

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 ANDREW MCGUINNESS (SPS ELECTRICAL 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

32 UPPER HIGBERT LANE  
MARPLE

Post town	STOCKPORT	Postcode	SK6 7HA
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Telephone number at premises (if any)	
Non-domestic rateable value of premises	£ 5200

Part 2 - Applicant details

Please state whether you are applying for a premises licence as Please tick as appropriate

- |  |   |
|--|---|
| a) an individual or individuals * <input type="checkbox"/>                               | <input type="checkbox"/> please complete section (A)            |
| b) a person other than an individual *   |   |
| i as a limited company/limited liability partnership <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> please complete section (B) |
| ii as a partnership (other than limited liability) <input type="checkbox"/>              | <input type="checkbox"/> please complete section (B)            |
| iii as an unincorporated association or <input type="checkbox"/>                         | <input type="checkbox"/> please complete section (B)            |
| iv other (for example a statutory corporation) <input type="checkbox"/>                  | <input type="checkbox"/> please complete section (B)            |
| c) a recognised club <input type="checkbox"/>  | <input type="checkbox"/> please complete section (B)            |
| d) a charity <input type="checkbox"/>  | <input type="checkbox"/> 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 in Wales ☐ please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England ☐ 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 (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 ☐

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

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev) <input type="checkbox"/>
Surname			First names	
Date of birth				
I am 18 years old or over <input type="checkbox"/> Please tick yes				
Nationality				
Current residential address if different from premises address				
Post town		Postcode		
Daytime contact telephone number				
E-mail address (optional)				

**SECOND INDIVIDUAL APPLICANT (if applicable)**


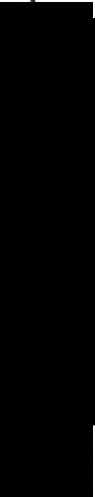
Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev) <input type="checkbox"/>
Surname		First names		



<b>Date of birth</b>		I am 18 years old or over <input type="checkbox"/> Please tick yes	
<b>Nationality</b>			
Current postal address if different from premises address			
Post town			Postcode
<b>Daytime contact telephone number</b>			
<b>E-mail address (optional)</b>			

### (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.

<b>Name</b>	SPS Electrical Ltd.	
<b>Address</b>	32 UPPER HIGGERT LANE MARPLE SK6 7HA	
<b>Registered number (where applicable)</b>	0328 7345	
Description of applicant (for example, partnership, company, unincorporated association etc.)		
Limited Company		
<b>Telephone number (if any)</b>		
<b>E-mail address (optional)</b>		

### Part 3 Operating Schedule

When do you want the premises licence to start?

DD MM YYYY  
03 09 2020

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

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

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

See attachment 1.

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

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)

Provision 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) ☐

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

☐



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

In all cases complete boxes K, L and M



A

Plays Standard days and timings (please read guidance note 7)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	
Day	Start	Finish	Indoors	Outdoors
Mon				
Tue				
Wed				
Thur				
Fri				
Sat				
Sun				

Please give further details here (please read guidance note 4)		Both	
State any seasonal variations for performing plays (please read guidance note 5)		Indoors	<input type="checkbox"/>
		Outdoors	<input type="checkbox"/>
		Both	<input type="checkbox"/>
		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 (please read guidance note 6)	

**B**

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



C

Indoor sporting events Standard days and timings (please read guidance note 7)			Please give further details (please read guidance note 4)
Day	Start	Finish	
Mon			<div></div>
Tue			
Wed			
Thur			<div>State any seasonal variations for indoor sporting events (please read guidance note 5)</div>
Fri			
Sat			
Sun			
			<div> <div> Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list (please read guidance note 6) </div> </div>

**D**

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

E

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



**F**

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)		
Day	Start	Finish	Indoors	Outdoors	Both
Mon			<div> <div>Please give further details here (please read guidance note 4)</div> <div>State any seasonal variations for the playing of recorded music (please read guidance note 5)</div> <div>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 (please read guidance note 6)</div> </div>		
Tue					
Wed					
Thur					
Fri					
Sat					
Sun					

G

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

## H

Anything of a similar description to that falling within (e), (f) or (g) 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	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 3) <table border="1"> <tr> <td>Indoors</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Outdoors</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Both</td> <td><input type="checkbox"/></td> </tr> </table>			Indoors	<input type="checkbox"/>	Outdoors	<input type="checkbox"/>	Both	<input type="checkbox"/>
Indoors	<input type="checkbox"/>										
Outdoors	<input type="checkbox"/>										
Both	<input type="checkbox"/>										
Mon			Please give further details here (please read guidance note 4)								
Tue											
Wed											
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)								
Fri											
Sat			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 (please read guidance note 6)								
Sun											



**I**

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

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)						
Day	Start	Finish	On the premises	<input type="checkbox"/>					
Mon	11:00	23:00	Off the premises	<input checked="" type="checkbox"/>					
State any seasonal variations for the supply of alcohol (please read guidance note 5)									
					Tue	11:00	23:00	Both	<input type="checkbox"/>
					Wed	11:00	23:00		
					Thur	11:00	23:00		
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 (please read guidance note 6)									
Fri	11:00	23:00							
Sat	11:00	23:00							
Sun	12:00	10:00.							

