

- 2) The Provision of Regulated Entertainment by way of Live Music (indoors only) between the following hours:

Thursday to Sunday 19:00 to 21:30

Non Standard Timings

Christmas Eve 19:00 – 22:30

New Years Eve 19:00 – 00:00 (midnight)

- 3) The Provision of Regulated Entertainment by way of Recorded Music (indoors only) between the following hours:

Monday to Saturday 12:00 – 15:00

17:00 – 23:00

Sunday 12:00 – 17:00

Non Standard Timings

Christmas Eve 12:00 – 15:00

17:00 – 22:30

New Year's Eve 12:00 – 15:00

17:00 – 00:00 (midnight)

- 4) The provision of Late Night Refreshment between the following hours:

Monday to Saturday 23:00 – 00:00 (midnight)

Sunday 23:00 – 23:30

- 5) The proposed opening hours are:

Monday to Saturday 11.00 to 00:00 (midnight)

Sunday 12.00 to 23:30

4.3 A site plan is attached at **Annex B**.

4.4 The Licensing Act 2003 (Section 4) states that it is the duty of all Licensing Authorities to carry out their functions under the Act with a view to promoting the licensing objectives. The licensing objectives are:-

- a) The Prevention of Crime and Disorder.
- b) Public Safety.
- c) The Prevention of Public Nuisance, and
- d) The Protection of Children from Harm.

Each objective is of equal importance; there are no other licensing objectives so these four are of paramount consideration at all times. When considering applications/representations/notifications the Licensing Authority will have regard to these licensing objectives.

- 4.5 The Licensing Authority may grant the application with or without additional conditions.
- 4.6 The Licensing Authority should also have regard to the Council's Licensing Policy, the Statutory Guidance issued under Section 182 of the Licensing Act 2003, and the Licensing Act itself, and in particular to:-
- a) Paragraphs 3, 5, 6, 9, 10, 15-20, 23, 24, 28, 33-37, 41 to 44 of the policy.
 - b) Chapters 8, 9 and 10 of the Statutory Guidance (as revised March 2010).
 - c) Sections 4, 9, 10, 11, 12, 13, 16, 17, 18, 23, 182, 183, and Schedule 2 of the Act.
- 4.7 If the application is refused the applicant may appeal within 21 days of the notification to the Magistrates Court. If the application is granted the person making the relevant representation may appeal within 21 days of the notification to the Magistrates Court.

On appeal the court may either dismiss the appeal; substitute the decision appealed against for any other decision which could have been made by the Licensing Authority, or remit the case to the Licensing Authority to dispose of it in accordance with the direction of the court. The court may make such order for costs as it thinks fit.

- 4.8 In accordance with the requirements of the Act the applicants served copies of the application upon the police, the fire authority, environmental health, development control, trading standards, and the child protection agency.
- 4.9 The applicant is required to place a notice at the premises for a period of 28 days starting the day after the application is made and place an advert in a local newspaper within 10 days of submitting the application to the licensing authority.
- 4.10 A representation has been received from the Police in relation to the "Prevention of Crime & Disorder" licensing objective (**Annex C**). The representation proposes the following conditions be attached to the premises licence:
- 1. A CCTV system will be installed and maintained at the premises in consultation with the Police. The images will be of evidential standard and recordings will be kept for 31 days and made available to the Police on reasonable request.**
 - 2. Alcohol will be served by waiter/waitress service to persons who are sat at tables, except to persons who are in the area awaiting a table.**
 - 3. All staff will be trained in the sale of alcohol, with records kept of such training and made available for inspection to the Police and Licensing Authority.**
- 4.11 The premises licence holder has agreed to the proposed conditions (**Annex D**).
- 4.12 This report has not been sent to the Trades Union because they would have no involvement.

Contact person	Terrill Wolyn, Senior Licensing Officer, 01225 396939
Background papers	Licensing Act 2003, Guidance Notes issued under section 182 of the Licensing Act 2003, Licensing Act 2003 Regulations, B&NES Statement of Licensing Policy.

