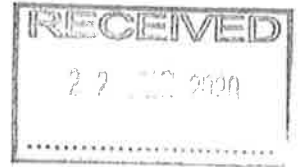


Annex 1.



CITY OF YORK COUNCIL
Licensing Services, Hazel Court EcoDepot, James Street,
York, YO10 3DS

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 WING LUN MAN
(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 REGENCY SUPERMARKET AND RESTAURANT 2-4 GEORGE HUDSON STREET			
Post town	YORK	Postcode	YO1 6LP
Telephone number at premises (if any)	01904 651 003		
Non-domestic rateable value of premises	£ 49,500 -		

Part 2 - Applicant details

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

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
 - i as a limited company/limited liability partnership please complete section (B)
 - ii as a partnership (other than limited liability) 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 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 checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname MAN			First names WING LUN		
Date of birth				, I am 18 years old or over <input checked="" type="checkbox"/> Please tick yes	
Nationality BRITISH CITIZEN					
Current residential address if different from premises address		25 CYPRESS POINT LEYLANDS ROAD			
Post town	LEEDS			Postcode	LS2 7LB
Daytime contact telephone number			e		
E-mail address (optional)		N			
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see					

note 15 for information)

SEE ATTACHED PASSPORT COPY

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)	
Surname			First names		
Date of birth		I am 18 years old or over		<input type="checkbox"/>	Please tick yes
Nationality					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service: (please see note 15 for information)					
Current residential address if different from premises address					
Post town				Postcode	
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
Address
Registered number (where applicable)

Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
18	01	2021

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

DD	MM	YYYY

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

PLEASE REFER TO OPERATING SCHEDULE SHEET ATTACHED.

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

B

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

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Wed			
Thur			<u>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</u> (please read guidance note 6)
Fri			
Sat			
Sun			

D

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

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	10:00	23:00	<u>Please give further details here</u> (please read guidance note 4) NORMAL CHINESE MUSIC FROM MUSIC PLAYER.	Both	<input type="checkbox"/>
Tue	10:00	23:00			
Wed	10:00	23:00	<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
Thur	10:00	23:00			
Fri	10:00	24:00	<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 6)		
Sat	10:00	24:00			
Sun	10:00	23:00			

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 – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 4)	Both	<input type="checkbox"/>
Tue					
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)		
Thur					
Fri			<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> (please read guidance note 6)		
Sat					
Sun					

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)</p>			<p>Please give a description of the type of entertainment you will be providing</p>		
Day	Start	Finish	<p>Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p>Please give further details here (please read guidance note 4)</p>		
Wed					
Thur			<p>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)</p>		
Fri					
Sat			<p>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)</p>		
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	10:00	23:00	<u>Please give further details here</u> (please read guidance note 4) FRIDAY & SATURDAY CLOSED AT 24:00 HRS. (RESTAURANT ONLY, EXCLUDE SUPERMARKET)	Both	<input checked="" type="checkbox"/>
Tue	10:00	23:00			
Wed	10:00	23:00	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
Thur	10:00	23:00			
Fri	10:00	24:00	<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	10:00	24:00			
Sun	10:00	23:00			

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)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish			
Mon	10:00	23:00	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Tue	10:00	23:00			
Wed	10:00	23:00			
Thur	10:00	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	10:00	24:00			
Sat	10:00	24:00			
Sun	10:00	23:00			

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 WING LUN MAN	
Date of birth	
Address	
Postcode	
Personal licence number (if known) LEEDS/PERL/10410/20	
Issuing licensing authority (if known) LEEDS CITY COUNCIL	

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).

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	10:00	23:00	
Tue	10:00	23:00	
Wed	10:00	23:00	
Thur	10:00	23:00	
Fri	10:00	24:00	
Sat	10:00	24:00	
Sun	10:00	23:00	
			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 6)

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)

PLEASE REFER TO PROMOTION OF FOUR LICENSING OBJECTIVES SHEETS ATTACHED .

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 or my share code issued by the Home Office online right to work checking service (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.**

Declaration	<ul style="list-style-type: none">• [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).• 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
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	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 (please see note 15)
Signature	
Date	18/12/20
Capacity	MANAGER

For joint applications, signature of 2nd applicant 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 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)			

ANSWER TO THE QUESTION PART 3 . OPERATING SCHEDULE,

Operating Schedule

Regency Supermarket and Restaurant are operating from Sunday 10:00-23:00, Monday to Thursday 10:00-23:00, Friday and Saturday 10:00-24:00. The licensable activities I intend to carry out for my application includes on and off Supply of Alcohol and Recorded Music (Indoor) from Monday to Sunday and Late Night Refreshment from Friday and Saturday (Restaurant only, exclude supermarket).

Delivery service will be provided for both supermarket and restaurant. This service will be operated same time as opening hours Sunday 10:00-23:00, Monday to Thursday 10:00-23:00. Friday and Saturday 10:00-24:00.

