

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 TD CLUSTER LTD

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 382-386 HIGH STREET ROCHESTER Kent ME1 1DJ			
Post town	ROCHESTER	Postcode	ME1 1DJ
Telephone number at premises (if any)			
Non-domestic rateable value of premises		£ 10250	

Part 2 - Applicant details

- | | |
|--|--|
| <p>Please state whether you are applying for a premises licence as</p> <p>a) an individual or individuals *</p> <p>b) a person other than an individual *</p> <p style="padding-left: 20px;">i as a limited company/limited liability partnership</p> <p style="padding-left: 20px;">ii as a partnership (other than limited liability)</p> <p style="padding-left: 20px;">iii as an unincorporated association or</p> <p style="padding-left: 20px;">iv other (for example a statutory corporation)</p> <p>c) a recognised club</p> <p>d) a charity</p> | <p>Please tick as appropriate</p> <p>please complete section (A)</p> <p>please complete section (B) X</p> <p>please complete section (B)</p> <p>please complete section (B)</p> <p>please complete section (B)</p> <p>please complete section (B)</p> <p>please complete section (B)</p> |
|--|--|

- | | | |
|-----|---|-----------------------------|
| 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 (by ticking yes to one box below):

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or

I am making the application pursuant to a
 statutory function or a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

		Other Title (for example, Rev)	
Surname		First names	
Date of birth		I am 18 years old or over	
Nationality			
Current residential 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)

		Other Title (for example, Rev)	
Surname		First names	
Date of birth		I am 18 years old or over	
Nationality			
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)			
Current residential 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 TD CLUSTER LTD
Address 183 STATION ROAD GILLINGHAM Kent ME8 7SQ
Registered number (where applicable) 15440525

Description of applicant (for example, partnership, company, unincorporated association etc.)

Limited company

Telephone number (if any)

E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

20/09/2024

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

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

GENERAL CONVENIENCE STORE SELLING A WIDE RANGE OF GOODS

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 and Schedules 1 and 2 to the Licensing Act 2003)

Please
tick all

Provision of regulated entertainment (please read guidance note 2)

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)

anything of a similar description to that falling within (e), (f) or (g) h
 (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)

X

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 7)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 5)		
Thur					
Fri			Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list (please read guidance note 6)		
Sat					
Sun					

B

Films Standard days and timings	Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	

(please read guidance note 7)			Outdoors	
Day	Start	Finish	Both	
Mon			<u>Please give further details here</u> (please read guidance note 4)	
Tue				
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)	
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 6)	
Sat				
Sun				

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)	
Day	Start	Finish		
Mon				
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)	
Wed				

Thur			<p><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 6)</p>
Fri			
Sat			
Sun			

D

<p>Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)</p>			<p><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)</p>	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			<p><u>Please give further details here</u> (please read guidance note 4)</p>		
Tue					
Wed			<p><u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)</p>		
Thur					
Fri			<p><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 6)</p>		
Sat					

Sun		

E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
Both					
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
Wed					
<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)			<u>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</u> (please read guidance note 6)		
Fri					
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
Both					
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					

Tue			
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 5)
Thur			
Fri			
Sat			Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list (please read guidance note 6)
Sun			

G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed					
Thur			State any seasonal variations for the performance of dance (please read guidance note 5)		
Fri					

Sat			<p><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 6)</p>
Sun			

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)</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 3)</p>	Indoors	
Mon				Outdoors	
				Both	
Tue			<p><u>Please give further details here</u> (please read guidance note 4)</p>		
Wed					
Thur					
Fri			<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 5)</p>		
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 6)</p>		
Sun					

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I

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here (please read guidance note 4)</u>		
Mon					
Tue					
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
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 6)		
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 7)			<u>Will the supply of alcohol be for consumption – please tick</u> (please read guidance note 8)	On the premises	
				Off the premises	X
Day	Start	Finish		Both	

Mon	08:00	23:00	State any seasonal variations for the supply of alcohol (please read guidance note 5)
Tue	08:00	23:00	
Wed	08:00	23:00	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 6) UNTIL 00:00 HOURS ON BANK HOLIDAYS, CHRISTMAS EVE AND NEW YEARS EVE
Thur	08:00	23:00	
Fri	08:00	23:00	
Sat	08:00	23:00	
Sun	08:00	23:00	

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

Name Mr. PRASATH RATNAM	
Date of birth	
Address	
Postcode	
Personal licence number (if known)	
Issuing licensing authority (if known)	

K

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 9).

