

## REPORT TO LICENSING & APPEALS SUB-COMMITTEE

Agenda Item 3

Hearing Date: 3<sup>rd</sup> March 2014

Contact Officer: Emma McHugh – 01283 595716

### DETERMINATION OF AN APPLICATION FOR GRANT OF A PREMISES LICENCE

<b>Applicant's Name</b>	Midlands Co-operative Society Limited
<b>Premises Name</b>	Midlands Co-operative Society Limited
<b>Address</b>	4 Repton Road, Willington, Derbyshire, DE65 6BX

#### 1. PURPOSE

To determine an application for the grant of a premise licence received by this Authority on the 16<sup>th</sup> January 2014 from Midlands Co-operative Society Limited. A copy of the application is attached as **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 for consumption off the premises	Monday to Sunday	06.00 – 24.00
Hours premises to remain open to members of the public	Monday to Sunday	06.00 – 24.00

3.2 The steps the applicant intends to take to promote all four licensing objectives can be seen at page 11 and 12 of the application form.

#### 4. CONSULTATION RESPONSES

Trading Standards

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

Derbyshire Constabulary

Representation received during the 28 day consultation period. Full details can be found in **Appendix 3**.

No other representations have been received.

## **5. AGREEMENT BETWEEN PARTIES**

- 5.1 The applicant has agreed to have the conditions requested by Trading Standards (**Appendix 4**) and Derbyshire Constabulary (**Appendix 5**) added to their licence.
- 5.2 All parties have agreed to dispense with the need to hold a hearing.

## **6. DETERMINATION**

- 6.1 The Licensing Act's scheme of delegation does not permit Officers to determine an application that has received a representation, even when all parties agree to dispense with the need to hold a hearing. 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, appendix 3 and 4 to this report, 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. Trading Standards representation.
3. Derbyshire Constabulary representation.
4. Trading Standards agreed conditions to be added to the operating schedule.
5. Derbyshire Constabulary agreed conditions to be added to the operating schedule.

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

South Derbyshire District Council  
Civic Offices  
Civic Way  
Swadlincote  
Derbyshire  
DE11 0AH

310

**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.

**XWe** Midlands Co-operative Society Limited  
(Insert name(s) of applicant)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and **Xwe** 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 Midlands Co-operative Society Limited 4 Repton Road Willington	
Post town Derbyshire	Post code DE65 6BX
Telephone number at premises (if any)	
Non-domestic rateable value of premises	£ 12,000.00

**Part 2 - Applicant Details**

Please state whether you are applying for a premises licence as

Please tick as appropriate

- |   |                                     |                             |
|---|-------------------------------------|-----------------------------|
| a) an individual or individuals*                  | <input type="checkbox"/>            | please complete section (A) |
| b) a person other than an individual*             |                                     |                             |
| i as a limited company                            | <input checked="" 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 (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:

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	
I am 18 years old or over			<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address				
Post town			Post code	
Daytime contact telephone number				
E-mail address (optional)				

**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	
I am 18 years old or over		<input type="checkbox"/>		Please tick yes
Current postal address if different from premises address				
Post town			Post code	
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 Midlands Co-Operative Society Limited
Address Central House Hermes Road Lichfield Staffordshire WS13 6RH
Registered number (where applicable) 10143R
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company
Telephone number (if any) 01543 414140
E-mail address (optional)

### Part 3 - Operating Schedule

When do you want the premises licence to start?

DD		MM		YYYY			
1	4	0	2	2	0	1	4

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

DD		MM		YYYY			

If 5,000 or more people are expected to 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)

The premises will operate as a convenience store selling alcohol for consumption off the premises.

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 any that apply

**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) 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)			Will the performance of a play take place indoors or outdoors or both - please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>	
Day	Start	Finish		Outdoors	<input type="checkbox"/>	
Mon			Please give further details here (please read guidance note 3)	Both	<input type="checkbox"/>	
Tue						
Wed				State any seasonal variations for performing plays (please read guidance note 4)		
Thur						
Fri						
Sat				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)		
Sun						

## B

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

**C**

<b>Indoor sporting events</b> 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			
Thur			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)
Fri			
Sat			
Sun			

**D**

<b>Boxing or wrestling entertainments</b> 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	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)	
Tue				
Wed			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)	
Thur				
Fri				
Sat			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)	
Sun				



**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of live music take place indoors or outdoors or both - please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>	
Day	Start	Finish		Outdoors	<input type="checkbox"/>	
Mon			<b>Please give further details here</b> (please read guidance note 3)	Both	<input type="checkbox"/>	
Tue						
Wed				<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)		
Thur						
Fri				<b>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</b> (please read guidance note 5)		
Sat						
Sun						

