



F. McArdle
Chief Executive

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Swadlincote, Derbyshire DE11 0AH

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DX 23912 Swadlincote
Email :
democraticservices@south-derbys.gov.uk

Date: 8th September 2016

Dear Councillor,

Licensing and Appeals Sub-Committee

Please find enclosed the agenda and supporting information for the Licensing and Appeals Sub-Committee meeting.

The **Licensing and Appeals Sub-Committee** will meet on **Friday, 16 September 2016**, in the **Council Chamber** at the Civic Offices, Civic Way, Swadlincote. The meeting will commence at **10:00**.

If you require any further information, please contact Democratic Services on the number shown above.

Yours faithfully,

F.B. McArdle
Chief Executive

To:- **Conservative Group**
Councillor Mrs Patten (Chairman) and Councillor Stanton

Labour Group
Councillor Taylor



AGENDA

Open to Public and Press

1. Apologies.
2. To note any declarations of interest arising from any items on the Agenda
3. DETERMINATION OF AN APPLICATION FOR THE GRANT OF A PREMISES LICENCE **3 - 36**

Exclusion of the Public and Press:

4. The Chairman may therefore move:-
That in accordance with Section 100 (A)(4) of the Local Government Act 1972 (as amended) the press and public be excluded from the remainder of the Meeting as it is likely, in view of the nature of the business to be transacted or the nature of the proceedings, that there would be disclosed exempt information as defined in the paragraph of Part I of the Schedule 12A of the Act indicated in the header to each report on the Agenda.

REPORT TO LICENSING & APPEALS SUB-COMMITTEE

Agenda Item: 3

Hearing Date: 16th September 2016

Contact Officer: Mark Lomas – 01283 595890

DETERMINATION OF AN APPLICATION FOR THE GRANT OF A PREMISES LICENCE UNDER THE LICENSING ACT 2003.

Applicant's Name	No.11 Deli Ltd.
Premises Name	No.11 Deli Ltd
Address	Unit 12, The Visitors Centre Melbourne Hall Church Square Melbourne Derbyshire DE73 8EN

1. PURPOSE

- 1.1 To determine an application for the grant of a premises licence received by the Licensing Authority on the 12th July 2016. A copy of the application is attached at **Appendix 1**.

2. BACKGROUND

- 2.1 The applicant is seeking a new premises licence to permit the sale by retail of alcohol for consumption off the premises.

3. APPLICATION DETAILS

- 3.1 The applicant requests the Authority to permit the following:

Activity	Days	Times
Sale by retail of alcohol off the premises.	Monday to Thursday	09:00 – 18:00
	Friday and Saturday	08:00 – 18:00
	Sunday	10:30 – 18:00
	Christmas Eve	07:00 – 19:00

- 3.2 The steps the applicant intends to take to promote all four licensing objectives can be seen at section M of the application form.

4. CONSULTATION RESPONSES

Derbyshire Constabulary

Representation received during the 28 day consultation period. Full details can be found at **Appendix 2**.

DCC Trading Standards

Representation received during the 28 day consultation period. Full details can be found at **Appendix 2**.

5. AGREEMENT BETWEEN PARTIES

- 5.1 The applicant has agreed to have the conditions requested by Derbyshire Constabulary and Derbyshire County Council Trading Standards as shown at **Appendix 3** added to their licence.
- 5.2 Derbyshire Constabulary and Derbyshire County Council Trading Standards have subsequently withdrawn their representation show as at **Appendix 4**.
- 5.3 All parties have agreed to dispense with the need to hold a hearing.

6. DETERMINATION

- 6.1 The power to grant licences in these circumstances remains with the Licensing and Appeals Sub-Committee.
- 6.2 As all parties have agreed to dispense with a hearing, there is no requirement to hear evidence, and Members are asked to grant the licence subject to such conditions contained in the operating schedule, together with proposed conditions from Derbyshire Constabulary and Derbyshire County Council Trading Standards, and any mandatory conditions required under the Licensing Act 2003.

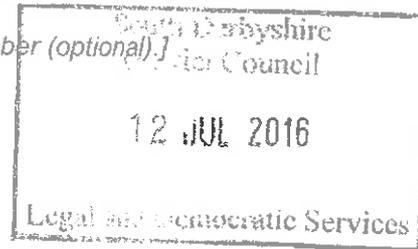
7. RIGHT OF APPEAL

- 7.1 The applicant or persons making representations have a right of appeal against the decision of the Licensing Authority.

