

**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 **MR HIMMET KAYA**

*(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 000001644
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**Part 1 – Premises Details**

Postal address of premises or, if none, ordnance survey map reference or description TAMWORTH PIZZA AND KEBAB HOUSE 55 LOWER GUNGATE TAMWORTH
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Post town	TAMWORTH	Postcode	B79 7AS
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Telephone number at premises (if any)	01827 66222
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Non-domestic rateable value of premises	£
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**Part 2 – Applicant details**

Daytime contact telephone number			
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

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

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

Do you want the proposed variation to have effect in relation to the introduction of the late night levy? (Please see guidance note 1)  NOT APPLICABLE

<p><b>Please describe briefly the nature of the proposed variation (Please see guidance note 2)</b></p> <p>TO EXTEND THE OPENING HOURS FROM 2 AM UNTIL 4 AM ON FRIDAY (SATURDAY MORNING) AND SATURDAY (SUNDAY MORNING) ONLY, AND ON CHRISTMAS EVE, NEW YEARS' EVE AND BANK HOLIDAYS</p> <p>TO INCLUDE ADDITIONAL CONDITIONS/PROVISIONS RELATING TO DOOR SUPERVISION – SEE SEPARATE DOCUMENT/ATTACHMENT</p> <p>TO DELETE CONDITION 15 RELATING TO ADMITTANCE OF CHILDREN</p>
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If your proposed variation would mean that 5,000 or more people are expected to attend the premises at any one time, please state

N/A
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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 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)

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

Y

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

**In all cases complete boxes K, L and M**

**A**

<b>Plays</b> Standard days and timings (please read guidance note 7)			<b><u>Will the performance of a play take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	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 4)		
Mon					
Tue			<b><u>State any seasonal variations for performing plays</u></b> (please read guidance note 5)		
Wed					
Thur			<b><u>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</u></b> (please read guidance note 6)		
Fri					
Sat					
Sun					

**B**

<b>Films</b> Standard days and timings (please read guidance note 7)			<b><u>Will the exhibition of films take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 4)		
Mon	-----	-----			
Tue	-----	-----			
Wed	-----	-----			
Thur	-----	-----			
Fri	-----	-----			
Sat	-----	-----			
Sun	-----	-----			
			<b><u>State any seasonal variations for the exhibition of films</u></b> (please read guidance note 5)		
			<b><u>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</u></b> (please read guidance note 6)		



**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 7)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	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 4)		
Mon	.....	.....			
Tue	.....	.....	<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 5)		
Wed	.....	.....			
Thur	.....	.....	<b><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></b> (please read guidance note 6)		
Fri	.....	.....			
Sat	.....	.....			
Sun	.....	.....			

**E**

<b>Live music</b> Standard days and timings (please read guidance note 7)			<b><u>Will the performance of live music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	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 4)		
Mon	-----	-----			
Tue	-----	-----			
Wed	-----	-----	<b><u>State any seasonal variations for the performance of live music</u></b> (please read guidance note 5)		
Thur	-----	-----			
Fri	-----	-----	<b><u>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</u></b> (please read guidance note 6)		
Sat	-----	-----			
Sun	-----	-----			

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 7)			<b><u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	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 4)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 5)		
Thur					
Fri			<b><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></b> (please read guidance note 6)		
Sat					
Sun					

# G

Performances of dance Standard days and timings (please read guidance note 7)			<b><u>Will the performance of dance take place indoors or outdoors or both – please tick</u></b> (please read guidance note 3)	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 4)		
Mon	.....	.....			
Tue	.....	.....			
Wed	.....	.....	<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 5)		
Thur	.....	.....			
Fri	.....	.....	<b><u>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</u></b> (please read guidance note 6)		
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 7)			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 3)	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 4)		
Wed					
Thur					
Fri			<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 5)		
Sat					
Sun					
			<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 6)		

1

Late night refreshment Standard days and timings (please read guidance note 7)			<u>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	Y
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon	23.00	02.00	<u>Please give further details here</u> (please read guidance note 4)		
Tue	23.00	02.00			
Wed	23.00	02.00	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)  CHRISTMAS EVE, NEW YEARS' EVE AND BANK HOLIDAYS		
Thur	23.00	02.00			
Fri	23.00	04.00	<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 6)		
Sat	23.00	04.00			
Sun	23.00	02.00			

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b><u>Will the supply of alcohol be for consumption – please tick</u></b> (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>State any seasonal variations for the supply of alcohol</u></b> (please read guidance note 5)		
Mon	-----	-----			
Tue	-----	-----			
Wed	-----	-----			
Thur	-----	-----			
Fri	-----	-----			
Sat	-----	-----			
Sun	-----	-----			
			<b><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></b> (please read guidance note 6)		

**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).

NONE

L

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 7)			<b><u>State any seasonal variations</u></b> (please read guidance note 5)  CHRISTMAS EVE, NEW YEARS' EVE AND BANK HOLIDAYS
Day	Start	Finish	<b><u>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</u></b> (please read guidance note 6)
Mon	09.00	02.00	
Tue	09.00	02.00	
Wed	09.00	02.00	
Thur	09.00	02.00	
Fri	09.00	04.00	
Sat	09.00	04.00	
Sun	09.00	02.00	

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.

