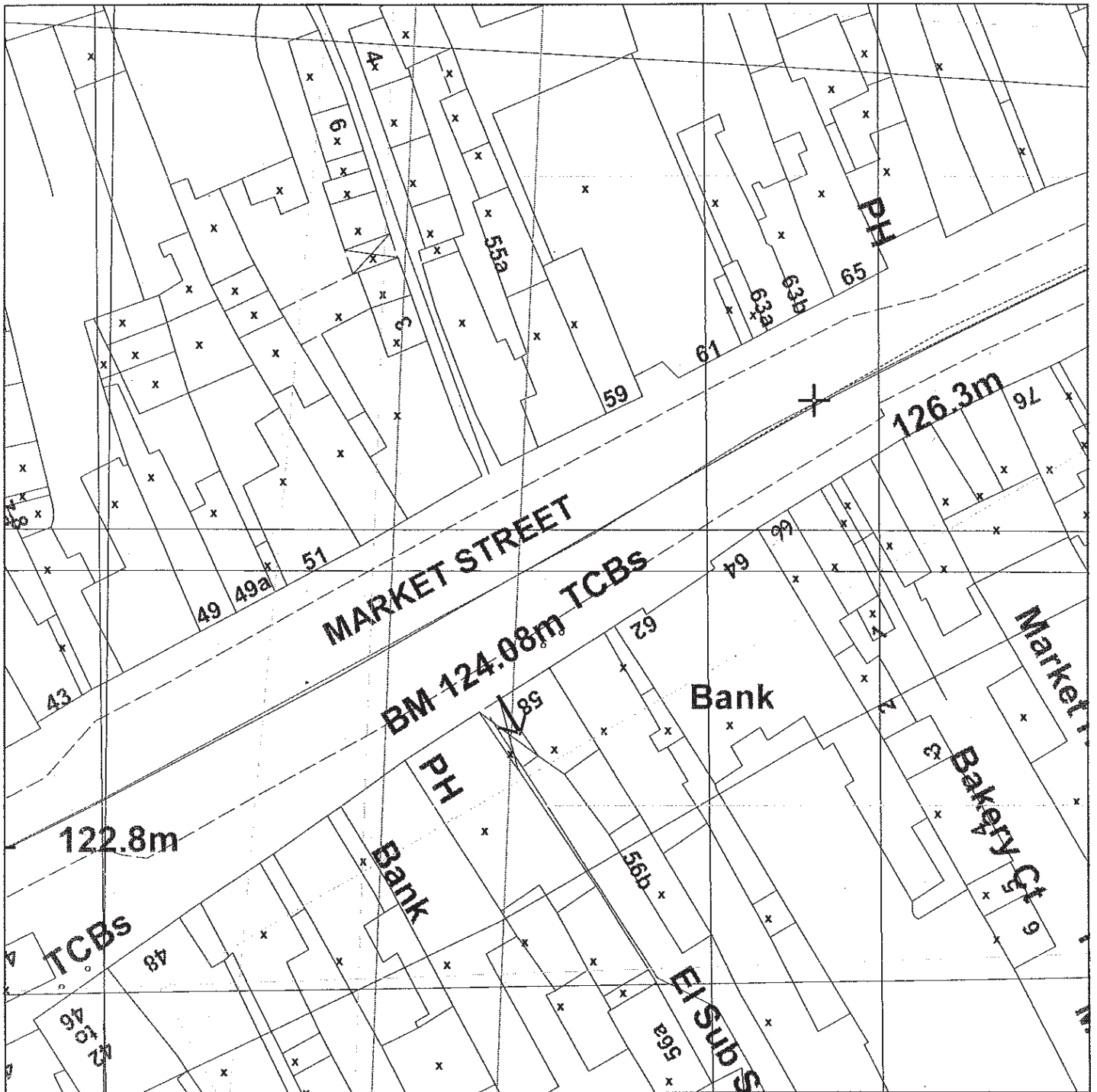
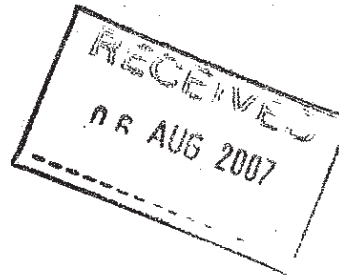


# APPENDIX.1



Km 0.01 0.02 0.03 0.04 0.05 0.06



SCHEDULE 2

Regulation 10

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.