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)	
Day	Start	Finish		
Mon	07:00	23:00		
Tue	07:00	23:00		
Wed	07:00	23:00		
Thur	07:00	23:00		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 6) UNTIL 00:00 HOURS ON BANK HOLIDAYS, CHRISTMAS EVE AND NEW YEARS EVE
Fri	07:00	23:00		
Sat	07:00	23:00		
Sun	07:00	23:00		

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 10)

SEE ATTACHED

b) The prevention of crime and disorder

SEE ATTACHED

c) Public safety

SEE ATTACHED

d) The prevention of public nuisance

SEE ATTACHED

e) The protection of children from harm

SEE ATTACHED

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 11)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 12). **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 cease to be entitled to live and work in the UK (please read guidance note 15).● The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)
Signature	IAN RUSHTON
Date	2024-08-22
Capacity	AGENT

For joint applications, signature of 2 nd nd
applicant or 2 applicant’s solicitor or other authorised agent
(please read guidance note 13). **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 14)

Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) ijrushy@hotmail.com			

Application for a new premises licence

New convenience store (shop name tbc)

382-386 High Street, Rochester ME1 1DJ

Operating schedule/proposed licence conditions

This is a new business venture and the shop, currently empty, will be refurbished with a big investment as a new general convenience store. The new shop will sell a wide range of goods and the proposed alcohol sales would just be a part of the overall business.

The applicant has a personal licence and plenty of retail experience. He is aware that the shop is located in an identified 'stress area' and detailed and robust operating schedule is proposed to promote the licensing objectives.

Prevention of crime and disorder

A CCTV camera system capable of providing good quality images in all lighting conditions shall be used. Images will be retained for a period of at least 28 days and be made available as soon as practicable to the Police and other responsible authorities upon reasonable written request for evidential purposes, in accordance with data protection legislation

The CCTV recording equipment shall be kept in a secure environment under the control of the premises licence holder (PLH) and/or another named responsible individual.

All staff selling alcohol will be authorised to sell alcohol in writing and a record of the authorisation will be made available for inspection.

All authorised staff (selling alcohol) will be trained on relevant matters such as the prevention of underage sales, proxy sales and not selling alcohol to drunk person. Training will be carried out every 12 months and records will be made available for inspection by responsible authorities

The DPS and other staff will be vigilant and monitor the area immediately outside the shop to check that youths are not causing annoyance by congregating.

Spirits will be kept behind the counter

Any incidents of crime and disorder at or immediately outside the premises, witnessed by staff, will be recorded in an incident book kept at the shop. This book will be made available for inspection by the Police and the other responsible authorities.

The shop shall not sell any beers, lagers and ciders above 6.5% ABV other than genuine artisan or real ale drinks.

There shall be no single can sales of beer, lager or cider

The shop shall operate an alcohol refusals policy as follows - alcohol will not be sold to;

(1) Any person recognised or identified as a street drinker (regardless of their level of inebriation at the time);

- (2) Any person found to be drinking alcohol in the street;
- (3) Any person who is drunk or appears to be drunk;
- (4) Any person suspected of trying to buy alcohol for another person who is drunk or appears to be drunk;
- (5) Any person unable to provide valid ID when requested by staff;
- (6) Any person who is verbally or physically abusive towards staff or customers.
- (7) To any person suspected of trying to buy alcohol for another person(s) who may be under age.

A notice advising customers of the refusals policy shall be on display.

Public safety

No specific risks have been identified under The Licensing Act 2003 (note – the applicant is aware of the need to comply with other legislative requirements to ensure that the shop is safe for customers and staff).

Prevention of public nuisance

A notice will be displayed asking customers to leave the shop quietly and not to drop any litter on the floor.

Staff will monitor the area immediately outside the shop on a regular basis to check for, and to dispose of, any litter.

Protection of children from harm

Challenge 25 shall be used and signage shall be on display.

Alcohol will only be sold to people who can satisfy or prove to the seller that they are 18 years old or over. The only acceptable form of ID will be a passport, photo driving licence, a PASS accredited proof of age card, or other form of photo ID as recommended by Trading Standards.

A refusals register (for the sale of alcohol) to log alcohol refusals will be used and be made available for inspection by responsible authorities.

A notice shall be displayed in the premises where they can be seen clearly to advise customers that it is unlawful for persons under 18 to purchase alcohol or for any persons to purchase alcohol on behalf of a person under 18 years of age.

NOTE TO RESPONSIBLE AUTHORITIES AND INTERESTED PARTIES

IF YOU HAVE ANY QUERIES OR COMMENTS ON THESE PROPOSALS, PLEASE CONTACT IAN RUSHTON [REDACTED] TO DISCUSS FURTHER - PRIOR TO MAKING ANY REPRESENTATIONS.

AUGUST 24

382-386 HIGH STREET

ROCHESTER ME1 1D5

101

- S- SHELVING
- C- COOLER
- F- FREEZER
- ⊗ - FIRE EXTINGUISHER
- LICENCE AREA

