



**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 **SECRET SQUARE LIMITED**

*(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			
UNIT 4 STONEGATE WALK HORNBY PASSAGE			
Post town	YORK	Postcode	YO1 8AT

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£ 13500

**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"/>            | please complete section (A) |
| b) a person other than an individual *               |                                     |                             |
| i as a limited company/limited liability partnership | <input checked="" type="checkbox"/> | please complete section (B) |
| ii as a partnership (other than limited liability)   | <input type="checkbox"/>            | please complete section (B) |
| iii as an unincorporated association or              | <input type="checkbox"/>            | please complete section (B) |

note 15 for information)

**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)	
<b>Surname</b>			<b>First names</b>		
<b>Date of birth</b>		I am 18 years old or over <input type="checkbox"/>		Please tick yes	
<b>Nationality</b>					
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	
<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>	SECRET SQUARE LIMITED
<b>Address</b>	UNIT 4 STONEGATE WALK HORNBY PASSAGE YORK YO1 8AT
<b>Registered number (where applicable)</b>	12350568

- 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**

# B

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

# 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)	
			Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 4)	
Mon				
Tue				
Wed			<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 5)	
Thur				
Fri				
Sat			<b>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</b> (please read guidance note 6)	
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</u> – please tick (please read guidance note 3)		Indoors	<input checked="" type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)			
Mon	11:30	23:30				
Tue	11:30	23:30				
Wed	11:30	23:30	State any seasonal variations for the playing of recorded music (please read guidance note 5)  An additional one hour on bank holiday Sundays and New Year's Eve			
Thurs	11:30	23:30				
Fri	11:30	01:00	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)			
Sat	11:30	01:00				
Sun	11:30	23:30				

\* Above reads:

Mon to Thurs 11:30 – 23:30

Fri + Sat 11:30 – 01:00

Sun 11:30 – 23:30

An additional hour on bank holiday Sundays + New  
year's Eve.

## 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			<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)		
Fri					
Sat			<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)		
Sun					

# J

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)  An Additional one hour on bank holiday Sundays and New years eve		
Mon	11:30	23:00			
Tue	11:30	23:00			
Wed	11:30	23:00			
Thur	11:30	23:00	<b>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</b> (please read guidance note 6)		
Fri	11:30	00:30			
Sat	11:30	00:30			
Sun	11:30	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):

<b>Name</b> Mr Harun Kacmaz	
<b>Date of birth</b>	
<b>Address</b>	
<b>Postcode</b>	
<b>Personal licence number (if known)</b>	
<b>Issuing licensing authority (if known)</b>	

## 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)**

All four licensing objectives will be fully adhered to. The premises is a small cafe bar with courtyard seating and dining also available located in a quiet passage way off Stonegate York. Secret Square is a food led establishment, serving Kurdish food from 11:30 - 23:00hrs. Full drinks menus with Lunch/Dinner which will be available from 12:00-22:00 hrs Monday, Tuesday, Wednesday Thursdays and Sundays. Lunch/Dinner menu will be available Friday and Saturdays from 12:00- 23:00hrs to allow for the later diners and alcohol will cease at 00:30 hrs on these evening to allow patrons to enjoy their food without having to feel rushed.

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

A full colour CCTV system will be installed covering internal and external areas. One SIA registered door supervisor will be provided on a Friday and Saturday and any race days from 23:00hrs - 01:00hrs. A minimum of 25 covers will be provided.

A refusal register will be available and will document any refusal sales of alcohol or any anti social behaviour.

Documented staff training will be given regarding staff's obligation under the Licensing Act in respect of the:-

Retail sale of alcohol, Age verification policy, any conditions attached to the Premises Licence Permitted Licensable activities. The Licensing objectives and the Opening Times of the venue. Such records shall be kept for a minimum of one year and will be made available immediately upon request from any Responsible Authority

### **c) Public safety**

A full fire risk assessment will be carried out on completion of all building works. All building works will be carried out in compliance with Building Regulations. A safe occupancy will be provided in the fire risk assessment.

### **d) The prevention of public nuisance**

Clear and legible notices shall be displayed at all exits requesting patrons to respect the needs of local residents and to leave the premises and area quietly

The courtyard will not be used by customers after 23:00hrs on a Sunday Monday Tuesday Wednesday Thursday and midnight on Friday & Saturday

Windows and doors will be closed from 23:00 hrs when recorded music is playing apart from ingress and egress

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

Families with children are welcome in the restaurant until 19:00hrs Monday - Sunday

The license holder will operate a Challenge 25 Age Verification Policy at the premises

	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	Hilary Ramli
Date	12th December 2019
Capacity	Agent

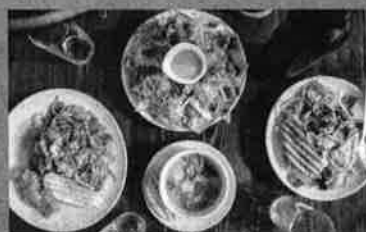
**For joint applications, signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent (please read guidance note 13). If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)			
Hilary Ramli 62a Low Petergate			
Post town	York	Postcode	YO1 7HZ
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

# SECRET SQUARE CAFE BAR

Unit 4  
Hornbys Passage  
York  
YO18AT



## MAIN DISHES

### Izmir Kumru

Sausage, Sucuk, Salami Halloumi  
cheese 9.95

### Izmir Kumpir

Roast Potato with selection of  
toppings 8.75

### Turkish Sarma

Vine leave fillings with herbs and olive  
oil 8.75

### Coban Salata

Iceberg lettuce, tomato,  
cucumber, pomegranate, rocket, Lemon  
and carrot 8.50

### Cacik

Cucumber, yoghurt, mint, lemon and  
garlic 8.95

### Gozleme

Turkish cheese melted in naan bread,  
butter and parsley 8.95

### Katmer

Secret Square special with selected  
toppings 7.95

## SIDE ORDERS

### Gemlik Olives

Turkish olives mixed with herbs and olive  
oil 3.95

### Hummus

Puree chickpea with tahini garlic, olive  
oil and lemon 3.95

### Kasar Igi

Rocket, tomato, chilli, Kasar, cheese and  
lemon 3.95

### Dag Salatasi

Potato, lettuce, peppers, chilli, egg olive  
oil and lemon 4.25

### Anne Eli

Tomato, Olives, Chilli Pepper, cheese,  
olive oil and herbs 3.95

### Sigara Borek

Cheese rolls 3.95

MUST HAVE  
menu

\*Consumer Advisory Consumption of undercooked meat, poultry, eggs, or seafood may increase the risk of food-borne illnesses. Alert your server if you have special dietary requirements.