We BUTTY MONKEYS LTD T/A SUBWAY apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and 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 <u>66 MARKET STREET</u>	
Post town <u>ASHBY DE LA ZOUCH</u>	Post code <u>LE65 1AN</u>
Telephone number at premises (if any)	
Non-domestic rateable value of premises	<u>£ 12,250</u>

Part 2 – Applicant details

Please state whether you are applying for a premises licence as

Please tick ✓ YES

- a) an individual or individuals\*  please complete section (A)
- b) a person other than an individual\*
  - i. as a limited company  please complete section (B)
  - ii. as a partnership  please complete section (B)
  - iii. as an unincorporated association or  please complete section (B)
  - iv. other (for example a statutory corporation)  please complete section (B)

- c) a recognised club  please complete section (B)
- d) a charity  please complete section (B)
- e) the proprietor of an educational establishment  please complete section (B)
- f) a health service body  please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital  please complete section (B)
- h) the chief officer of police of a police force in England and Wales  please complete section (B)

\* If you are applying as a person described in (a) or (b) please confirm:

Please tick  YES

- 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

**(A) INDIVIDUAL APPLICANTS (fill in as applicable)**

Mr  Mrs  Miss  Ms  Other title (eg Rev)

Surname	First names
---------	-------------

I am 18 years old or over  Please tick  YES

Current postal address if different from premises address	
Post town	Post code
Daytime contact telephone number	E-mail address (optional)

**SECOND INDIVIDUAL APPLICANT (IF APPLICABLE)**

Mr  Mrs  Miss  Ms  Other title (eg Rev)

Surname	First names
---------	-------------

I am 18 years old or over  Please tick  YES

Current postal address if different from premises address	
Post town	Post code
Daytime contact telephone number	
E-mail address (optional)	

**(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	BUTTY MONKEYS LTD T/A SUBWAY
Address	32 WOODLANDS DRIVE LOUGHBOROUGH LE11 2DD
Registered number (where applicable)	5818269
Description of applicant (for example partnership, company, unincorporated association)	LIMITED COMPANY
Telephone number, (if any)	07956 454532
E mail address (optional)	julienyland@msn.com

**Part 3 - Operating Schedule**

When do you want the premises licence to start?

Please tick  YES

Day	Month	Year
23	08	2007

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

Day Month Year

--	--	--	--	--	--	--	--

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

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

TOWN CENTRE 3 STOREY PREMISES,  
GROUND FLOOR FOR CUSTOMERS WITH  
SERVING & SEATING AREA, FIRST FLOOR  
WILL BE PREPING AREA & OFFICE,  
AND SECOND FLOOR WILL BE USED  
FOR STORAGE ONLY.

WE WILL PROVIDE FOOD FOR THE GENERAL  
PUBLIC AND ALSO DRINKS TO EAT IN  
OR TAKEAWAY

Which licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Please tick ✓ YES

**Provision of regulated entertainment:**

- (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 entertainments (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)

**Provision of entertainment facilities for:**

- (i) making music (optional, fill in box I)
- (j) dancing (optional, fill in box J)
- (k) entertainment of a similar description to that falling within (i) or (j) (optional, fill in box K)

**Provision of late night refreshment** (optional, fill in box L)

**Supply of alcohol** (optional, fill in box M)

**In all cases complete boxes N, O and P (optional)**

**A**

Plays			Will the performance of a play take place Indoors or outdoors or both - please tick ✓ (please read guidance note 2)	Indoors	
Standard days and timings (please read guidance note 6)				Outdoors	
Day	Start	Finish	Both		
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed					
Thur			State any seasonal variations for performing plays (please read guidance note 4)		
Fri					
Sat			Non standard timings. Where you intend to use the premises for the performance of plays at different times from those listed in the column on the left, please list (please read guidance note 5)		
Sun					