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b>Will the playing of recorded music take place indoors or outdoors or both - please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>	
Day	Start	Finish		Outdoors	<input type="checkbox"/>	
Mon			<b>Please give further details here</b> (please read guidance note 3)	Both	<input type="checkbox"/>	
Tue						
Wed				<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 4)		
Thur						
Fri				<b>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</b> (please read guidance note 5)		
Sat						
Sun						

## G

<b>Performances of dance</b> 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		
Mon			<u>Please give further details here</u> (please read guidance note 3)	
Tue				
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)	
Thur				
Fri			<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)	
Sat				
Sun				

## H

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

I

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			<b>Will the provision of late night refreshment take place indoors or outdoors or both - please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day				Start	Finish
Mon					
Tue			<b>Please give further details here</b> (please read guidance note 3)		
Wed					
Thur			<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 4)		
Fri					
Sat			<b>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</b> (please read guidance note 5)		
Sun					

J

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 8)			<b>Will the supply of alcohol be for consumption - please tick</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
Day				Start	Finish
Mon				06:00	24:00
Tue			<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Wed					
Thur			<b>Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Fri					
Sat					
Sun					

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

Name Matthew George Garton	
Address	
Post code	
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 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)
Day	Start	Finish	
Mon	06:00	24:00	<u>Non standard timings. Where you intend the premises to be open to the public at different times to those listed in the column on the left, please list</u> (please read guidance note 5)
Tue	06:00	24:00	
Wed	06:00	24:00	
Thur	06:00	24:00	
Fri	06:00	24:00	
Sat	06:00	24:00	
Sun	06:00	24:00	

**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)

The Applicants operate over 160 licensed sites and carry out all appropriate training to ensure that, as far as is possible, no problems are caused by the granting of a Licence.

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

The Midlands Co-operative Society Limited operates approximately 160 stores with licensed facilities and they have a good record in their relationship with the Police and other enforcement agencies.

For managerial purposes, as well as this objective, the premises are covered by CCTV.

**c) Public safety**

All appropriate steps are taken to ensure public safety and risk assessments are carried out to approved statutory authority standard.

**d) The prevention of public nuisance**

It is not envisaged that there will be any public nuisance arising from the operation of the premises. However, if any issues are raised during the operation of the premises, then the premises licence holder would work with all appropriate authorities to resolve any such issues.

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

The Midlands Co-operative Society Limited incorporates in all its stores the Challenge 25 procedure. All staff are trained in all aspects of safety and with particular reference to avoiding any form of underage sales.

**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	
Date	15th January 2014
Capacity	

**For joint applications, signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent (please read guidance note 12). If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	
Capacity	
<p><b>Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)</b></p> <p>.....</p> <p>.....</p>	
Post town	Post code
Telephone number (if any)	Direct Dial :
<p>If you would prefer us to correspond with you by e-mail, your e-mail address (optional)</p>	

## Notes for Guidance

1. Describe the premises, for example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies, you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.



**Licensing Act 2003 - Premises Licence (Alcohol)  
Conditions recommended by Derbyshire Trading Standards.**

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.

**McHugh Emma**

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**From:** Lomas, Mark, 2864 <[REDACTED]>  
**Sent:** 31 January 2014 15:28  
**To:** Licensing Mailbox  
**Cc:** 'Rayner, Elaine'  
**Subject:** FW: Co-op, Willington  
**Attachments:** Willington Police Conditions.doc

**Importance:** High

Dear Licensing,

on behalf of Derbyshire Constabulary, with the attached offered agreed conditions imposed upon the premises licence then I have No Objections with regards to the premises licence application, received in this office 17/01/14, for Midlands Co-op situated at 4 Repton Road, Willington, Derbyshire.

Regards

Mark Lomas  
Ps 2864  
Licensing Sergeant 'D' Division

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**From:** Rayner, Elaine [mailto:[REDACTED]]  
**Sent:** 31 January 2014 11:53  
**To:** Lomas, Mark, 2864  
**Cc:** Dunn, Mark, 2013  
**Subject:** Co-op, Willington  
**Importance:** High

Dear Mark

I refer to my telephone conversation with your colleague, Mark Dunn, earlier today.

Midlands Co-op had already agreed conditions raised by Clair Dathan, Trading Standards Officer, when your representation came through.

Some of the conditions already agreed are very similar to the ones you are asking for agreement to. I have therefore "tweaked" one or two of them so that they are in line with what already has been agreed, but also fitting in with your requirements.

I have attached the proposed conditions to be agreed to and should be grateful if you would confirm you are happy with the amendments.