APPENDICES

1. Application for a premises licence to be granted under the Licensing Act 2003
2. Representation's from Derbyshire Constabulary and Derbyshire County Council Trading Standards
3. Agreed conditions to be added to the Operating Schedule
4. Withdrawal of representations from Derbyshire Constabulary and Derbyshire County Council Trading Standards.

[Insert name and address of relevant licensing authority and its reference number (optional)]



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 No 11 deli 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	
unit 12, The Visitors Centre Melbourne Hall Church Square Melbourne Derby. DE73 8EN	
Post town	Derby
Postcode	DE738EN
Telephone number at premises (if any)	
Non-domestic rateable value of premises	£1,675

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	Mrs	Miss	Ms	Other Title (for example, Rev)
Surname			First names	
I am 18 years old or over				Please tick yes <input type="checkbox"/>
Current postal address if different from premises address				
Post town			Postcode	
Daytime contact telephone number				
E-mail address (optional)				

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				
E-mail address (optional)				

(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	No 11 deli Ltd
Address	11 BOROUGH STREET CASTLE DONINGTON DERBY DE74 2LA
Registered number (where applicable)	6555208
Description of applicant (for example, partnership, company, unincorporated association etc.)	LIMITED COMPANY
Telephone number (if any)	01332 813555
E-mail address (optional)	info@no11deli.co.uk

Part 3 Operating Schedule

When do you want the premises licence to start? DD MM YYYY
02 08 2016

If you wish the licence to be valid only for a limited period, when do you want it to end? DD MM YYYY
N/A

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

SMALL RETAIL UNIT SITUATED WITHIN MELBOURNE HALL ESTATE FOR THE SALE OF COFFEES, ICE CREAMS, SANDWICHES AND HAMPERs TO TAKE AWAY NO SEATING AREA PROVIDED.

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? THE SALE BY RETAIL OF ALCOHOL
(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	
Day	Start	Finish		Outdoors	
Mon			<u>Please give further details here</u> (please read guidance note 3)	Both	
Tue					
Wed					
Thur			<u>State any seasonal variations for performing plays</u> (please read guidance note 4)		
Fri					
Sat					
Sun			<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)		

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	
					Outdoors	
Day	Start	Finish			Both	
Mon			<u>Please give further details here</u> (please read guidance note 3)			
Tue						
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)			
Thur						
Fri			<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)			
Sat						
Sun						

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			State any seasonal variations for indoor sporting events (please read guidance note 4)
Tue			
Wed			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)
Thur			
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments 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)	Indoors	
				Outdoors	
Day	Start	Finish	Both		
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed					
Thur			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)		
Fri			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)		
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	
					Outdoors	
Day	Start	Finish	Both			
Mon			Please give further details here (please read guidance note 3)			
Tue						
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)			
Thur						
Fri			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)			
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	
					Outdoors	
Day	Start	Finish	Both			
Mon			<u>Please give further details here</u> (please read guidance note 3)			
Tue						
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)			
Thur						
Fri			<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)			
Sat						
Sun						

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)	
Day	Start	Finish	Indoors	
Mon				
Tue				
Wed				
Thur				
Fri				
Sat				
Sun				

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

State any seasonal variations for the performance of dance (please read guidance note 4)

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)

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>Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)</p>	Indoors	
Mon				Outdoors	
Tue			<p>Please give further details here (please read guidance note 3)</p>		
Wed					
Thur			<p>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)</p>		
Fri					
Sat			<p>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)</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	
					Outdoors	
Day	Start	Finish	Both			
Mon			<u>Please give further details here</u> (please read guidance note 3)			
Tue						
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)			
Thur						
Fri			<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)			
Sat						
Sun						

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)	On the premises	
				Off the premises	<input checked="" type="checkbox"/>
				Both	
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	9:00	18:00	Christmas Eve - 7:00 - 19:00 18:00		
Tue	9:00	18:00			
Wed	9:00	18:00			
Thur	9:00	18:00	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)		
Fri	8:00	18:00	None		
Sat	8:00	18:00			
Sun	10:30	18:00			

Amended as per telephone call to Liza Fox 22/07/12

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

Name	MRS LIZA FOX
Address	94 HIGH STREET CASTLE DONINGTON DERBY DERBYSHIRE
Postcode	DE74 2PQ
Personal licence number (if known)	NWL71076
Issuing licensing authority (if known)	NWLDC

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).