**B**

<b>Films</b> Standard days and timings (please read guidance note 1)			Will the exhibition of films take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	
				Outdoors	
			Both		
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue					
Wed			State any seasonal variations for exhibition of films (please read guidance note 4)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the exhibition of films at different times from those listed in the column on the left, please list (please read guidance note 5)		
Sat					
Sun					

**C**

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			Please give further details here (please read guidance note 3)		
Day	Start	Finish			
Mon			State any seasonal variations for indoor sporting events (please read guidance note 4)		
Tue					
Wed					
Thur			Non standard timings. Where you intend to use the premises for indoor sporting events at different times from those listed in the column on the left, please list (please read guidance note 5)		
Fri					
Sat					
Sun					

**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 1)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)		Indoors	
					Outdoors	
					Both	
Day	Start	Finish	Please give further details here (please read guidance note 3)			
Mon						
Tue						
Wed						
Thur			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)			
Fri			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 (please read guidance note 5)			
Sat						
Sun						

**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)		Indoors	
					Outdoors	
					Both	
Day	Start	Finish	Please give further details here (please read guidance note 3)			
Mon						
Tue						
Wed						
Thur			State any seasonal variations for the performance of live music (please read guidance note 4)			
Fri			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 5)			
Sat						
Sun						



**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors <input checked="" type="checkbox"/>	
				Outdoors <input type="checkbox"/>	
				Both <input type="checkbox"/>	
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon	0700	2400	THIS WILL BE BACKGROUND MUSIC ONLY		
Tue	0700	2400			
Wed	0700	2400			
			State any seasonal variations for playing recorded music (please read guidance note 4)		
Thur	0700	2400	Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)		
Fri	0700	0300			
Sat	0700	0300			
Sun	0800	2300	CHRISTMAS EVE 0700 - 0300 NEW YEARS EVE 0700 - 0300		

**G**

<b>Performance of dance</b> Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors <input type="checkbox"/>	
				Outdoors <input type="checkbox"/>	
				Both <input type="checkbox"/>	
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue					
Wed					
			State any seasonal variations for the performance of dance (please read guidance note 4)		
Thur			Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)		
Fri					
Sat					
Sun					

**H**

<b>Anything of a similar description to that falling within (e), (f), or (g)</b> Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment that you will be providing		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	
				Outdoors	
				Both	
			Please give further details here (please read guidance note 3)		
Mon			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)		
Tue					
Wed			Non standard timings. Where you intend to use the premises for entertainment of a similar description to that falling within (e), (f) or (g) at different times from those listed in the column on the left, please list (please read guidance note 5)		
Thur					
Fri					
Sat					
Sun					

**I**

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			Please give a description of the facilities for making music that you will be providing		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	
				Outdoors	
				Both	
			Please give further details here (please read guidance note 3)		
Mon			State any seasonal variations for the provision of facilities for making music (please read guidance note 4)		
Tue					
Wed			Non standard timings. Where you intend to use the premises for the provision of facilities for making music entertainment at different times from those listed in the column on the left, please list (please read guidance note 5)		
Thur					
Fri					
Sat					
Sun					

**J**

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick ✓  (please read guidance note 2)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	Please give a description of the type of facilities for dancing that you will be providing		
Mon					
Tue					
Wed			State any seasonal variations for providing dancing facilities (please read guidance note 4)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the provision of facilities for dancing at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sat					
Sun					

**K**

<b>Provision of facilities for entertainment of a similar description to that falling within J or K</b> Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment facility you will be providing		
Day	Start	Finish	Will the entertainment facility be indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	
				Outdoors	
				Both	
			Please give further details here (please read guidance note 3)		
Mon			State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within (j) or (k) (please read guidance note 4)		
Tue					
Wed			Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within (j) or (k) at different times to those listed in the column on the left, please list (please read guidance note 5)		
Thur					
Fri					
Sat					
Sun					

