## 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 MR KHENG CHOOI KOAY

(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

# 10-12 GEORGE HUDSON STREET (GROUND FLOOR)

Dont tour	YORK	D	V(04 01 D
Post town	TORK	Postcode	YO1 6LP

Telephone number at premises (if any)	01904-636304
Non-domestic rateable value of premises	£28,250

## Part 2 - Applicant details

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

Please tick as

a)	an	individual or individuals *	V	please complete section (A)
b)	аŗ	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)

<sup>\*</sup> 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 <b>√</b>	Mrs	Miss	Ms	Other Title (for examp Rev)		
Surname KOAY				names IG CHOOI		
Date of bir	th	l am 1	8 years old or	over Plea	se tick ye	es <b>v</b>
Nationality	MALA	YSIAN				
Current res address if of from premis address	lifferent	28 ST PHIL	.IP'S GROVE			3
Post town	YORK	1		Postco	ode Y	O30 6JP
Daytime co	ontact tele	ephone		,		
E-mail add (optional)	ress					

work checki	ng service		code' provided t			ce online right to that service
Second indi	vidual ap	plicant (if ap	plicable)			
Mr	Mrs	Miss	Ms		ner Title r example, v)	1
Surname			First r	name	S	
Date of birt	n		I am 18 years	old	Ple	ase tick yes
Nationality						
Current resided address if different from premise address	fferent					25
Post town					Postcode	
Daytime con	ntact tele	phone				
E-mail addr optional)	ess					
Where applic	g service)		a right to work v ode' provided to			e online right to that service:
propriate p	le name a lease giv nture (oth	e any registe ner than a bo	d address of a red number. I dy corporate),	n the	case of a p	artnership or
Vame						

Address	
	.4
Registered number (where applicable)	
, and approximately	
Description of applicant (for example party example)	
Description of applicant (for example, partnership, company, uninco association etc.)	orporated
Telephone number (if any)	34
E-mail address (optional)	
Part 3 Operating Schedule	
When do you want the premises licence to start?  DD  A S	MM YYYY AP
If you wish the licence to be valid only for a limited DD	MM YYYY
period, when do you want it to end?	
Please give a general description of the premises (please read guid	lance note 1)
Ground Floor, part of a much larger building – operating as a r	estaurant at
10-12 George Hudson Street, York, YO1 6LP	
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 premise	s?
(please see sections 1 and 14 and Schedules 1 and 2 to the Licensin	g Act 2003)
Provision of regulated entertainment (please read guidance note	Please tick all
2)	that apply

a)	plays (if ticking yes, fill in box A)			×
b)	films (if ticking yes, fill in box B)	- 17		
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)	134		
g)	performances of dance (if ticking yes, fill in box G)			11
h)	anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)	3	0	1.

Provision of late night refreshment (if ticking yes, fill in box I)			
Supply of alcohol (if ticking yes, fill in box J)		<b>V</b>	

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)	Indoors
				Outdoors
Day	Start	Finis h		Both
Mon			Please give further details here (please read)	ad guidance note
Tue				
Wed			State any seasonal variations for perform (please read guidance note 5)	ing plays
Thur				* *
Fri	122110242		Non standard timings. Where you intend premises for the performance of plays at to those listed in the column on the left, p	different times
Sat			(please read guidance note 6)	8
Sun				

Films			Will the exhibition of films take place	
Standard days and timings (please read			indoors or outdoors or both – please tick (please read guidance note 3)	Indoors
	nce note		LIST (product road guidantes mote 5)	Outdoors '
Day	Start	Finis h	, ,	Both
Mon			Please give further details here (please read)	ad guidance note
Tue			* * * * * * * * * * * * * * * * * * * *	
Wed		********	State any seasonal variations for the exhil (please read guidance note 5)	bition of films
Thur				
Fri .			Non standard timings. Where you intend to premises for the exhibition of films at difference listed in the column on the left, plear	erent times to
Sat			read guidance note 6)	3 20
Sun		*******		-

Indoor sporting events Standard days and			Please give further details (please read guidance note 4)
timing	s (please	read	
Day	Start	Finis h	n <sup>th</sup>
Mon			
Tue			State any seasonal variations for indoor sporting events (please read guidance note 5)
Wed			
Thur			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
Fri	*********		read guidance note 6)
Sat	********		
Sun			

