



Licensing Team, Shearbridge Depot Shearbridge Road Bradford BD7 1PU

**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, Jadwiga Nosal 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 am making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

Part 1 – Premises Details

| | |
|---|--------------------|
| Bull Royd Industrial Estate, Unit 1, Bull Royd Lane | |
| Post town: Bradford | Post code: BD8 0LH |

| | |
|---|------------------------|
| Telephone number of premises (if any) | <input type="text"/> |
| Non-domestic rateable value of premises | £ <input type="text"/> |

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 checked="" type="checkbox"/> please complete section (A) |
| b) a person other than an individual* | |
| i. as a limited company/limited liability partnership | <input 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) |
| iv. other (for example a statutory corporation) | <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 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 clicking 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 Mrs Miss Ms Other title (for example, Rev) _____

Surname

First names

Nosal

Jadwiga

Please tick yes

Date of Birth

I am 18 years old or over

Nationality

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone number

Email address (optional)

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 2 for information)

SECOND INDIVIDUAL APPLICANT (if applicable)

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

Surname First names

Please tick yes

Date of Birth I am 18 years old or over

Nationality

Current postal address if different from premises address

Post Town Postcode

Daytime contact telephone number

Email address (optional)

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 2 for information)

W5M BY3 3F4

(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 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?

| Day | | Month | | Year | | | |
|-----|---|-------|---|------|---|---|---|
| 0 | 1 | 0 | 9 | 2 | 0 | 2 | 3 |

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

| Day | | Month | | Year | | | |
|-----|--|-------|--|------|--|--|--|
| | | | | | | | |

The unit we would like to get a licence for is part of a light industrial estate. The complex comprises of an owner managed eight industrial units. The subject unit was previously occupied as a dance studio and currently is vacant. The accommodation has a raised floor and is presently laid out to provide the main working area, offices, kitchen, toilets and internal dock level loading bay. We would like to use the unit to set up a function room where formal dinners or family parties could be held. We would also hold there occasional events throughout the year such as weddings, birthdays and anniversaries. We plan to serve hot food prepared on the premises and serve alcohol strictly for indoor consumption during the events. There would also be live bands and DJs playing recorded music.

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

| |
|-----|
| N/A |
|-----|

What licensable activities do you intend to carry on from the premises?
 (Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 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) V
- f) recorded music (if ticking yes, fill in box F) V
- 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 late night refreshment (if ticking yes, fill in box I)

Sale by retail 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) | Indoors | <input type="checkbox"/> |
|--|-------|--------|--|----------|--------------------------|
| | | | | Outdoors | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Day | Start | Finish | | | |
| Mon | | | Please give further details here (please read guidance note 4) | | |
| | | | | | |
| Tue | | | State any seasonal variations for performing play (please read guidance note 5) | | |
| | | | | | |
| Wed | | | 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) | | |
| | | | | | |
| Thur | | | | | |
| | | | | | |
| Fri | | | | | |
| | | | | | |
| Sat | | | | | |
| | | | | | |
| Sun | | | | | |
| | | | | | |

B

| Films Standard days and timings (please read guidance note 7) | | | Will the exhibition of a 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 | | | |
| Mon | | | Please give further details here (please read guidance note 4) | | |
| | | | | | |
| Tue | | | State any seasonal variations for the exhibition of films (please read guidance note 5) | | |
| | | | | | |
| Wed | | | 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) | | |
| | | | | | |
| 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 | State any seasonal variations for indoor sporting events (please read guidance note 5) | | |
| Mon | | | | | |
| Tue | | | | | |
| Wed | | | | | |
| Thur | | | | | |
| Fri | | | | | |
| Sat | | | | | |
| Sun | | | 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) | | |

D

| | | | | | | |
|--|--------------|---------------|---|--------------------------|---|--|
| Boxing or wrestling entertainment 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) | | | |
| Day | Start | Finish | Indoors | <input type="checkbox"/> | | |
| Mon | | | Outdoors | <input type="checkbox"/> | | |
| Tue | | | Both | <input type="checkbox"/> | | |
| Wed | | | Please give further details here (please read guidance note 4) | | | |
| Thur | | | | | | |
| Fri | | | | | | |
| Sat | | | | | | |
| Sun | | | | | | |
| State any seasonal variations for the boxing or wrestling entertainment (please read guidance note 5) | | | | | 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) | |

