



CITY OF YORK COUNCIL
Licensing Services, 9 St Leonard's Place, York, YO1 7ET

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 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 JULIE DIANNE STABLES..... (insert name(s) of applicant) apply for 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

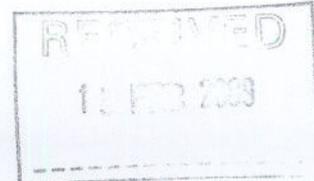
Postal address of premises or, if none, ordinance survey map reference or description <u>ST PAUL'S LODGE</u> <u>120 HOLGATE ROAD</u>	
Post town <u>YORK</u>	Post code <u>YO24 4BB</u>

Telephone number of premises (if any)	<u>01904-611514</u>
Non domestic rateable value of premises	<u>£ 6,800</u>

Part 2 – Applicant Details

Please state whether you are applying for the licence as:

- | | |
|---|---|
| | Please tick ✓ |
| a) an individual or individuals* | <input checked="" type="checkbox"/> please complete section (A) |
| b) a person other than an individual* | |
| i. as a limited company | <input type="checkbox"/> please complete section (B) |
| ii. as a partnership | <input type="checkbox"/> please complete section (B) |
| iii. as an unincorporated association or | <input type="checkbox"/> please complete section (B) |
| iv. other | <input type="checkbox"/> please complete section (B) |
| c) a recognised club | <input type="checkbox"/> please complete section (B) |
| d) a charity | <input type="checkbox"/> please complete section (B) |
| e) The proprietor of an educational establishment | <input type="checkbox"/> 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 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:

Please tick ✓

- 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 Mrs Miss Ms Other title (for example, Rev)

Surname First names

STABLES JULIE DIANNE

Please tick ✓ yes

I am 18 years old or over

Current postal address if different from premises address ST PAUL'S LODGE
120 HOLGATE ROAD

Post Town YORK Postcode YO24 4BB

Daytime contact telephone number 01904-611514

Email address (optional) julie@stpaulslodge.co.uk

SECOND INDIVIDUAL APPLICANT (IF APPLICABLE)

Mr Mrs Miss Ms Other title
(for example, Rev)

Surname First names

I am 18 years old or over Please tick ✓ yes

Current postal address if different from premises address

Post Town Postcode

Daytime contact telephone number

Email address (optional)

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint nature (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?

Day	Month	Year
01	04	2009

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

Day	Month	Year

If 5000 or more people attend the premises at any one time, please state the number expected to attend

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

ST PAUL'S LODGE IS A BED & BREAKFAST FOR RESIDENTS LOCATED ON THE OUTSKIRTS OF THE CITY. PRIMARILY A B&B OFFERING PREBOOKED FUNCTIONS AND MEALS AND FACILITIES FOR LOCAL INDOOR GAMES AND MEALS TO MEMBERS OF THE PUBLIC

What licensable activities do you intend to carry on from the premises?
(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Please tick ✓ yes

Provision of regulated entertainment

- 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) performance 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 entertainment facilities for:

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j)
(if ticking yes, fill in box K)



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



Sale by retail of alcohol (if ticking yes, fill in box M)



In all cases complete boxes N, O and P

A

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	
Mon	10:00	02:00	Please give further details here (please read guidance note 3)	Both	
Tue	10:00	02:00			
Wed	10:00	02:00	State any seasonal variations for performing play (please read guidance note 4)		
Thur	10:00	02:00			
Fri	10:00	02:00	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 5)		
Sat	10:00	02:00			
Sun	10:00	02:00			

AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEAR'S EVE TO THE CLOSE OF BUSINESS ON NEW YEAR'S DAY.

B

Films Standard days and timings (please read guidance note 6)			Will the exhibition of a films take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	
Mon	10:00	02:00	Please give further details here (please read guidance note 3)	Both	
Tue	10:00	02:00			
Wed	10:00	02:00	State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur	10:00	02:00			
Fri	10:00	02:00	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 5)		
Sat	10:00	02:00			
Sun	10:00	02:00			

AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEAR'S EVE TO THE CLOSE OF BUSINESS ON NEW YEAR'S DAY.

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon	10:00	02:00	
Tue	10:00	02:00	
Wed	10:00	02:00	
Thur	10:00	02:00	
Fri	10:00	02:00	State any seasonal variations for indoor sporting events (please read guidance note 4)
Sat	10:00	02:00	
Sun	10:00	02:00	
			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 5)
			AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEAR'S EVE TO THE CLOSE OF BUSINESS ON NEW YEAR'S DAY.