D

enter	Boxing or wrestling entertainments Standard days and		Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please	Indoors
timing	gs (please nce note	e read	read guidance note 3)	Outdoors
Day	Start	Finis h	Δ.	Both
Mon			Please give further details here (please read)	ad guidance note
Tue				
Wed			State any seasonal variations for boxing of entertainment (please read guidance note 5	
Thur				
Fri	-		Non standard timings. Where you intend to premises for boxing or wrestling entertain different times to those listed in the column	ment at
Sat			please list (please read guidance note 6)	- 9 4
Sun				

Live music Standard days and timings (please read			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors
	nce note			Outdoors
Day	Start	Finis h	Ta L	Both
Mon			Please give further details here (please re 4)	ad guidance note
Tue			# # # # # # # # # # # # # # # # # # #	. 9
Wed			State any seasonal variations for the perf music (please read guidance note 5)	ormance of live
Thur	******	*******	# #	
Fri			Non standard timings. Where you intend premises for the performance of live mustimes to those listed in the column on the	ic at different
Sat		1	(please read guidance note 6)	
Sun			- Tail	41

Stand	Recorded music Standard days and timings (please read		Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors
	nce note			Outdoors
Day	Start	Finis h		Both
Mon			Please give further details here (please read)	ad guidance note
Tue				
Wed			State any seasonal variations for the play music (please read guidance note 5)	ing of recorded
Thur				* 2. 20 1
Fri		*********	Non standard timings. Where you intend premises for the playing of recorded mustimes to those listed in the column on the	ic at different
Sat			(please read guidance note 6)	a .
Sun				# = 

dance	Performances of dance Standard days and		Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors
timing	s (please	read		Outdoors
Day	Start	Finis h		Both
Mon			Please give further details here (please re 4)	ad guidance note
Tue				
Wed			State any seasonal variations for the perf dance (please read guidance note 5)	ormance of
Thur				
Fri			Non standard timings. Where you intend premises for the performance of dance at to those listed in the column on the left, p	t different times
Sat			(please read guidance note 6)	3
Sun				

			r	
Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)		within and read	Please give a description of the type of enter be providing	tainment you will
Day	Start	Finis h	Will this entertainment take place indoors or outdoors or both – please	Indoors
Mon			tick (please read guidance note 3)	Outdoors
			2 v	Both
Tue			Please give further details here (please read)	ad guidance note
Wed	********			. · ·
Thur			State any seasonal variations for entertain similar description to that falling within (e (please read guidance note 5)	
Fri		·······		
Sat			Non standard timings. Where you intend premises for the entertainment of a simila that falling within (e), (f) or (g) at different listed in the column on the left, please list guidance note 6)	r description to times to those
Sun			*	

refres	refreshment re Standard days and ou		Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please	Indoors	<b>v</b>
	s (please nce note		read guidance note 3)	Outdoors	
Day	Start	Finis h		Both	
Mon			Please give further details here (please red4)	ad guidance n	ote
Tue					2
Wed			State any seasonal variations for the provinght refreshment (please read guidance n		
Thur					
Fri	23:00	24:00	Non standard timings. Where you intend premises for the provision of late night redifferent times, to those listed in the colu	freshment at	
Sat	23:00	24:00	please list (please read guidance note 6)		
Sun			**************************************		,

J

Stand	ly of alco lard days gs (please	and	concumuation where the transfer	On the premises	V
	nce note			Off the premises	V
Day	Start	Finis h	2 "	3oth	
Mon	11:00	23:00	State any seasonal variations for the supply (please read guidance note 5)	of alcoho	Į,
Tue	11:00	23:00	// = = =	; x	
Wed	11:00	23:00			
Thur	11:00	23:00	Non standard timings. Where you intend to premises for the supply of alcohol at differe those listed in the column on the left, please	nt times to	e
Fri	11:00	24:00	read guidance note 6)		Į.
Sat	11:00	24:00		9	5
Sun	11:00	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	MR KHENG CHOOI KOAY		- 111	
Date of bi	rth			
Address		13		
• :				×
			v s	*
Postcode	YO30 6JP			
Personal I HDC 108	icence number (if known) 4			
	ensing authority (if known) TON DISTRICT COUNCIL	= #	F 6	

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 – not applicable.