None

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)
Day	Start	Finish	
Mon	9:00	18:00	Christmas Eve 7:00 - 19:00
Tue	9:00	18:00	
Wed	9:00	18:00	
Thur	9:00	18:00	
Fri	8:00	18:00	
Sat	8:00	18:00	
Sun	10:30	18:30	
			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)
			NONE

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)

ALCOHOL TO BE CONSUMED OFF THE PREMISES
STRONG MANAGEMENT CONTROLS & ONLY.
EFFECTIVE TRAINING OF ALL STAFF SO THAT
THEY ARE AWARE OF THE PREMISES LICENCE.
OPERATE A CLEAR "CHALLENGE 25" POLICY
NO DRUNK AND DISORDERLY BEHAVIOUR ON THE PREMISES

b) The prevention of crime and disorder

AS ABOVE

c) Public safety

AS ABOVE

d) The prevention of public nuisance

AS ABOVE

e) The protection of children from harm

AS ABOVE

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.

IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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	<i>Liza Fox</i>
Date	1-7-2016
Capacity	DIRECTOR

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 postal address for correspondence associated with this application (please read guidance note 13)

LIZA FOX
NO 11 DELI
11 BOROUGH STREET
CASTLE DONINGTON

Post town **DERBY** Postcode **DE74 2LA**

Telephone number (if any) **01332 813555**

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

info@no11deli.co.uk

Notes for Guidance

Consent of individual to being specified as premises supervisor

Mrs Liza Fox

I

[full name of prospective premises supervisor]

of No 11 deli Ltd
94 High Street
Castle Donington
Derby
DE74 2PQ

[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

New premises licence
[type of application]

by

No 11 deli Ltd
[name of applicant]

relating to a premises licence

[number of existing licence, if any]

for

No 11 deli
Unit 12, The visitors Centre
Melbourne Hall
Church Square
Melbourne
Derby. DE73 8EN
[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by

No 11 deli Ltd

[name of applicant]

concerning the supply of alcohol at

No 11 deli
Unit 12, The Visitors Centre
Melbourne Hall
Church Square
Melbourne
Derby. DE73 8EN

[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

NWL11016

[insert personal licence number, if any]

Personal licence issuing authority

NWLDC

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed

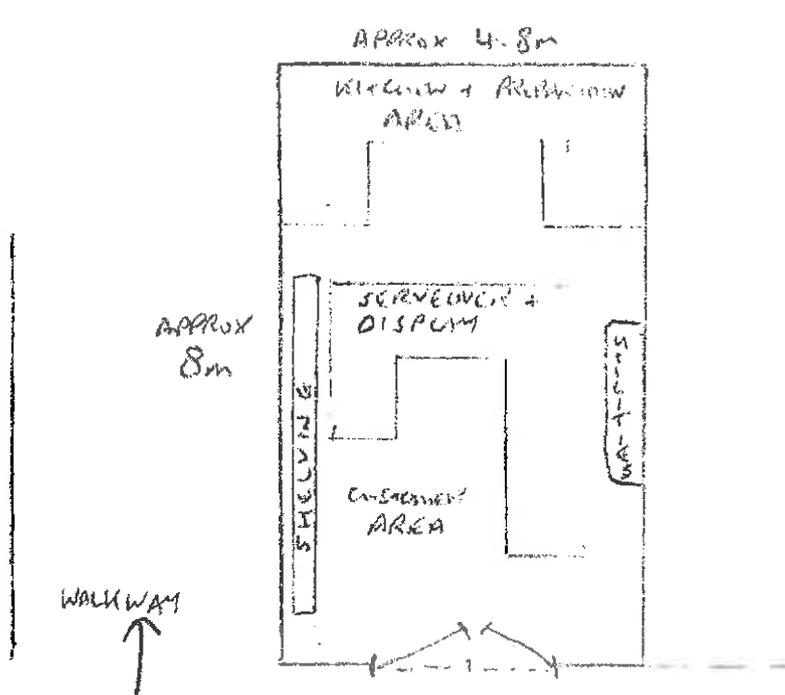


Liza Fox

Name (please print)

1-7-16

Date



NOTES

BUILDING - GRADE I LISTED

NO TOILETS WITHIN BUILDING

SEPARATE TOILET FACILITIES WITHIN THE ESTATE, MALE, FEMALE + DISABLED.

