

**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 Roxy Leisure Ltd

(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			
Roxy Lanes 103/109 High Street			
Post town	Cheltenham	Postcode	GL50 1DP

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£322,500

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 please complete section (B)
- ii. as a partnership 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:

Please tick yes

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 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					
Nationality					
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail 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 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)	
Surname			First names		
Date of birth					
Nationality					
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
Current postal address if different from premises address					
Post town		Postcode			
Daytime contact telephone number					
E-mail 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 15 for information)					

(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 Roxy Leisure Ltd
Address Unit 5 Clayton Wood Court Leeds LS16 6QW
Registered number (where applicable) 09724448

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

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
A	S	A P

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

DD	MM	YYYY

<p>Please give a general description of the premises (please read guidance note 1)</p> <p>Roxy Lanes will be a bowling alley with other competitive socialising games, with a food and bar offering also.</p>

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 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick any 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 6)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	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 3)					
Mon								
Tue								
Wed						<u>State any seasonal variations for performing plays</u> (please read guidance note 4)		
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 5)		
Sat								
Sun								

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon	11:00	00:00			
Tue	11:00	00:00			
Wed	11:00	00:00	<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)		
Thur	11:00	02:00			
Fri	11:00	02:00	<u>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</u> (please read guidance note 5) On New Year's Eve the permitted hours shall extend through from the end of permitted hours on New Year's Eve to the start of permitted hours on New Year's Day. For statutory bank holiday weekend periods (Friday, Saturday, Sunday and Monday) and for the Thursday before Good Friday and for Christmas Eve, the finish time will be extended by one hour beyond these times.		
Sat	11:00	02:00			
Sun	11:00	00:00			

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Tue			
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 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	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 3)		
Mon					
Tue			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Wed					
Thur					
Fri			<u>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</u> (please read guidance note 5)		
Sat					
Sun					

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

F

Recorded music Standard days and timings (please read guidance note 6)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	11:00	00:00	<u>Please give further details here</u> (please read guidance note 3)		
Tue	11:00	00:00			
Wed	11:00	00:00	<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)		
Thur	11:00	02:00			
Fri	11:00	02:00	<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 5) On New Year's Eve the permitted hours shall extend through from the end of permitted hours on New Year's Eve to the start of permitted hours on New Year's Day. For statutory bank holiday weekend periods (Friday, Saturday, Sunday and Monday) and for the Thursday before Good Friday and for Christmas Eve, the finish time will be extended by one hour beyond these times.		
Sat	11:00	02:00			
Sun	11:00	00:00			

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		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 3)			
Mon						
Tue						
Wed						
Thur						
Fri						
Sat						
Sun						
			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)			
			<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 5)			

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)</p>			<p>Please give a description of the type of entertainment you will be providing</p>		
Day	Start	Finish	<p><u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><u>Please give further details here</u> (please read guidance note 3)</p>		
Wed					
Thur			<p><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)</p>		
Fri					
Sat			<p><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> (please read guidance note 5)</p>		
Sun					

I

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)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon	23:00	00:00	<u>Please give further details here</u> (please read guidance note 3)		
Tue	23:00	00:00			
Wed	23:00	00:00			
Thur	23:00	02:00	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Fri	23:00	02:00			
Sat	23:00	02:00			
Sun	23:00	00:00	<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 5)		

On New Year's Eve the permitted hours shall extend through from the end of permitted hours on New Year's Eve to the start of permitted hours on New Year's Day.

For statutory bank holiday weekend periods (Friday, Saturday, Sunday and Monday) and for the Thursday before Good Friday and for Christmas Eve, the finish time will be extended by one hour beyond these times.

J

Supply of alcohol Standard days and timings (please read guidance note 6)			<u>Will the supply of alcohol be for consumption – please tick</u> (please read guidance note 7)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 4)		
Mon	11:00	00:00			
Tue	11:00	00:00			
Wed	11:00	00:00			
Thur	11:00	02:00			
Fri	11:00	02:00			
Sat	11:00	02:00			
Sun	11:00	00:00	<u>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</u> (please read guidance note 5) On New Year's Eve the permitted hours shall extend through from the end of permitted hours on New Year's Eve to the start of permitted hours on New Year's Day. For statutory bank holiday weekend periods (Friday, Saturday, Sunday and Monday) and for the Thursday before Good Friday and for Christmas Eve, the finish time will be extended by one hour beyond these times.		

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor:

Name:	[REDACTED]
Date of Birth:	[REDACTED]
Address:	[REDACTED]
Postcode:	[REDACTED]
Personal licence number (if known):	[REDACTED]
Issuing licensing authority (if known):	[REDACTED]

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 8).