11/01809

ANNEX A

ENVIRONMENTAL SERVICES
30 MAR 2011
Post Log No. 07/115 218183
Receipt No. 14455
CH/CA £ 315

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 THE IRISH ITALIAN 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 44 TEMPLE STREET KEYNSHAM	
Post town <u>BRISTOL</u>	Post code <u>BS31 1EH</u>

Telephone number at premises (if any)	<u>0117 9866 330</u>
Non-domestic rateable value of premises	£ <u>NOT KNOWN</u>

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as
Please tick yes

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
 - i. as a limited company please complete section (B)
 - ii. as a partnership please complete section (B)
 - iii. as an unincorporated association or please complete section (B)
 - iv. other (for example a statutory corporation) please complete section (B)
- c) a recognised club please complete section (B)
- d) a charity please complete section (B)

- e) the proprietor of an educational establishment please complete section (B)
- f) a health service body please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England please complete section (B)
- h) the chief officer of police of a police force in England and Wales please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a
 - statutory function or
 - a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over					<input type="checkbox"/> Please tick yes
Current postal address if different from premises address		NOT APPLICABLE			
Post Town				Postcode	
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		NOT APPLICABLE	
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	THE IRISH ITALIAN LTD
Address	UNIT 1 OFFICE 1 TOWER LANE BUSINESS PARK TOWER LANE WARMLEY BRISTOL BS30 8XT
Registered number (where applicable)	07468819
Description of applicant (for example, partnership, company, unincorporated association etc.)	COMPANY
Telephone number (if any)	07971269237
E-mail address (optional)	barry@farrellsrestaurant.co.uk

Part 3 Operating Schedule

When do you want the premises licence to start?

Day	Month	Year
01	05	2011

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

Day	Month	Year

Please give a general description of the premises (please read guidance note1)

OPEN PLAN RESTAURANT AT STREET LEVEL WITH ALL FUNCTIONS ON ONE LEVEL. THE PREMISES HAVE BEEN PURPOSE BUILT FOR USE AS A RESTAURANT.

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

N/A

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick yes

- | | |
|---|-------------------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input checked="" type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input checked="" type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/> |

Provision of entertainment facilities:

- | | |
|---|--------------------------|
| i) making music (if ticking yes, fill in box I) | <input type="checkbox"/> |
| j) dancing (if ticking yes, fill in box J) | <input type="checkbox"/> |
| k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K) | <input type="checkbox"/> |

Provision of late night refreshment (if ticking yes, fill in box L)

Supply of alcohol (if ticking yes, fill in box M)

In all cases complete boxes N, O and P

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 checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
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 5)		
Sat					
Sun					

NOT APPLICABLE

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)	Both	<input type="checkbox"/>
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					

NOT APPLICABLE

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4) NOT APPLICABLE
Wed			
Thur			<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sat					
Sun					

NOT APPLICABLE

E

Live music Standard days and timings (please read guidance note 6)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 3) GUITAR, KEYBOARDS AND LIGHT IRISH TRADITIONAL MUSIC. AMPLIFIED TO SMALL DEGREE ONLY.		
Tue					
Wed			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 4)		
Thur	19-00	21-30			
Fri	19-00	21-30	<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 5) CHRISTMAS EVE 19-00 - 22-30 NEW YEARS EVE 19-00 - 24-00		
Sat	19-00	21-30			
Sun	19-00	21-30			

F

Recorded music Standard days and timings (please read guidance note 6)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	12-00	15-00	<u>Please give further details here</u> (please read guidance note 3) BACKGROUND RECORDED MUSIC AMPLIFIED TO SMALL DEGREE ONLY	Both	<input type="checkbox"/>
	17-00	23-00			
Tue	12-00	15-00			
	17-00	23-00			
Wed	12-00	15-00	<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)		
	17-00	23-00			
Thur	12-00	15-00			
	17-00	23-00			
Fri	12-00	15-00	<u>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</u> (please read guidance note 5) CHRISTMAS EVE 12-00-15-00 17-00-22-30 NEW YEARS EVE 12-00-15-00 17-00-24-00		
	17-00	23-00			
Sat	12-00	15-00			
	17-00	23-00			
Sun	12-00	17-00			

G

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

NOT APPLICABLE

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><u>Please give a description of the type of entertainment you will be providing</u></p>		
Day	Start	Finish	<p><u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><u>Please give further details here</u> (please read guidance note 3)</p>		
Wed			<p>NOT APPLICABLE</p>		
Thur			<p><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)</p>		
Fri					
Sat			<p><u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 5)</p>		
Sun					

I

Provision of facilities for making music Standard days and timings (please read guidance note 6)			<u>Please give a description of the facilities for making music you will be providing</u>	
			<u>Will the facilities for making music be indoors or outdoors or both – please tick</u> (please read guidance note 2)	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3) NOT APPLICABLE	
Mon				
Tue			<u>State any seasonal variations for the provision of facilities for making music</u> (please read guidance note 4)	
Wed				
Thur			<u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u> (please read guidance note 5)	
Fri				
Sat				
Sun				