Nº 11 Deli LTD
MRS. LIZA FOX (DIRECTOR)
11 BOROUGH STREET
CASTLE DONINGTON
DERBYSHIRE - DE 14-2PA
DRAWN BY L. FOX / CHECKED M. FOX
SCALE 1:100 PREPARED JULY 2016
BUILDINGS APPROXIMATE

REPRESENTATION FORM FROM RESPONSIBLE AUTHORITIES

Responsible Authority (please delete as applicable):

Police / Fire / Environmental Protection / Health and Safety / Child Protection / Trading Standards/ Planning Authority / Licensing Authority / Health Authority

Name	Mark Dunn
Job Title	Police Licensing Enforcement Officer PC2013
Postal and email address	Derby Divisional HQ St Marys Wharf Derby DE1 3AB
Contact telephone number	0300 122 5408

Name of the premises you are making a representation about	No11 Deli Ltd
Address of the premises you are making a representation about	Unit 12 Visitors Centre, Melbourne Hall, Church Square, Melbourne, Derbys DE73 8EN

Which of the four licensing objectives does your representation relate to?	Yes Or No	Please detail the evidence supporting your representation. Or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	yes	The conditions offered initially by the applicant are not adequate and/or not enforceable.
Public safety	yes	The conditions offered initially by the applicant are not adequate and/or not enforceable.
To prevent public nuisance	yes	The conditions offered initially by the applicant are not adequate and/or not enforceable.
To protect children from harm	yes	The conditions offered initially by the applicant are not adequate and/or not enforceable.

Suggested conditions that could be added to the licence to remedy your representation or other suggestions you would like the Licensing Sub Committee to take into account. Please use separate sheets where necessary and refer to checklist.	I would ask that the attached conditions at appendix 1 are considered by the Licensing Sub Committee in an effort to give the responsible authorities the confidence that the licensing objections are indeed being promoted satisfactorily.
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Signed:



Date: 4th August 2016

Please return this form along with any additional sheets to the Licensing Section, South Derbyshire District Council, Council Offices, Civic Way, Swadlincote, Derby DE11 0AH or email to licensing@south-derbys.gov.uk This form must be returned within the statutory period. For more details please check with the Licensing Office on 01283 595 716/890/724

APPENDIX 1

1) Full training is provided to all staff on commencement of employment relating to all age-restricted products sold and any system or procedures they are expected to follow in the course of dealing with these goods.

2) Refresher training should be provided at regular intervals – at least every 12 months.

3) Records detailing the training provided shall be kept on the premises for production upon request of a Police Officer or other authorised person acting on behalf of a responsible authority as detailed within Section 13 Of the Licensing Act 2003.

4) All records will be written and shall be retained on the premise for a minimum of 12 months.

5) A system of recording sales refused under the proof of age scheme will be operated at all times.

6) The refusal book/log shall be produced upon request of a Police Officer or other authorised person acting on behalf of a responsible authority as detailed within Section 13 Of the Licensing Act 2003.

7) The records relating to the refusal book/log shall be retained for the premises for a minimum of 12 months.

REPRESENTATION FORM FROM RESPONSIBLE AUTHORITIES

Responsible Authority (please delete as applicable):
Trading Standards

Name	Clair Dathan
Job Title	Principal Trading Standards Officer
Postal and email address	Derbyshire County Council Trading Standards Chatsworth Hall Chesterfield Road Matlock Derbyshire
Contact telephone number	01629 539848

Name of the premises you are making a representation about	No 11 deli Ltd
Address of the premises you are making a representation about	Unit 12 The Visitors Centre Melbourne Hall Church Square Melbourne Derbyshire DE73 8EN

Which of the four licensing objectives does your representation relate to?	Yes Or No	Please detail the evidence supporting your representation. Or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	No	
Public safety	No	
To prevent public nuisance	No	
To protect children from harm	Yes	The steps described in the Operating Schedule of the application are not sufficiently precise and clear about the measures the proposed premises licence holder intends to adopt, particularly to protect children from harm. In particular, there appears to be no indication of how the applicant proposes to train staff, record that training or monitor whether their people act as intended following the training provided.

