### **Uttlesford District Council**

Uttlesford

**T:** 01799 510412

E: licensingapplications@uttlesford.gov.uk

### **New Premises Licence**

Premises Details		
Premises Address *	ELIZABETH MICHAEL 5A CROSS STREET SAFFRON WALDEN ESSEX CB10 1EX	
Telephone number at premises (if any)	+44 1799 934385	
Non-domestic value of premises. *	£ 6600	
Applicant Details		
I/We 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.		
Please state whether you are applying for a premises licence as:	an individual or individuals	
Applicant Details		
If you are applying as a person described in one of the above please confirm: *	I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or	
Individual Applicant		
Title *	Miss	
First name *	Juliana	
Surname *	Rodrigues	
Street address *	58a High Street	

Individual Applicant	
Town/City *	Huntingdon
County	
Postcode *	PE26 2QE
Date of Birth *	13/07/1984
I am 18 years old or over	
Nationality *	British
Daytime Contact Telephone Number *	07482192375
Email *	juliana@sushiandsalad.com
Operating Schedule	
When do you want the premises licence to start? *  If you wish the licence to be valid only for a limited period, when do you want it to end?	10/02/2023
Please give a general description of the premises. *	Japanese sushi takeaway and restaurant. Food servery, bar and customer seating on the ground floor and basement of the premises with kitchen area on the ground floor. Customer access to the bathroom ground floor is via waiting room. Recorded music is proposed as 'background' music only and is incidental to the use of the premises as a restaurant and takeaway.
If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.	

# **Operating Schedule**

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 read guidance note 2) \*

Operating Schedule		
	Plays	
	Films	
	Indoor Sporting Events	
	Boxing or Wrestling	
	Live Music	
<b>✓</b>	Recorded Music	
	Performances of Dance	
	Anything of a similar description falling under Music or Dance	
	Provision of late night refreshment	
<b>/</b>	Supply of Alcohol	
Daa	anded Music Ctondond Times	
Recorded Music Standard Times		
Standard days and timings, where you intend to use the premises for the performance of recorded music. (please read guidance note 7) * Please enter times in 24hr format (HH:MM)		
Day *		Monday to Thursday
		10:00
		23:00
Reco	orded Music Standard Times	

Recorded Music Standard Times	
Standard days and timings, where you intend to use the premises for the performance of recorded music. (please read guidance note 7) * Please enter times in 24hr format (HH:MM)	
Day *	Friday to Saturday
	10:00
	23:00
Recorded Music Standard Times	
Standard days and timings, where you intend to use the premises for the performance of recorded music. (please read guidance note 7) * Please enter times in 24hr format (HH:MM)	
Day *	Sunday
	10:00
	22:00
Recorded Music	
Will the playing of recorded music take place indoors or outdoors or both? (please read guidance note 3) *	Indoors
Please provide further details.(please read guidance note 4)	Recorded music will be payed as background. Incidental background music
State any seasonal variations for the playing of recorded music. (please read guidance note 5)	N/a
Please state any non-standard timings, where you intend to use the premises for the performance of recorded music at different times from the Standard days and times listed? (please read guidance note 6)	N/a
Supply of Alcohol Standard Times	
Supply of Alcohol Standard Times	
Standard days and timings, where you intend to use the premise Please enter times in 24hr format (HH:MM)	ses for the supply of alcohol. (please read guidance note 7)*
Day *	Monday to Thursday
	10:00

Supply of Alcohol Standard Times		
	23:00	
Supply of Alcohol Standard Times		
Standard days and timings, where you intend to use the premises for the supply of alcohol. (please read guidance note 7)* Please enter times in 24hr format (HH:MM)		
Day *	Friday to Saturday	
	10:00	
	23:00	
Supply of Alcohol Standard Times		
Standard days and timings, where you intend to use the premises for the supply of alcohol. (please read guidance note 7)* Please enter times in 24hr format (HH:MM)		
Day *	Sunday	
	10:00	
	22:00	
Supply of Alcohol		
Will the supply of alcohol be for consumption on premises or off premises or both? (please read guidance note 8) *	Both	
State any seasonal variations for the supply of alcohol. (please read guidance note 5)	N/a	
Please state any non-standard timings, where you intend to use the premises for the supply of alcoholat different times from the Standard days and times listed?(please read guidance note 6)	N/a	