L

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) 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 5) On New Year's Eve the permitted hours shall extend through from the end of permitted hours on New Year's Eve to the start of permitted hours on New Year's Day. For statutory bank holiday weekend periods (Friday, Saturday, Sunday and Monday) and for the Thursday before Good Friday and for Christmas Eve, the finish time will be extended by one hour beyond these times.
Day	Start	Finish	
Mon	11:00	00:30	
Tue	11:00	00:30	
Wed	11:00	00:30	
Thur	11:00	02:30	
Fri	11:00	02:30	
Sat	11:00	02:30	
Sun	11:00	00:30	

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 9)

1. The premises licence will only be operated as a bowling alley/competitive socialising venue
2. There shall be no dancefloor.

b) The prevention of crime and disorder

3. CCTV shall be in use at the premises.
 - (i) The CCTV equipment shall be maintained in good working order and continually record when licensable activity takes place and for a period of two hours afterwards.
 - (ii) The premises licence holder shall ensure images from the CCTV are retained for a period of 31 days. This image retention period may be reviewed as appropriate by the Licensing Authority.
 - (iii) The correct time and date will be generated onto both the recording and the real time image screen.
 - (iv) If the CCTV equipment (Including any mobile units in use at the premises) breaks down the Premises Licence Holder shall ensure the designated premises supervisor, or in his/her absence other responsible person, verbally informs the Licensing Authority and the Police as soon as is reasonably practicable. This information shall be contemporaneously recorded in the incident report register and shall include the time, date and means this was done and to whom the information was reported. Equipment failures shall be repaired or replaced as soon as is reasonably practicable and without undue delay. The Licensing Authority and the Police shall be informed when faults are rectified.
 - (v) The premises Licence holder shall ensure that there are trained members of staff available during licensable hours to be able to reproduce and download CCTV images into a removable format at the justified request of an authorised officer of the Licensing Authority or a constable.
 - (vi) There shall be clear signage indicating that CCTV equipment is in use and recording at the premises.
4. There will be a minimum of two SIA registered Door Supervisors from 20:00hrs on Fridays, Saturdays and Sundays before Bank Holidays.
5. At all other times, SIA registered Door Supervisors will be employed at the premises in accordance with a written risk assessment carried out by the premises. A copy of the risk assessment shall be kept on the premises and made available to the police and other responsible authorities on request.
6. The premises licence holder shall ensure that the following details for each door supervisor are entered into a bound register kept for that purpose to include the following details:
 - (i) Name
 - (ii) Date of birth
 - (iii) Address
 - (iv) Contact telephone numbers
 - (iv) SIA Certificate number, or registration number of any accreditation scheme recognised by the Licensing Authority.
 - (v) Commencement date of performing duties at the premises.
 - (vi) The full details of any agency through which they have been allocated to work at the premises if appropriateThese details should be easily accessible to any authorised officer of the Licensing Authority or a constable.
7. The Premises Licence Holder shall require the Designated Premises Supervisor, or in his/ her absence other responsible person, to keep an “Incident report register” in a bound book, in which

full details of all incidents are recorded. This shall be completed as soon as possible and in any case no later than the close of business on the day of the incident. The time and date when the report was completed, and by whom, is to form part of the entry. The register is to be kept on the premises at all times and shall be produced to an authorised officer of the Licensing Authority or a constable when required.

8. An incident report logbook shall be held at the premises at all times and shall be produced to an authorised officer of the Licensing Authority or a constable immediately upon request. It shall contain the details of persons involved, incident description, time and date, actions taken and final outcome of the situation.
9. The premises holder shall ensure that the premises are a member of any locally operating Pub Watch scheme.
10. The premises shall be cleared of customers within 30 minutes of the last supply of alcohol on any day.
11. All staff are to be trained with respect to underage sales, such training to be updated as necessary when legislation changes and should include training in how to refuse sales to difficult customers.

c) Public safety

12. The Licensee shall ensure that any bottles or glasses are removed from persons leaving the premises.
13. Members of the public will be prevented from accessing hot food and drink preparation areas to prevent risks of scalds and burns to them.

d) The prevention of public nuisance

14. Amplified music shall not be played at a level that will cause unreasonable disturbance to the occupants of any properties in the vicinity.
15. No speakers for amplification of music shall be placed on the outside of the premises or on the outside of any building forming a part of the premises.
16. Noise from any ventilation, refrigeration or air conditioning plant or equipment shall not cause nuisance to the occupants of any properties in the vicinity.
17. Signs shall be prominently displayed at the premises requesting that patrons respect local residents and leave the premises quietly.
18. The premises licence holder shall ensure that adequate measures are in place to prevent the escape of odours from the premises. This includes odour from food preparation and refuse storage.

e) The protection of children from harm

19. No Persons under the age of 18 permitted on the premises without a responsible adult.
20. No persons under the age of 18 permitted on the premises after 20:00hrs.
21. An approved proof of age scheme shall be adopted, implemented and advertised within the premise such as "Challenge 25" whereby an accepted form of photographic identification shall be requested before any alcohol is sold to any person who appears to be under 25 years of age. Acceptable proof of age shall include identification bearing the customers photograph, date of birth and integral

holographic mark or security measure. Suitable means of identification would include PASS approved proof of age card, photo-card driving licence and passport.

22. Publicity materials notifying customers of the operation of the Challenge 25 scheme shall be displayed at the premises, including a Challenge 25 sign of at least A5 size at the entrance to the premises and where practicable at each point of sale.

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 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.**

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
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	<p>cease to be entitled to live and work in the UK (please read guidance note 15)</p> <ul style="list-style-type: none"> 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 licesable 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	<i>Woods Whur</i>
Date	31 October 2022
Capacity	Woods Whur - Solicitors for the Applicant

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	

<p>Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)</p> <p>██████████ Woods Whur St James House 28 Park Place</p>			
Post town	Leeds	Postcode	LS1 2SP
Telephone number (if any)	██████████		
<p>If you would prefer us to correspond with you by e-mail, your e-mail address (optional)</p> <p>Chris@woodswhur.co.uk</p>			