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 | V |
|---|---------|---------|---|--|--------------------------|
| Day | Start | Finish | | Outdoors | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Mon | | | | Please give further details here (please read guidance note 4) Live bands will play covers of legendary classics and current pop and disco hits. The bands will have between 2 to 5 members. Usually, the music will be amplified. | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the performance of live music (please read guidance note 5) None | | |
| Thur | | | | | |
| Fri | 12.00pm | 02.00am | 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) New Year's Eve – the band would stop playing music at 3am St. Andrew's Day – the band would stop playing music at 3am | | |
| Sat | 12.00pm | 02.00am | | | |
| Sun | 12.00pm | 02.00am | | | |

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) | Indoors | V |
|---|---------|---------|--|---|--------------------------|
| Day | Start | Finish | | Outdoors | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Mon | | | | Please give further details here (please read guidance note 4) A DJ would play covers of legendary classics and current pop and disco hits. Usually, the music will be amplified. | |
| Tue | | | | | |
| Wed | | | State any seasonal variations for the playing of recorded music (please read guidance note 5) None | | |
| Thur | | | | | |
| Fri | 12.00pm | 02.00am | 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) New Year's Eve – the band would stop playing music at 3am St. Andrew's Day – the band would stop playing music at 3am | | |
| Sat | 12.00pm | 02.00am | | | |
| Sun | 12.00pm | 02.00am | | | |

G

| | | | | | |
|---|--------------|---------------|--|-----------------|-------------------------------------|
| Performance of dance Standard days and timings (please read guidance note 7) | | | Will the performance of dance take place indoors or outdoors or both – 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) Performance of dance will be set individually According to hours of every event. However it will always take place within operating hours | | |
| Mon | | | | | |
| Tue | | | | | |
| Wed | | | | | |
| | | | State any seasonal variations for the performance of dance (please read guidance note 5) | | |
| Thur | | | None | | |
| Fri | 12:00 pm. | 2:00 am | 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) New year eve- performance of dance will stop at 3 am St Andrew's Day- Performance of dance will stop at 3 am | | |
| Sat | 12:00 pm. | 2:00 am | | | |
| Sun | 12:00 pm. | 2:00 am | | | |
| | | | | | |

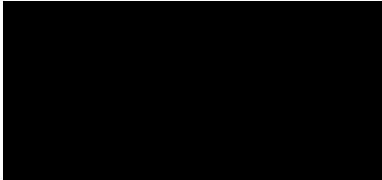
12:00. 2:00

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 | | |
| | | | Will the entertainment 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 entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5) | | |
| Thur | | | | | |
| Fri | | | 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) | | |
| Sat | | | | | |
| Sun | | | | | |
| | | | | | |

| 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 checked="" type="checkbox"/> |
|---|-----------|---------|--|---|-------------------------------------|
| Day | Start | Finish | | Outdoors | <input type="checkbox"/> |
| Mon | | | Please give further details here (please read guidance note 4) Hot food and drink will be provided within operating hours. | Both | <input type="checkbox"/> |
| Tue | | | | | |
| Wed | | | None | State any seasonal variations for the provision of late night refreshment (please read guidance note 5) | |
| Thur | | | | | |
| Fri | 12:00 pm. | 2:00 am | 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 6) New Year Eve hot food and drinks will be provided till 3:00 am St Andrews Day hot food will be provided till 3:00 am | 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 6) | |
| Sat | 12:00 pm. | 2:00 am | | | |
| Sun | 12:00 pm. | 2:00 am | | | |

J

| Supply of alcohol Standard days and timings (please read guidance note 7) | | | Will the supply of alcohol be for consumption on or off the premises or both – please tick (please read guidance note 8) | On the premises | <input checked="" type="checkbox"/> |
|--|-----------|---------|---|---|-------------------------------------|
| Day | Start | Finish | | Off the premises | <input type="checkbox"/> |
| Mon | | | None | Both | <input type="checkbox"/> |
| Tue | | | | | |
| Wed | | | 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) New Years eve - Alkohol will be provided till 3:00 am St Andrew's Day - Alkohol will be provided till 3:00 am | 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) | |
| Thur | | | | | |
| Fri | 12:00 pm. | 2:00 am | | | |
| Sat | 12:00 pm. | 2:00 am |  | 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) | |
| Sun | 12:00 pm. | 2:00 am | | | |