J

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick (see guidance note 2)	Indoors <input checked="" type="checkbox"/>
				Outdoors <input type="checkbox"/>
				Both <input type="checkbox"/>
Day	Start	Finish	Please give a description of the facilities for dancing you will be providing	
Mon			Please give further details here (please read guidance note 3) NOT APPLICABLE	
Tue				
Wed			State any seasonal variations for providing dancing facilities (please read guidance note 4)	
Thur				
Fri			Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)	
Sat				
Sun				

K

Provision of facilities for entertainment of a similar description to that falling within i or j Standard days and timings (please read guidance note 6)			<u>Please give a description of the type of entertainment facility you will be providing</u>	
Day	Start	Finish	<u>Will the entertainment facility be 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			NOT APPLICABLE	
Thur			<u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u> (please read guidance note 4)	
Fri				
Sat			<u>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within i or j at different times to those listed in the column on the left, please list</u> (please read guidance note 5)	
Sun				

L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	23-00	24-00	Please give further details here (please read guidance note 3) SALE OF FOOD FOR CONSUMPTION ON THE PREMISES	Both	<input type="checkbox"/>
Tue	23-00	24-00			
Wed	23-00	24-00	State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Thur	23-00	24-00			
Fri	23-00	24-00	Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list (please read guidance note 5)		
Sat	23-00	24-00			
Sun	23-00	23-30			

M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises	<input checked="" type="checkbox"/>			
				Off the premises	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)					
Mon	11-00	24-00						
Tue	11-00	24-00						
Wed	11-00	24-00						
Thur	11-00	24-00				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	11-00	24-00						
Sat	11-00	24-00						
Sun	12-00	23-30						

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

Name	BARRY FARNELL
Address	96 MAIN ROAD CLEEVE BRISTOL
Postcode	BS49 4PN
Personal Licence number (if known)	NSC/19103
Issuing licensing authority (if known)	NORTH SOMERSET COUNCIL

N

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)

NOT
APPLICABLE

O

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	11-00	24-00	<p>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)</p>
Tue	11-00	24-00	
Wed	11-00	24-00	
Thur	11-00	24-00	
Fri	11-00	24-00	
Sat	11-00	24-00	
Sun	12-00	23-30	

P Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)

A PROFESSIONAL HEALTH & SAFETY COMPANY HAS BEEN EMPLOYED TO ADVISE ON ALL SUCH MATTERS. CCTV IS TO BE INSTALLED BOTH INSIDE AND OUTSIDE THE PREMISES. ALL STAFF WILL BE FULLY TRAINED IN ALL MATTERS RELATING TO THE WELL BEING OF OUR CUSTOMERS

b) The prevention of crime and disorder

BY THE INSTALLATION OF CCTV INSIDE AND OUTSIDE THE PREMISES.

c) Public safety

EMERGENCY EXITS WILL BE CLEARLY INDICATED AND STAFF WILL BE TRAINED TO ENSURE THAT EXIT ROUTES ARE KEPT CLEAR AT ALL TIMES.

d) The prevention of public nuisance

MUSIC WILL BE KEPT AT A LEVEL SO AS NOT TO INVADE ON THE PRIVACY OF NEIGHBOURING OCCUPANTS BUT IT SHOULD BE NOTED THAT THERE ARE NO RESIDENTIAL PREMISES ADJACENT TO THE RESTAURANT. CCTV WILL BE MONITORED AT ALL TIMES.

e) The protection of children from harm

CHILDREN ARE UNLIKELY TO BE ON THE PREMISES UNLESS IN THE COMPANY OF ADULTS. STAFF WILL BE TRAINED TO ENSURE THAT NO INTOXICATING LIQUOR IS SUPPLIED TO UNDER AGE CHILDREN


Please tick yes

- 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 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 CONVICTION TO A FINE UP TO 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	29/3/11
Capacity	MANAGING 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)

BARRY FARRELL
96 MAIN ROAD
CLEVE

Post town	BRISTOL	Post code	BS49 4PN
Telephone number (if any)	07971269237		
If you would prefer us to correspond with you by e-mail your e-mail address (optional)			

Consent of individual to being specified as premises supervisor

BARRY ANTHONY FARRELL

[full name of prospective premises supervisor]

of

MYRTLE COTTAGE
96 MAIN ROAD
CLEEVE
NORTH SOMERSET
BS49 4PN

[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

PREMISES LICENCE

[type of application]

by

THE IRISH ITALIAN LIMITED

[name of applicant]

relating to a premises licence

N/A

[number of existing licence, if any]

for

FARRELLS RESTAURANT
44 TEMPLE STREET
KEYNSHAM
BRISTOL
BS31 1EH

[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

THE IRISH ITALIAN LIMITED

[name of applicant]

concerning the supply of alcohol at

FARRELLS RESTAURANT
44 TEMPLE STREET
KEYNSHAM
BRISTOL
BS31 1EH

[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

NSC/19103

[insert personal licence number, if any]