When comes to age-restricted items such as; knife, beer, wine, cooking wine and other alcoholic drinks, Challenge 25 age verification policy will be operated within the supermarket, restaurant, online and delivery service. For delivery service, same age verification policy will be operated, drivers will check the customer's ID for all orders containing age-restricted items, even if the customer looks older than the legal age for buying those items. All staffs training will be given and all training record will be kept and made available immediately upon request from any responsible authority.

There will be two duty manager running the supermarket and restaurant, and both manager are personal licence holders. All staff will be made aware that anti-social behaviours would not be tolerated on the premises.

I will appoint myself as a Designated Premises Supervisor (DPS) who has day-to-day responsibility for the running of the business, as I have been working in the retail and catering industry for over 10 years within the role.

ANSWER TO THE QUESTION PART "M" - LICENSING OBJECTIVES.

Promotion of Four Licensing Objectives**a) Here are the steps I intend to take to promote the four licensing objectives**

We will focus the steps to be taken to promote the licensing objectives, which must be addressed when licensing functions are undertaken. Each objective is of equal important. Effective training to all staff, so that they are aware of the premises licence and the requirements to meet the four licensing objectives.

b) The Prevention of Crime and Disorder

A digital colour CCTV system has been installed for the premises that will cover both indoor and outdoor area, which included entrances, exits, supermarket shop floor, restaurant sitting area and the backyard area of the premises in order to address the prevention of crime objective. The CCTV system will be maintained, working and recording at all times 24 hours a day, 7 days a week. The recordings will be of good evidential quality to be produced if necessary. Copies of the recordings will be kept available for any responsible authority for 28 days. (Subject to Data Protection Requirement). Copies of the recordings shall be made available to any Responsible Authority within 48 hours upon request. (Subject to Data Protection Requirement). Copies of the recordings will display the correct time and date of the recording. Duty Manager will ensure that there are sufficient members of staff available during the hours of operation to be able to download evidence from the CCTV system at the request of the police or responsible authority. (Subject to Data Protection Requirement).

To tackle any disorder from the customer on the restaurant, we will reduce the potential for excessive queue lines with a well managed and efficient door policy. (Online or Telephone booking system policy). Gradual change in music style and increasing lighting levels if necessary. Staff training in preventing disorder will be provide to give them the knowledge and confidence to deal with difficult situations. Again, we do not encourage excessive drinking.

A clear and legible notice outside the premises indicating the normal hours under the terms of the premises licence during which licensable activities are permitted. A clear and conspicuous notices warning of potential criminal activity, such as theft, that may target customers will be displayed at the supermarket. Not selling of alcohol to drunk or intoxicated customers. Customer will not be sought by means of personal solicitation outside or in the vicinity of the premises. Prevention and vigilance in illegal drug use at the retail unit area. All staff will be well trained in asking customers to use premises in an orderly and respectful manner and prevent drinking alcohol at the supermarket and restaurant area.

c) Public Safety

A full risk assessment taking into account. Public Safety will be carried out at the premises to identify potential hazards posed to staff or customer and setting out precautions to manage the hazards. A glass collection policy for regular collection of glassware by staff and the prevention of glassware from being taken into external areas. Signs will be put up to remind customer no drinks are allow to take out of the premises. Spillages and broken glass will be

cleaned up immediately to prevent floors from becoming slippery and unsafe. We will provide a free taxi phone service and a safe waiting area for customer inside the premises.

All staff will be trained adherence to environmental health requirements. Training and implementation of underage ID checks (Challenge 25 age verification policy). All parts of the premises and all fittings and apparatus therein, door fastenings and notices, lighting, heating, electrical, air-condition, sanitary accommodation and other installations, will be maintained at all times in good order and in a safe condition.

d) The Prevention of Public Nuisance

All staff will be trained on the content of the policy to ensure a commitment to good noise management. All record will be kept of the date and name of the person trained and made available for inspection by the local Licensing Authority. When customers leaving our premises, we will remind customers to leave quietly. Signs will be put up asking customers to respect the needs of local residents and our staff will supervise customers leaving premises after closing time.

Deliveries of goods necessary for the operation of the business will be carried out at such a time or in such a manner as to prevent nuisance and disturbance to nearby residents. Customers will be asked not to stand around loudly talking in the street outside the premises, again notice will be put up to remind our customers.

The movement of bins and rubbish outside the premises will be kept to a minimum after 23:00. This will help to reduce the levels of noise produced by the premises. Any lighting on or outside the premises will be positioned and screened in such a way so as to not cause a disturbance to nearby residents. Adequate waste receptacles for use by customers will be provided in the local vicinity.

e) The Protection of children from Harm

We will operate a Challenge 25 Age Verification Policy, that the only acceptable proof of age identification shall be a current passport, photo card and driving licence, military ID card, or identification carrying the PASS logo. We will display relevant signs at point of sale. No proof, no sale, age verification policy. Staff training will be giving on when and how to refuse a sale. Documented staff training will be given regarding staff's obligation under the Licensing Act 2003. All records shall be kept for a minimum of one year and will be made available immediately upon request from any Responsible Authority.