NOT AS A CONSEQUENCE OF THIS APPLICATION BUT WE ARE APPLYING FOR CONDITION 15 TO BE REMOVED AS WE DO NOT FEEL IT IS NECESSARY OR REASONABLE

Please tick as appropriate

- I have enclosed the premises licence NO
- I have enclosed the relevant part of the premises licence NO

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.

BECAUSE WE ARE REQUIRED TO ENSURE THE CURRENT LICENCE IS ON THE PREMISES AND AVAILABLE FOR INSPECTION AT ALL TIMES. HOWEVER, IF YOU STILL REQUIRE THE CURRENT LICENCE THIS CAN BE DELIVERED TO THE COUNCIL OFFICES PROMPTLY

## **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 10)**

**SEE ATTACHED FOR PROPOSED CONDITIONS/PROVISIONS RELATING TO DOOR SUPERVISION**

**b) The prevention of crime and disorder**

**SEE ATTACHED**

**c) Public safety**

**SEE ATTACHED**

**d) The prevention of public nuisance**

**SEE ATTACHED**

**e) The protection of children from harm**

NONE REQUIRED

**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 if I do not comply with the above requirements my application will be  
rejected.

**IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING  
LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT  
2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION.**

**Part 5 – Signatures** (please read guidance note 11)

**Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (please read guidance note 12). If signing on behalf of the applicant, please state in what capacity.**

Signature	R. EVANS, CROFT CONSULTING LTD
Date	17 NOV 2015
Capacity	AGENT

**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 13). 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 14)**

RAY EVANS

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)	

## Notes for Guidance

**This application cannot be used to vary the licence so as to extend the period for which the licence has effect or to vary substantially the premises to which it relates. If you wish to make that type of change to the premises licence, you should make a new premises licence application under section 17 of the Licensing Act 2003.**

1. You do not have to pay a fee if the only purpose of the variation for which you are applying is to avoid becoming liable to the late night levy.
2. Describe the premises. For example the type of premises, its general situation and layout and any other information which could 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.
3. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
4. For example state 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.
5. For example (but not exclusively), where the activity will occur on additional days during the summer months.
6. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
7. 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.
8. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
9. 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 or the presence of gaming machines.
10. Please list here steps you will take to promote all four licensing objectives together.
11. The application form must be signed.
12. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
13. Where there is more than one applicant, each of the applicants or their respective agents must sign the application form.
14. This is the address which we shall use to correspond with you about this application.

## ATTACHMENT : PROPOSED ADDITIONAL CONDITIONS/PROVISIONS RELATING TO DOOR SUPERVISION

A written record shall be kept on the premises by the Designated Premises Supervisor of every person employed on the premises as a door supervisor in a register kept for that purpose. That record shall contain the following details:

- The door supervisor's name, date of birth and home address
- His/her Security Authority licence number
- The time and date that he/she starts and finished their duty
- Each entry shall be signed by the door supervisor
- The company name, address, contact number and contact name for all supervisors working at the premises

The register shall be kept fully updated at all times and remain at the licensed premises and be available for inspection at the time of the visit upon request by any Responsible Authority.

A minimum of ONE Security Industry Authority (SIA) registered door supervisors must be present when the premises are open for trade between the hours of 0200 and 0400hrs and must remain at the premises until such time that the premises are closed and all members of the public have left the venue.

Door supervisors must be employed at a ratio agreed by the police should the venue be open on any bank holiday, Sunday prior to a bank holiday, Christmas Eve or New Year's Eve from 0200 to 0400hrs until the terminal hour when all customers have left and the premises is closed.

When door supervisors are employed at the premises they must be sufficient in number to be able to control entry to the premises and deal with any instances of disorderly behaviour within the premises simultaneously.

Door supervisors must wear yellow high visibility jackets clearly indicating their role and enabling the clear display of SIA Authority.

All door supervisors must remain in contact with each other via means of a recognised and approved internal radio communication system agreed and accepted by the Chief Constable.

All door supervisors must be provided with and use ear pieces connected to any radio system to ensure that they can communicate effectively unless they can provide medical evidence to prove that due to an existing medical condition this would not be possible.

One member of the door team shall be in possession of a recognised body worn camera and record any incidents of violence and disorder that occur at the premises.

The door supervisor with responsibility for the body worn camera must wear identification clearly depicting that a body worn camera is in use at the premises or signage displayed at the point of entry to indicate this fact.

The body camera footage must be able to be downloaded immediately in a recognised format to the Police and Responsible Authorities.

The body camera footage must be retained for 31 days