Suggested conditions that could be added to the licence to remedy your representation or other suggestions you would like the Licensing Sub Committee to take into account. Please use separate sheets where necessary and refer to checklist.	<p>1. Full training is provided to staff on commencement of employment on the law relating to all age-restricted products sold and any system or procedures they are expected to follow in the course of dealing with these goods. Refresher training should be provided at regular intervals (at least 6-monthly).</p> <p>Records detailing the training provided will be kept on the</p>
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premises for production, on request, to an officer of a Responsible Authority. Records shall be retained on the premises for a minimum of 2 years.

2. The age verification policy applying to the premises is 'Challenge 25'; that means anyone attempting to purchase alcohol (or other min.18 restricted product) that appears under the age of 25 years will be asked to prove their age. Acceptable forms of identification will be a PASS-accredited proof of age card, photo driving licence or passport. Failure to produce satisfactory proof of age will result in a refused sale.

Clear, prominent and unobstructed signage informing customers of the age verification policy in operation and the age restrictions on products, will be clearly displayed at:

- all entry points to the premises,
- adjacent to the products, where displayed, and
- all points of sale.

3. A system of recording sales refused under the age verification policy will be operated at all times.

At least weekly, the Designated Premises Supervisor (or deputy, authorised in writing) will:

- examine the record and compare it against the normal operating pattern for the premises
- indicate any action required following that examination
- sign off/endorse the record to indicate the above points have been carried out

The refusal record will be kept on the premises for production, on request, to an officer of a Responsible Authority. Records shall be retained on the premises for a minimum of 2 years.

B. Dutton

Signed:

Date: 1.8.16

Please return this form along with any additional sheets to the Licensing Section, South Derbyshire District Council, Council Offices, Civic Way, Swadlincote, Derbyshire, DE11 0AH or email to licensing@south-derbys.gov.uk This form must be returned within the statutory period. For more details please check with the Licensing Office on 01283 595 716/890/724

**Licensing Act 2003
Premises Licence Application – No 11 Deli Ltd.
Notification to Local Authority of agreement regarding
Representations**

To: Licensing Authority Office

Date: 11th August 2016

Dear Sir/Madam

I write in my capacity as the applicant in relation to the above matter. Discussions have taken place with Derbyshire County Council Trading Standards and Derbyshire Constabulary in relation to the promotion of the licensing objectives.

I would like to add the following conditions to my application:

1. Full training is provided to staff on commencement of employment on the law relating to all age-restricted products sold and any system or procedures they are expected to follow in the course of dealing with these goods. Refresher training should be provided at regular intervals (at least 6-monthly).

Records detailing the training provided will be kept on the premises for production, on request, to an officer of a Responsible Authority. Records shall be retained on the premises for a minimum of 2 years.

2. The age verification policy applying to the premises is 'Challenge 25'; that means anyone attempting to purchase alcohol (or other min.18 restricted product) that appears under the age of 25 years will be asked to prove their age. Acceptable forms of identification will be a PASS-accredited proof of age card, photo driving licence or passport. Failure to produce satisfactory proof of age will result in a refused sale.

Clear, prominent and unobstructed signage informing customers of the age verification policy in operation and the age restrictions on products, will be clearly displayed at:

- all entry points to the premises,
- adjacent to the products, where displayed, and
- all points of sale.

3. A system of recording sales refused under the age verification policy will be operated at all times.

At least weekly, the Designated Premises Supervisor (or deputy, authorised in writing) will:

- examine the record and compare it against the normal operating pattern for the premises
- indicate any action required following that examination
- sign off/endorse the record to indicate the above points have been carried out

The refusal record will be kept on the premises for production, on request, to an officer of a Responsible Authority. Records shall be retained on the premises for a minimum of 2 years.

Please accept this notice as formal request to amend my application/operating schedule in accordance with the above and note that I agree to these conditions being attached to the premises licence. Furthermore, I confirm that I do not consider a hearing to be necessary.