D

Boxing or wrestling entertainment Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	
Day	Start	Finish	Indoors	Outdoors
Mon				
Tue				
Wed				
Thur				
Fri				
Sat				
Sun				
			Please give further details here (please read guidance note 3)	
			State any seasonal variations for the boxing or wrestling entertainment (please read guidance note 4)	
			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 5)	
			AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME	

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon	10:00	02:00	Please give further details here (please read guidance note 3)	Both	✓
Tue	10:00	02:00			
Wed	10:00	02:00	State any seasonal variations for the performance of live music (please read guidance note 4) NO LIVE MUSIC OUTSIDE AFTER 22:00 HOURS		
Thur	10:00	02:00			
Fri	10:00	02:00	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 5) AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEAR'S EVE TO THE CLOSE OF BUSINESS ON NEW YEAR'S DAY.		
Sat	10:00	02:00			
Sun	10:00	02:00			

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon	10:00	02:00	Please give further details here (please read guidance note 3)	Both	✓
Tue	10:00	02:00			
Wed	10:00	02:00	State any seasonal variations for the playing of recorded music (please read guidance note 4) NO RECORDED MUSIC OUTSIDE AFTER 22:00 HOURS		
Thur	10:00	02:00			
Fri	10:00	02:00	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 5) AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEAR'S EVE TO THE CLOSE OF BUSINESS ON NEW YEAR'S DAY.		
Sat	10:00	02:00			
Sun	10:00	02:00			

G

Performance of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon	10:00	02:00	Please give further details here (please read guidance note 3)	Both	<input checked="" type="checkbox"/>
Tue	10:00	02:00			
Wed	10:00	02:00	State any seasonal variations for the performance of dance (please read guidance note 4)		
Thur	10:00	02:00			
Fri	10:00	02:00	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 5)		
Sat	10:00	02:00			
Sun	10:00	02:00	AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEAR'S EVE TO THE CLOSE OF BUSINESS ON NEW YEAR'S DAY.		

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing	Will the entertainment take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	
Day	Start	Finish			Outdoors	
Mon	10:00	02:00	THE OCCASIONAL STRIPPER GRAM FOR A PRIVATE PARTY	Both	<input checked="" type="checkbox"/>	
Tue	10:00	02:00				
Wed	10:00	02:00	State any seasonal variations for the entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)			
Thur	10:00	02:00				
Fri	10:00	02:00	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 5)			
Sat	10:00	02:00				
Sun	10:00	02:00	AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEAR'S EVE TO THE CLOSE OF BUSINESS ON NEW YEAR'S DAY.			

Provision of facilities for making music Standard day and timings (please read guidance note 6)			Please give a description of the facilities for making music you will be providing		
			Will the facilities for making music be indoors or outdoors or both – please tick (✓) (please read guidance note 2)		
Day	Start	Finish	Indoors	Outdoors	Both
Mon	10:00	02:00			<input checked="" type="checkbox"/>
Tue	10:00	02:00			
Wed	10:00	02:00			
Thur	10:00	02:00			
Fri	10:00	02:00			
Sat	10:00	02:00			
Sun	10:00	02:00			

Please give further details here (please read guidance note 3)

State any seasonal variations for the provision of facilities for making music (please read guidance note 4)

Non standard timings. Where you intend to use the premises for the provision of facilities for making music at different times to those listed in the column on the left, please list. (please read guidance note 5)

AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEAR'S EVE TO THE CLOSE OF BUSINESS ON NEW YEAR'S DAY.

J

Provision of facilities for dancing Standard timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick (✓) (please read guidance note 2)		
Day	Start	Finish	Indoors	Outdoors	Both
Mon	10:00	02:00			<input checked="" type="checkbox"/>
Tue	10:00	02:00			
Wed	10:00	02:00			
Thur	10:00	02:00			
Fri	10:00	02:00			
Sat	10:00	02:00			
Sun	10:00	02:00			

Please give further details here (please read guidance note 3)

State any seasonal variations for providing dancing facilities (please read guidance note 4)

Non standard timings. Where you intend to use the premises for the provision of facilities for dancing at different times to those listed in the column on the left, please list. (please read guidance note 5)

AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEAR'S EVE TO THE CLOSE OF BUSINESS ON NEW YEAR'S DAY.

K

Provision of facilities for entertainment of a similar description to that falling within I or J Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment facility you will be providing	
Day	Start	Finish	Will the entertainment facility be place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	
			Indoors	Outdoors
Mon	10:00	02:00		
Tue	10:00	02:00		
Wed	10:00	02:00		
Thur	10:00	02:00		
Fri	10:00	02:00		
Sat	10:00	02:00		
Sun	10:00	02:00		✓
			Please give further details here (please read guidance note 3) NONE OUTSIDE AFTER 22:00 HOURS	
			State any seasonal variations for the provisions of facilities for entertainment of a similar description to that falling within I or J (please read guidance note 4)	
			Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times to those listed in the column on the left, please list. (please read guidance note 5) AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEARS EVE TO THE CLOSE OF BUSINESS ON NEW YEARS DAY.	

