAFF ARE AWARE OF THE WRITTEN PLAN . INSURE ALL STAFF ARE AUTHORISED TO SELL ALCOHOL BY THE DPS OR PERSONAL LICENSE HOLDER AND DISPLAY THE AUTHORITY IN A DESIGNATED AREA .

The prevention of crime and disorder: MEET AND GREET CUSTOMERS IN A CIVIL MANNER . ALL STAFF TO BE DELIGENT AND AWARE OF POSSIBLE INCIDENTS . HAVE A NO DRUG

POLICY . HAVE A REACTIVE APPROACH TO POTENTIAL PROBLEMS AND APPROACH INDIVIDUALS TO CALM ANY PROBLEMS TRY TO ISOLATE AN INDIVIDUAL TO SETTLE ANY ISSUES USING A POLICY APPROACH RATHER THAN APPROACHING IT PERSONALLY . REFUSE SERVICE TO ANY DRUNKEN INDIVIDUAL OR GROUP . REGULARLY CLEAR GLASSWARE FROM TABLES .KEEP AN INCIDENT BOOK AND CCTV RECORDS . CONTACT LOCAL POLICE FOR ASSISTANCE AND ADVISE NWL IF NECESSARY

Public safety: HAVE CLEAR SIGNAGE SHOWING FIRE EXITS TO THE FRONT AND REAR AND THE ROUTE TO THE ACCESS POINTS . HAVE A DESIGNATED ASSEMBLY POINT TO CHECK IF ALL CUSTOMERS ARE ACCOUNTED FOR . ENSURE SAFE ACCESS FROM THE MAIN ENTRANCE . REGULARLY ATTEND TABLES TO CLEAR GLASSWARE .

The prevention of public nuisance: ASK CUSTOMERS TO LEAVE QUIETLY TO RESPECT NEIGHBOURS .ENSURE NO LOUD AHHOC MUSIC AND EXCESSIVE NOICE IN GENERAL . CONTACT POLICE AND NWL IF THINGS GET OUT OF HAND . CONTACT OTHER PUBLICANS OF INDIVIDUALS OR GROUPS

The protection of children from harm: DO NOT SELL ALCOHOL TO A MINOR . IMPLEMENT AN AGE IDENTITY POLICY VIA DRIVING LICENCE AND ACCEPTED AGE DOCUMENT . CLEARLY DISPLAY AGE RESTRICTION POLICY . ENSURE A MINOR AGE POLICY IS CLEARLY DISPLAYED ENSURE ALL MINORS ARE ACCOMPANIED BY AN ADULT . RESTRICT THE ACCESS TIME TO WHEN THE MINOR MUST BE OUT OF THE BUILDING

Declaration

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 or 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.

[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.

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.

By ticking this box, I hereby certify the information contained in this form is correct to the best of my knowledge and belief and agree to all the above statements. Ticking this box deems this form to be

signed and carries the same legal obligation as a written signature. Yes

Payment Details

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