## **Designated Premises Supervisor**

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)

Designated Premises Supervisor	
Title *	Miss
First name *	Juliana
Surname *	Rodrigues
Street address *	58a High Street
	Upwood
Town/City *	Huntingdon
County	
Postcode *	Pe26 2qe
Personal Licence Number (if known)	PER02391
Issuing Licensing Authority (if known)	Huntingdonshire
Adult Entertainment	
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).	N/a
Opening Hours Standard Times	
Standard days and timings, where the premises are open to the 24hr format (HH:MM)	e public. (please read guidance note 7) * Please enter times in
Day *	Monday to Thursday
	12:00
	21:00

Opening Hours Standard Times	
Standard days and timings, where the premises are open to the public. (please read guidance note 7) * Please enter times in 24hr format (HH:MM)	
Day *	Friday to Saturday
	12:00
	22:00
Opening Hours Standard Times	
Standard days and timings, where the premises are open to the public. (please read guidance note 7) * Please enter times in 24hr format (HH:MM)	
Day *	Sunday
	12:00
	17:00
Opening Hours	
	[
State any seasonal variations. (please read guidance note 5)	N/a
Please state any Non-standard timings, where you intend the premises to be open to the public at different times from the Standard days and times listed? (please read guidance note 6)	N/a
Licensing Objectives	
Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:	
a) General - all four licensing objectives (b, c, d and e) (please read guidance note 10)	A video/CCTV system displaying the correct time and date of the recording shall be in operation at all times to cover internal and external areas at all times. Records to kept for minimum 28 days. The summary of the license certificate will be displayed in a prominent position. All staff engaged on a sale of alcohol to receive full training and records kept.
b) The prevention of crime and disorder	The display of the CCTV in operation sign Zero tolerance drug policy implemented staff trained and recorded kept.

### **Licensing Objectives**

under the influence of alcohol and or drugs. Security lighting.

c) Public safety

Weights and measures act 1985 poster to be displayed at all times (125ml wine, 25ml spirit) Zero tolerance drug policy to be implemented training given to staff and records maintained. All external areas to be lit.

Staff will be trained to refusal sale of alcohol to an individual

d) The prevention of public nuisance

Recorded music to be limited to internal background music only. Noise/vibration will not emanate from the premises. The placing empty bottles outside will not take place during the nighttime hours between 20:00 and 09:00 to minimise disturbance. Clear notices to be prominently displayed at all premises exits to request patrons to respect the needs of local residents and to leave the premises and surrounding area quietly

e) The protection of children from harm

We will ensure that an age verification policy will apply to the premises, individuals that appears to be under the age of 25 years to produce a type of photographic ID before being sold alcohol, identification being a passport or driving licence. An incident book to record the refusal of alcohol sales and/or ejections from the premises to be maintained on the premises and this book to be made available on request to the police or an authorised officer.

### **Declarations**

Declaration Type \*

Sole Applicant - Individual or Other

#### **Declarations**

I have uploaded a copy of the plan of the premises. I have uploaded a copy of the consent form completed by the individual I wish to be designated premises supervisor, if applicable. I understand 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 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 (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.

Signature/Declaration of applicant or applicant's solicitor or other duly authorised agent (see Guidance Note 11 & 2). If signing/applying on behalf of the applicant, please state your name and in what capacity you are authorised to sign/apply. When submitting an on-line application form the 'Declaration made' checkbox must be selected.

Declarations		
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, if appropriate (please see note 15).		
Full Name *	Juliana Rodrigues	
Date *	23/01/2023	
Capacity *	Applicant	
✓ Declaration made		
Do you wish to provide alternative correspondence details? *	No	
Email confirmation		
On submission an email confirmation will be sent using the details below		
Forename	Juliana	
Surname /Company Name	Rodrigues	
Email *	juliana@sushiandsalad.com	
Telephone	07482192375	