L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (✓) (please read guidance note 2)	
Day	Start	Finish	Indoors	
			Outdoors	Both
Mon	23:00	02:00		
Tue	23:00	02:00		
Wed	23:00	02:00		
Thur	23:00	02:00		
Fri	23:00	02:00		
Sat	23:00	02:00		
Sun	23:00	02:00		✓
			Please give further details here (please read guidance note 3)	
			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)	
			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. (please read guidance note 5) AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEARS EVE TO THE CLOSE OF BUSINESS ON NEW YEARS DAY.	

M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption on or off the premises or both – please tick (✓) (please read guidance note 7)	On the premises	
Day	Start	Finish		Off the premises	
Mon	10:00	02:00		Both	<input checked="" type="checkbox"/>
Tue	10:00	02:00			
Wed	10:00	02:00			
Thur	10:00	02:00	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 5) AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEARS EVE TO THE CLOSE OF BUSINESS ON NEW YEARS DAY.		
Fri	10:00	02:00			
Sat	10:00	02:00			
Sun	10:00	02:00			

State the name and details of the individual whom you wish to specify on the licence as premises supervisor	
Name	JULIE DIANNE STABLES
Address	ST PAUL'S LODGE 120 HOLGATE ROAD YORK
Postcode	YO24 4BB
Personal licence number (if known)	CYC-010228
Issuing licensing authority (if known)	CITY OF YORK COUNCIL

N

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 8)

THE OCCASIONAL KISS GRAM, STRIPPER GRAM,
BUT NOT WHEN CHILDREN ARE PRESENT.

O

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	10:00	02:30	
Tue	10:00	02:30	
Wed	10:00	02:30	
Thur	10:00	02:30	<p>Non standard timings. Where you intend to open 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 5)</p> <p>AN EXTRA HOUR AT THE START OF BRITISH SUMMER TIME. OPENING TIME ON NEW YEAR'S EVE TO THE CLOSE OF BUSINESS ON NEW YEAR'S DAY.</p>
Fri	10:00	02:30	
Sat	10:00	02:30	
Sun	10:00	02:30	

P

Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b, c, d, e) (please read guidance note 9)

CCTV WILL BE INSTALLED
NOTICES TO REMIND GUESTS TO LEAVE QUIETLY
STAFF TRAINING
CHILDREN ACCOMPANIED AT ALL TIMES
CARRY OUT RISK ASSESSMENT

b) The prevention of crime and disorder

CCTV INSTALLATION
IMPLEMENT A MANAGEMENT STRATEGY AND APPROPRIATELY
TRAIN STAFF
PARTICIPATE IN LOCAL LICENSING INITIATIVES

c) Public safety

EXTERNAL LIGHTING
ONGOING STAFF TRAINING

d) The prevention of public nuisance

NOTICES FOR NOISE REDUCTION AND CONSIDERATION FOR
THE NEIGHBOURS
ONGOING STAFF TRAINING

e) The protection of children from harm

SIGNAGE
PREVENT THE SUPPLY OF ALCOHOL TO UNDER AGE DRINKERS
ADOPT THE CHALLENGE 21 POLICY
CHILDREN TO BE ACCOMPANIED BY AN ADULT AT ALL TIMES
ONGOING STAFF TRAINING

- | | | |
|--|-------------------------------------|-------------------------------------|
| | Please tick ✓ | Yes |
| • I have made or enclosed payment of the fee | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| • I have enclosed the plan of the premises | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| • I have sent copies of this application and the plan to responsible authorities and others where applicable | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| • I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| • I understand that I must now advertise my application | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| • I understand that if I do not comply with the above requirements my application will be rejected | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO 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 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent. (See guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

Signature *[Handwritten Signature]*

Date *12th February 2009*

Capacity

For joint applications signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent. (please read guidance note 12). **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 13)	
<p><i>120 HOLGATE ROAD</i></p>	
Post town <i>YORK</i>	Post code <i>YO24 4BB</i>
Telephone number (if any) <i>01904-611514</i>	
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)	



Part A
Consent of individual to being specified as premises supervisor

I JULIE DIANNE STABLES (full name of prospective premises supervisor) of
ST PAUL'S LODGE, 120 HOLGATE ROAD, YORK, YO24 4BB
..... (home address of prospective premises supervisor)

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

PREMISES LICENCE (type of application) by
JULIE DIANNE STABLES (name of applicant) relating to a
premises licence (number of existing licence, if any) for
ST PAUL'S LODGE, 120 HOLGATE ROAD,
YORK, YO24 4BB

(name and address of premises to which application relates). I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number: CYC-010228

Personal licence issuing authority:

Name: CITY OF YORK COUNCIL

Address: 9 ST LEONARDS PLACE, YORK, YO1 7ET

Telephone number: 01904-613161

Signature

Name (please print) JULIE DIANNE STABLES

Date.....