L

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick ✓ (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon	0700	2400			
Tue	0700	2400			
Wed	0700	2400	State any seasonal variations for the provision of late night refreshment (please see guidance note 4)		
Thur	0700	2400			
Fri	0700	0300			
Sat	0700	0300	Non standard timings. Where you intend to use the premises for the provision of late night entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)		
Sun	0800	2300	CHRISTMAS EVE 0700 - 0300		
			NEW YEARS EVE 0700 - 0300		

M

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption please tick box ✓ (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon					
Tue					
Wed					
Thur			Non standard timings. Where you intend to use the premises for the supply of alcohol at different times from those listed in the column on the left, please list (please read guidance note 5)		
Fri					
Sat					
Sun					

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

Name ..... JULIE NYLAND .....

Address ..... 32 WOODLANDS DRIVE .....

..... LOUGHBOROUGH .....

Postcode ..... LE11 2DD .....

Personal Licence number (if known) ..... 0010907 .....

Issuing Licensing Authority (if known) ..... STRATFORD UPON AVON .....

**N**

Please highlight any adult entertainment services, activities, or other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please see guidance note 8)

**O**

<b>Hours premises are open to the public</b> Standard timings (please read guidance note 6)			State any seasonal variation (please read guidance note 4)
Day	Start	Finish	Non standard timings. Where you intend to use 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 5)  <u>CHRISTMAS EVE</u> <u>0700 - 0300</u>  <u>NEW YEARS EVE</u> <u>0700 - 0300</u>
Mon	<u>0700</u>	<u>2400</u>	
Tue	<u>0700</u>	<u>2400</u>	
Wed	<u>0700</u>	<u>2400</u>	
Thur	<u>0700</u>	<u>2400</u>	
Fri	<u>0700</u>	<u>0300</u>	
Sat	<u>0700</u>	<u>0300</u>	
Sun	<u>0800</u>	<u>2300</u>	

P

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

(a) General – all four licensing objectives (b, c, d, e) (please read guidance note 9)

- use of cameras to monitor all areas of property to help control behaviour of staff + customers  
- conform to all legislation regarding H+S + fire regulations  
- Ensure Risk Assessments are carried out and monitored regularly

(b) The prevention of crime and disorder

To prevent crime and disorder we intend to  
1) Install panic buttons in the shop  
2) Use a drop safe to ensure less cash is kept in the till  
3) Install CCTV to monitor all activity

(c) Public safety

To ensure public safety we intend to  
1) ~~Keep~~ Install fire smoke detectors  
2) Keep store tidy + all exits clear from rubbish  
3) Use only plastic/paper cups + plates

(d) The prevention of public nuisance

To prevent public nuisance we intend to  
1) Keep outside area clean + tidy from litter  
2) Monitor behaviour of customers at key times of the evening or day

(e) The protection of children from harm

To ~~protect~~ protect children from harm  
1) Do not allow alcohol on the premises  
2) Keep staff areas locked to prevent access

Please tick ✓ YES

- I have made or enclosed payment of the fee
- I have enclosed the plan of the premises
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable  *N/A*
- I understand that I must now advertise my application
- I understand that if I do not comply with the above requirements my application will be rejected

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 OF THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION.

**Part 4 – Signatures** (please read guidance note 10)

**Signature of applicant or applicant's solicitor or other duly authorised agent.** (See guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

Signature ..... *J. Nyland*  
Date ..... *19-7-07*  
Capacity ..... *COMPANY SECRETARY*

**For joint applications signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent.** (Please read guidance note 12). **If signing on behalf of the applicant please state in what capacity.**

Signature .....  
Date .....  
Capacity .....

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

*JULIE NYLAND  
32 WOODLANDS DRIVE  
~~12~~*

Post town *LOUGHBOROUGH* Post code *LE11 2DD*

Telephone number (if any) .....

If you would prefer us to correspond with you by e-mail your e-mail address (optional)  
*julienyland@msn.com*

## Notes for guidance

1. Describe the premises. For example the type of premises it is, its general situation and layout and any other information which would be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off supplies you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. 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.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day i.e. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.