Signed



Name in block : Lisa FOX

Date : 11th August 2016

Licensing Act 2003
Premises Licence Application – No 11 The Deli
Notification to Local Authority of agreement regarding
Representations

To: Licensing Authority Office

Date: 15.8.16

Dear Sir/Madam

I write in my capacity as the Trading Standards Officer for Derbyshire County Council.

Discussions have taken place with the application in relation to the promotion of the licensing objectives.

I understand that the applicant has formally amended their application to include the following conditions:

1. Full training is provided to staff on commencement of employment on the law relating to all age-restricted products sold and any system or procedures they are expected to follow in the course of dealing with these goods. Refresher training should be provided at regular intervals (at least 6-monthly).

Records detailing the training provided will be kept on the premises for production, on request, to an officer of a Responsible Authority. Records shall be retained on the premises for a minimum of 2 years.

2. The age verification policy applying to the premises is 'Challenge 25'; that means anyone attempting to purchase alcohol (or other min.18 restricted product) that appears under the age of 25 years will be asked to prove their age. Acceptable forms of identification will be a PASS-accredited proof of age card, photo driving licence or passport. Failure to produce satisfactory proof of age will result in a refused sale.

Clear, prominent and unobstructed signage informing customers of the age verification policy in operation and the age restrictions on products, will be clearly displayed at:

- all entry points to the premises,
- adjacent to the products, where displayed, and
- all points of sale.

3. A system of recording sales refused under the age verification policy will be operated at all times.

At least weekly, the Designated Premises Supervisor (or deputy, authorised in writing) will:

- examine the record and compare it against the normal operating pattern for the premises

- indicate any action required following that examination
- sign off/endorse the record to indicate the above points have been carried out

The refusal record will be kept on the premises for production, on request, to an officer of a Responsible Authority. Records shall be retained on the premises for a minimum of 2 years.

On this basis, please accept this notice as formal notification to withdraw my representation to the above premises licence application. Furthermore, I confirm that I do not consider a hearing to be necessary.

Signed... *Clair Dathan*

Name in block CLAIR DATHAN

Date 15.8.16

**Licensing Act 2003
Premises Licence Application – No.11 Deli Ltd.
Notification to Local Authority of agreement regarding
Representations**

To: Licensing Authority Office

Date: 16/08/16

Dear Sir/Madam

I write in my capacity as the Licensing Enforcement Officer for Derbyshire Police

Discussions have taken place with the application in relation to the promotion of the licensing objectives.

I understand that the applicant has formally amended their application to include the following conditions:

1. Full training is provided to staff on commencement of employment on the law relating to all age-restricted products sold and any system or procedures they are expected to follow in the course of dealing with these goods. Refresher training should be provided at regular intervals (at least 6-monthly).

Records detailing the training provided will be kept on the premises for production, on request, to an officer of a Responsible Authority. Records shall be retained on the premises for a minimum of 2 years.

2. The age verification policy applying to the premises is 'Challenge 25'; that means anyone attempting to purchase alcohol (or other min.18 restricted product) that appears under the age of 25 years will be asked to prove their age. Acceptable forms of identification will be a PASS-accredited proof of age card, photo driving licence or passport. Failure to produce satisfactory proof of age will result in a refused sale.

Clear, prominent and unobstructed signage informing customers of the age verification policy in operation and the age restrictions on products, will be clearly displayed at:

- all entry points to the premises,
- adjacent to the products, where displayed, and
- all points of sale.

3. A system of recording sales refused under the age verification policy will be operated at all times.

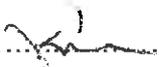
At least weekly, the Designated Premises Supervisor (or deputy, authorised in writing) will:

- examine the record and compare it against the normal operating pattern for the premises
- indicate any action required following that examination

* sign off/endorse the record to indicate the above points have been carried out

The refusal record will be kept on the premises for production, on request, to an officer of a Responsible Authority. Records shall be retained on the premises for a minimum of 2 years.

On this basis, please accept this notice as formal notification to withdraw my representation to the above premises licence application. Furthermore, I confirm that I do not consider a hearing to be necessary.

Signed.......... Name in block *George Lee*

Date..... *15/08/10*