L

			12.00		· · · ·		
open Stand	Hours premises are open to the public Standard days and timings (please read		State any seasonal var 5)	iations	(please read	d guidance	e note
	nce note			W			
Day	Start	Finis h			x		
Mon	11:00	23:30			9		8
Tue	11:00	23:30					
(e) 1							
Wed	11:00	23:30	*				41
Thur	11:00	23:30	Non standard timings. be open to the public a in the column on the le note 6)	t differe	ent times fr	om those	listed
Fri	11:00	00:30					*
Sat	11:00	00:30					
Sun	11:00	23:30					

### 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)

The applicant accepts that there have been problems with regard to the management/ running of these premises in the past but he was not involved with those practices and wishes to start afresh now. This is a family friendly restaurant that also offers takeaway facilities and the applicant wants to make sure that all four licencing objectives are considered at all times so that there is no repetition of some of the past problems. He is very aware that this property is within the Red Zone of the Cumulative Impact Area/Zone. The applicant is putting in place proper structures to make the business work successfully going forward – including proper training and management – and with a new management team in place. Mr Man Wei Leung, Mr Luing Lun Man and Mr Wen Lin Chen will not be involved.

The applicant will also ensure that the property is Covid compliant at all times and in all respects and training will be given to ensure this.

He has put together some detailed proposed conditions for the Licence and this document (numbered 1-21) is attached to this application.

### b) The prevention of crime and disorder

The applicant is happy to have full modern CCTV coverage and to accept reasonable conditions for the storage, copying and easy viewing of it. It will include all areas to which the public have access for licenced activities and where the public can consume alcohol and will display the correct time and date of the recording. The applicant has always operated a zero tolerance approach in relation to any kind of crime and disorder in premises that he has been responsible for but realises that this goes much further and that he would have a responsibility to help to keep the whole of central York free of trouble. He would refuse to serve someone who is intoxicated and would be prepared to involve the police and other legal avenues, if required.

Documented staff training will be given regarding the retail sale of alcohol, the conditions attached to the Premises Licence and the opening/operating hours of the venue and such training will be refreshed and documented. Training records will be kept and will be accessible for inspection upon request by any responsible authority.

Rigorous steps will also be taken to check employees and ensure that everyone involved in any aspect of running the business has proper immigration clearance and the right to work in the UK and no criminal activity of any kind will be tolerated. Full written employment records will be kept and will be available for inspection.

# c) Public safety

The applicant is happy for a capacity limit to be put in place for the property and for door supervisors to be in place at applicable times.

There have been previous issues with, among other things, unauthorised sale of alcohol but these have been addressed and the applicant will maintain rigorous standards right across the board going forward. Advice is being taken to ensure that these standards continue going forward. Means of escape will not be locked. Fire systems are being updated and no staff will live/sleep at the property.

## d) The prevention of public nuisance

Drinking glasses of any type will not be allowed to enter or leave the premises whilst under the customers' care. A refusals register and an incident report register will be kept and prominent, clear and legible notices will be displayed at all exits requesting the public to respect the needs of local residents and to leave the premises and area quietly.

### e) The protection of children from harm

There will be a challenge 25 policy in operation at the premises requiring any individual who appears to be under the appropriate age to produce identification to prove their age, the sale of alcohol being refused where they are unable to do so. The following forms of identification will be acceptable — photocard driving licence, valid passport, military ID card, PASS accredited proof of age card and any other form of identification previously agreed with representatives of North Yorkshire Police. The applicant very much wishes this to continue as a family friendly property and will do everything that he can to make sure that this happens and that children are not exposed to any risk of crime, disorder, lack of safety or public nuisance.

#### Checklist:

## Please tick to indicate agreement

0	I have made or enclosed payment of the fee.	V
0	I have enclosed the plan of the premises.	V
0	I have sent copies of this application and the plan to responsible authorities and others where applicable.	V
•	I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.	V
0	I understand that I must now advertise my application.	V
0	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	V
	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).	V

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> <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> </ul>
Declaration	
	The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)
Signature	
Date	25 <sup>th</sup> May 2022
Capacity	SOLICITOR
Capacity	SOLICITOR

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)

JOHN WALKER GUEST WALKER 12A SHAMBLES

Post town YORK Postcode YO1 7LZ
Telephone number (if any)

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)