Personal licence issuing authority

NORTH SOMERSET COUNCIL
PO BOX 143
SOMERSET HOUSE
OXFORD STREET
WESTON S MARE
BS23 1TG
01934 888888

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

Signed



Name (please print)

BARRY FARRELL

Date

MARCH
22 ~~APRIL~~ 2011

ANNEX A



Bath & North East Somerset Council

Bath & North East Somerset Council,
 Planning Services,
 Trimbridge House,
 Trim Street,
 Bath BA1 2DP

Farrells Restaurant 44 Temple Street



Scale 1/1250

Date 13/5/2011

Centre = 365475 E 168355 N

Drawn by:

Terrill Wolyn



BATH & NORTH EAST SOMERSET

Licensing Services, 9-10 Bath Street, Bath, BA1 1SN

ENVIRONMENTAL SERVICE

ANNEX C

- 3 MAY 2011

Post Log No: CD/AB/28707

Receipt No: CH/CA £

Representation Form

Responsible Authority. (Please delete as applicable.)

Police / Fire / EP (noise) / Health and Safety / Child Protection / Weights and Measures / Planning Authority / Marine Agency.

Your Name	Martin Purchase
Job Title	Liquor Licensing Officer
Postal and email address	Bath Police Station Manvers St. Bath. BA1 4BX
Contact telephone number	01225842475

Name of the premises you are making a representation about.	Farrells Restaurant
Address of the premises you are making a representation about.	44 Temple Street Keynsham Bristol BS31 1EH

Which of the four licensing objectives does your representation relate to? Please state yes or no.	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 premises is situated at Temple Sreet within the town centre, it is a restaurant premises. The area does experience sporadic crime and disorder and anti social behaviour. The problems are most frequent in the early evenings and are alcohol related. There are also incidents of young persons obtaining alcohol and causing anti social incidents within the area. The operating schedule lacks detail and clarity to further the licensing objectives in respect of this type of application that has been applied for. A number of conditions have been offered and agreed with the applicant to rectify this position,
Public safety		

ANNEX C

To prevent public nuisance		
The prevention of harm to children		
<p>Suggested conditions that could be added to the licence to remedy your representation you would like the Licensing Sub Committee to take into account. Please use separate sheets where necessary and refer to checklist.</p>	<p>1.A CCTV system will be installed and maintained at the premises in consultation with the police. The images will be of evidential standard and recordings will be kept for 31 days and made available to the police on reasonable request.</p> <p>2. Alcohol will be served by waiter/waitress service to persons who are sat at tables, except to persons who are in the area awaiting a table.</p> <p>3.All staff will be trained in the sale of alcohol and records kept of such training and made available for inspection. to the police and Licensing Authority.</p>	

N.B. If you do make a representation you will be expected to attend the Licensing Panel and any subsequent appeal proceeding.

Signed:  **Date:** 3/5/11

Please return this form along with any additional sheets to:

Bath and North East Somerset Council
Licensing Services
9-10 Bath Street
Bath
BA1 1SN

Farrells Restaurant
44 Temple Street,
Keynsham
Bristol
BS31 1EH

ENVIRONMENTAL SERVICES
ANNEX
- 3 MAY 2011
Post Log No: CD/AB28708
Receipt No:
CH/CA £.....

Ref: Premises Licence application

Date 28th May 2011

Dear Sir / Madam,

As you are aware, I am in the process of applying for a premises licence for the above named premises.

Having been in consultation with the Police Licensing department at Bath Police Station, I have decided that I want to amend my application.

As a result I wish to formally agree to the conditions below.

Therefore, can I ask that this letter be submitted with my application for the consideration of the Licensing sub-committee, prior to the licence being, granted.

- 1.A CCTV system will be installed and maintained at the premises in consultation with the police. The images will be of evidential standard and recordings will be kept for 31 days and made available to the police on reasonable request.
2. Alcohol will be served by waiter/waitress service to persons who are sat at tables, except to persons who are in the area awaiting a table.
3. All staff will be trained in the sale of alcohol and records kept of such training and made available for inspection to the Police and Licensing Authority.

Yours truly,



Barry FARRELL for and on behalf of the Licence holder.