State the name and details of the individual whom you wish to specify on the licence as the designated premises supervisor (please see declaration about the entitlement to work in the checklist at the end of the form)

Name

Jadwiga Nosal

Address

█ Creskeld Way
Bradford

Postcode

BD15 9BA

Personal licence number (if known)

Issuing licensing authority (if known)

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)

There will be no adult entertainment services or activities organised on the premises. The proposed use of the unit will be family friendly.

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) Our planned function room is not designed to be opened to public. Each event will be organised for a specific purpose and will be invite only. |
|---|-------|--------|---|
| Day | Start | Finish | |
| Mon | | | 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 6) N/A |
| | | | |
| Tue | | | |
| | | | |
| Wed | | | |
| | | | |
| Thur | | | |
| | | | |
| Fri | | | |
| | | | |
| Sat | | | |
| | | | |
| Sun | | | |
| | | | |

M

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 10)

- The premises will always operate to a high standard and will continue to do so should this licence be granted in terms of the consumption of alcohol.
- The Licensee will 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.

b) The prevention of crime and disorder

- Any incidents of a criminal nature that may occur on the premises will be reported to the Police.
- Door supervisor will be employed at the premises to a ratio of 1:100 customers.
- A C.C.T.V. system has been installed.
- A notice will be displayed at the entrance to the premises advising that C.C.T.V. is in operation.
- At least one C.C.T.V. camera will be in operation at the front of the premises at all times when the premises is in use.
- All bottles and glasses are to be removed from public areas as soon as the contents have been drunk or are empty.
- A Personal Licence holder will be at the premises at all times when alcohol is being consumed or regulated entertainment is being provided.

c) Public safety

- All exit doors are easily operable without the use of a key, card, code or similar means.
- Exit doors are regularly checked to ensure they function satisfactorily.
- Adequate and appropriate First Aid equipment and materials are available on the premises.
- In the absence of adequate daylight suitable a sufficient artificial lighting is provided and maintained in any area accessible to the customers.
- Appropriate fire safety procedures are in place including fire extinguishers, fire blanket, internally illuminated fire exit signs, smoke detectors and emergency lighting.

d) The prevention of public nuisance

- Doors and windows will be kept closed when regulated entertainment is taking place.
- The premises are air-conditioned to avoid the need to open doors and windows for ventilation.
- All ventilation and extract systems are designed and maintained so as to prevent noxious smells causing a nuisance to nearby properties.
- All external lighting, including floodlighting, is directed away from adjacent occupiers.
- Rubbish bins are placed outside and inside of the premises for customers to use and are emptied by staff after each event.
- All customers will be asked to leave quietly.

a) 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, 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 to prevent underage alcohol consumption.
- All children on the premises will be supervised/ accompanied by an adult after 21:00 hours
- Children will be accounted for at all times in case of an evacuation or emergency.

Checklist

Please tick to indicate agreement

- payment of the fee to be made by bank card please call me ✓
- 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 ✓

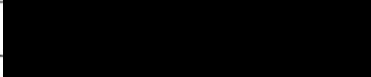
Applicable to all individual applicants, including those in partnership which is not a limited liability partnership, but not companies or limited liability partnerships

- 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 ✓

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 PURUANT 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

| | |
|-------------|---|
| Declaration | <p>Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership.</p> <ul style="list-style-type: none"> • 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 proof of entitlement to work, or have conducted an online right to work checking service which confirmed their right to work (please see note 15). |
| Signature |  |
| Date | 24.07.2023 ✓ |
| Capacity | Applicant |

For joint applications signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent.

| | |
|-----------|--|
| Signature | |
| Date | |
| Capacity | |

Contact Name and address for correspondence associated with this application

Jadwiga Nosal

Post town: [REDACTED] Creskeld Way, Bradford

Post code: BD15 9BA

Telephone number: [REDACTED]

If you would prefer us to correspond with you by e-mail, your e-mail address:

[REDACTED]@gmail.com