I confirm that Midlands Co-op are happy to agree to these conditions, so if you find these acceptable, I should be grateful if you would confirm you have no further representations to make against the application to both ourselves and to the Licensing Officer at the Council.

I look forward to hearing from you, at your earliest convenience.

(PS. I did mention to Mark Lomas that there was a problem with getting through to your team on the number quoted on your e-mail 0300 122 5412)

Many thanks for your assistance in respect of this matter.

Elaine

**McHugh Emma**

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**From:** Dathan, Clair (Cultural & Community Services) [REDACTED]  
**Sent:** 29 January 2014 15:31  
**To:** Licensing Mailbox  
**Cc:** [REDACTED]  
**Subject:** Licensing Act: Application for Premises Licence Midlands Co-Op, 4 Repton Road, Willington

**Categories:** Completed, Emma

Further to submitting my objection on 27 January, I have now had a discussion with the Solicitor for the applicant. I consider that the following conditions will be sufficient to uphold the licensing objectives. If the applicant is willing to accept these conditions on their licence (should the licensing authority be minded to grant the application), I will agree to dispense with the need to hold a hearing.

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, passport or military ID. 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.

Regards,

Clair Dathan  
 Principal Trading Standards Officer

Derbyshire County Council  
 Health and Communities

Trading Standards Division  
Chatsworth Hall  
Chesterfield Road  
Matlock  
DE4 3FW

Tel 01629 539848  
Internal Extension 39848  
Fax 01629 536197  
E Mail [elaine.rayner@chatsworthhall.co.uk](mailto:elaine.rayner@chatsworthhall.co.uk)  
[www.derbyshire.gov.uk/tradingstandards](http://www.derbyshire.gov.uk/tradingstandards)



**From:** Rayner, Elaine [mailto:[Elaine.Rayner@chatsworthhall.co.uk](mailto:Elaine.Rayner@chatsworthhall.co.uk)]  
**Sent:** 29 January 2014 11:05  
**To:** Dathan, Clair (Cultural & Community Services)  
**Subject:** RE: Licensing Act: Application for Premises Licence Midlands Co-Op, 4 Repton Road, Willington

Clair

I have now received my client's further instructions and confirm that, following the addition of Military ID at paragraph 2, they are happy to agree the conditions you have requested.

I should be grateful if you would confirm the position with the Licensing Officer at the Council and confirm that you have no further representations to make against the application.

Many thanks for your assistance in respect of this matter.

Elaine

**Elaine Rayner**  
Licensing Team Leader

**SHOOSMITHS LLP**

03700 86 3086 UK direct dial  
03700 86 3001 UK fax

**From:** Dathan, Clair (Cultural & Community Services) [mailto:[Clair.Dathan@derbyshire.gov.uk](mailto:Clair.Dathan@derbyshire.gov.uk)]  
**Sent:** 29 January 2014 11:05  
**To:** Rayner, Elaine [mailto:[Elaine.Rayner@chatsworthhall.co.uk](mailto:Elaine.Rayner@chatsworthhall.co.uk)]  
**Subject:** RE: Licensing Act: Application for Premises Licence Midlands Co-Op, 4 Repton Road, Willington

**Offered Conditions – Midlands Co-operative Society Ltd, 4  
Repton Road, Willington, Derbyshire, DE65 6BX**

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 6 months.

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

4) 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, passport or Military ID card. 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;
- All points of sale.

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

6) 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 that the above points have been carried out.

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

8) An incident log shall be kept on the premises for production upon request of a Police Officer or authorised person as detailed within Section 13 of the Licensing Act 2003.

9) The records relating to the incident log shall be retained on the premises for a minimum of 12 months.

- 10) A CCTV system will be installed and the recording system must be maintained in good working order and any faults repaired as soon as possible. (It is recommended that all maintenance paperwork be kept to show that the retailer has shown all due diligence in maintaining the system).
- 11) The CCTV recording system must be operating at all times when the premises are open for licensable activities.
- 12) All CCTV recordings must be retained for a minimum of 28 days. A Police Officer or authorised person as detailed within Section 13 of the Licensing Act 2003 can view the recording at any reasonable time and obtain a copy if required.
- 13) The premises holder, DPS and designated members of staff must be able to retrieve and copy any recording/images at the time of asking or within 48 hours if so required. (The police will not meet the cost for a recording or materials used for a reproduction of the image in respect of any crime and disorder; all costs are to be met by the owner of the system. If the incident was unrelated to the premises, the retrieval, if a cost incurred, would be met between the agencies requiring the image).
- 14) The CCTV will cover all areas to which the public have access.
- 15) All digital recordings to be made in real time and fit for purpose, time lapse not to be used.
- 16) Alcoholic Spirits will be located behind the counter.