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	Auden O'Shea		
Date of birth	[REDACTED]		
Address	[REDACTED]		
Postcode	[REDACTED]		
Personal licence number (if known)	575290		
Issuing licensing authority (if known)	Stochford		

☐☐☐☐☐

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

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			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)
Sun			



**M** 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)**

*see Attachment 2.*

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

**c) Public safety**

**d) The prevention of public nuisance**

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

**Checklist:**

**Please tick to indicate agreement**

- 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 designated premises supervisor, if applicable. ☒
- 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. ☒
- ☐

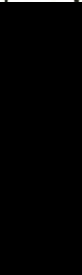
[Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15). ☐

**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.**

<p><b>Declaration</b></p> <ul style="list-style-type: none"> <li>• [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).</li> <li>• 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, if appropriate (please see note 15)</li> </ul>	
Signature	
Date	29-07-2020
Capacity	Director

**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 13). 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 14)		
Post town		Postcode
Telephone number (if any)		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)		

### Notes for Guidance

1. 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.
2. In terms of specific regulated entertainments please note that:



32 Upper Hibbert Lane

License application- Additional Sheets

**Attachment 1**

Please give a general description of the premises

Existing premises comprises of an electrical contractor's shop unit and a vacant shop unit. The vacant shop unit is the proposed location of the craft beer dispensary.

The building is of stone construction and was originally the Hawk Green Co-op shop. It is semi detached and adjoins a residential property although the craft beer dispensary would not share a party wall.

The shop side of the property was extensively refurbished in 2015 returning it from a derelict state. This included sound proofing between the ground floor and the flat above.

The immediate vicinity to the property is predominantly residential with a public house opposite, a newsagents/off license within 50m and Hawk Green Cricket club behind. The mill is 100m away and there is a light industrial estate nearby.

The property is spread over 3 floors comprising cellar, ground floor and 1<sup>st</sup> floor. The ground floor contains 2No. shop units, 2No. unisex toilets, 1No kitchenette, 1No storeroom and a small outbuilding which is connected to the main building.

The first-floor flat is occupied by the building owner and is accessed via an internal staircase with secure front door.

The twin fronted shop unit is currently being used as an electrical contractor shop and the vacant unit is unoccupied. The electrical contractor also owns the entire property.

An existing serving hatch to the private land to the side is to be reinstated. This is to enable safe service of goods in the event of a second Covid wave or similar disease in the future. This is shown on the layout plan.

The name for the off license will be The Hole in The Wall.



## **Attachment 2**

M- Describe the steps you intend to take to promote the four licensing objectives

a) General- all four licensing objectives (b, c, d, and e)

The licensee, that is the person in whose name the premises licence is issued, shall ensure that all times when the premises are for any licensable activity, there are sufficient competent staff on duty at the premises for the purpose of fulfilling the terms and conditions of the licence and for preventing crime and disorder. The Licensee shall ensure that all staff will undertake training in their responsibilities in relation to the sale of alcohol, particularly regarding drunkenness and underage persons. Records will be kept of training and refresher training.

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

### **Security in and around the premises**

An alarm system is installed throughout which covers all doors to the building and all internal areas are also covered by presence detectors. This system is linked to the owner's phone, which will issue a notification in the event of an alert.

All staff and private areas are kept locked whilst the premises are open to the public.

There is a lockable shutter currently installed to the shop front to protect against theft.

### **Door Supervisors**

As the premises will operate as a takeaway service and is a small unit, no door supervisors are deemed necessary.

### **CCTV and Communication**

There will be means of two-way communication to report incidents between the premises and the local police.

CCTV equipment will be installed to cover the inside and outside of the premises which will be capable of recording and storing images of HD quality for 28 days, with means to export externally. Notices will be in place and be clearly visible to the public.

c) **Public Safety**

A full risk assessment considering public safety will be carried out at the premises to identify potential hazards posed to staff or customers. This risk assessment will be reviewed formally every 12 months and updated as needed.

At least one member of staff on duty will hold a current, recognised first aid qualification.

Appropriate fire safety procedures are in place including fire extinguishers (foam, H2O and CO2), fire blanket, internally illuminated fire exit signs, numerous smoke detectors and emergency lighting (see enclosed plan for details of locations). All appliances are inspected annually. All emergency exits shall always be kept free from obstruction.

**d) The prevention of public nuisance**

All customers will be asked to leave quietly. Clear and legible notices will be prominently displayed to remind customers to leave quietly and have regard to residents.

As the premises is an off-license noise generated from the premises is not anticipated to be an issue.

All rubbish bins and glass refuse will be kept to the rear of the premises within a fenced area. Again, due to sales being for offsite consumption, litter and refuse generated is not considered to be an issue.

Customers will be encouraged to purchase reusable "Growler" containers to reduce waste generated.

Any movement of empty kegs will be not be carried out between the hours of 11pm and 7 am

There is a small public car park adjacent to the newsagents which can be used for customer parking. The target market is customers within walking distance of the premises so parking for customers is not anticipated to be an issue. However, notices will be displayed advising customers to not park in residents' driveways or block the public highway.

The licensee will attend meetings of the local resident's association to address any unforeseen issues that may arise.

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

The licensee and staff will ask persons who appear to be under the age of 25 for photographic ID such as proof of age cards, the Connexions Card and Citizen Card, photographic driving licence or passport, an official identity card issued by HM Forces or by an EU country, bearing the photograph and date of birth of bearer. All staff will be trained for UNDERAGE SALES PREVENTION regularly. A register of refused sales shall be kept and maintained on the premises.

Admission of children will only be permitted if they are accompanied by an adult.