## APPENDIX.3

# INDEPENDENT INSURANCE BUREAU LTD

*Independent Insurance Adviser*

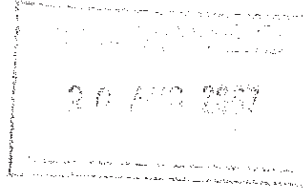
68 Market Street,  
Ashby-de-la-Zouch,  
Leicestershire,  
LE65 1AN.  
Tel: (01530) 415271  
Fax: (01530) 560156.

Email:  
ashby@iibinsurance.co.uk

JC/LS

29<sup>th</sup> August 2007

North West Leicestershire District Council  
Council Offices  
Coalville  
Leicestershire. LE67 3FJ



Dear Sirs,

**Re: Application for a new premises licence**  
**Butty Monkeys Ltd t/a Subway**  
**66 Market Street, Ashby-de-la-Zouch, LE65 1AN**

We refer to the notice located on the door of 66 Market Street dated 3<sup>rd</sup> August 2007 which is an application for a licence to use the premises known as Subway of 66 Market Street for the purpose of late night refreshments and we would like to register our objection to the licence being granted.

Our reasons are as follows:

If late night refreshments were to be served then the premises can be used by customers who may have been drinking at other premises earlier in the evening (of which there are numerous within the town centre) thereby creating the potential for disorder on or near 66 Market Street.

Large numbers of customers may gather and there is a potential for nuisance and disturbance for local residents as they congregate near the premises, not to mention the likelihood of litter, vomit and urine in the immediate vicinity of 66 Market Street.

We are situated next door to the premises and have recently had our shopfront refurbished. The window sill is just the right height to provide a perch which to date has not posed a problem as we are not in the vicinity of any late night refreshment premises and do not have crowds congregating outside our premises.

As a professional business we do not wish to have our recently refurbished shop front littered with rubbish nor the possibility of our doorway being used as a public lavatory by patrons of or others waiting for patrons of Subway.

The nature of the type of food that Subway retail leads to more chance of litter as they serve baguette type bread with copious amounts of filling which even someone completely sober finds difficult to keep restrained.

Subway have an outlet in Coalville, population circa 33,000, the population of Ashby-de-la-Zouch being somewhat 20,000 less than Coalville at circa 13,000 (Source: North West Leicestershire Community Profile 2005) and the opening hours for the outlet in Coalville, according to Subways website, do not extend past 11pm.

Directors: J.M. Crocker ALIA(dip), MSFA  
D. Brown I.R.I.B.  
C. Gadsby  
P.L. Gadsby ACII, Cert PFS  
Chartered Insurance Practitioner



**Independent  
Insurance Bureau Ltd.**

*Registered Office:*  
95 High Street, Ibstock,  
Leicestershire LE67 6LJ  
Registered in Cardiff No: 3353831

# INDEPENDENT INSURANCE BUREAU LTD

*Independent Insurance Adviser*

68 Market Street,  
Ashby-de-la-Zouch,  
Leicestershire,  
LE65 1AN.


Tel: (01530) 415271  
Fax: (01530) 560156.

Email:  
ashby@iibinsurance.co.uk

We acknowledge that Ashby-de-la-Zouch has many visitors but surely we want them to see Ashby the town on the weekends not Ashby the local tip. The possibility of increased litter being strewn about the town will add to the cost of maintaining a clean and tidy town and it will be US as a local business that will be expected to foot the bill for the added expense.

If this licence is approved we would have to consider putting up steel shutters to combat the nuisance, as we are sure many other businesses on Market Street would consider doing also.

Yours faithfully,



J. M. Crocker Dip PFS  
Director

Directors: J.M. Crocker ALIA(dip), MSFA  
D. Brown I.R.I.B.  
C. Gadsby  
P.L. Gadsby ACII, Cert PFS  
Chartered Insurance Practitioner



**Independent  
Insurance Bureau Ltd.**

*Registered Office:*  
95 High Street, Ibstock,  
Leicestershire LE67 6LJ  
Registered in Cardiff No: 3353831