



- Payment - £190 ✓  
 - 8 June ✓  
 - Circulated ✓  
 - Lal Pac ✓

**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 EXETER COOKERY SCHOOL 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			
60 HAVEN ROAD			
Post town	EXETER	Postcode	EX2 8DP

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£

**Part 2 - Applicant Details**

Please state whether you are applying for a premises licence as

Please tick as appropriate

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

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

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

Please tick yes

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

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

**(A) INDIVIDUAL APPLICANTS** (fill in as applicable)

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

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

**(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	LUCY FISHER
Address	EXETER COOKERY SCHOOL LTD C/O AMHERST + SHAPLAND UNIT 2 OLD BREWERY ROAD WIVELISCOMBE SOMERSET TA4 2PW
Registered number (where applicable)	9462631
Description of applicant (for example, partnership, company, unincorporated association etc.)	CO-OWNER + DIRECTOR
Telephone number (if any)	07415 783759
E-mail address (optional)	info@exetercookeryschool.co.uk

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD	MM	YYYY
01	06	2016

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

DD	MM	YYYY

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

The premises is the ground floor of an ~~1830s~~ 1830s warehouse, built of stone + brick, fronting onto Exeter canal basin and backing onto Haven Road. There is a walkway between the front of the building and the canal, and an alleyway between the northern side and AS Watersports.

We intend to provide wine with meals to catering school guests only and also to sell wine to them on request either for consumption on the premises or in their own homes.

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

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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 any that apply

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

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

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

**In all cases complete boxes K, L and M**

**A**

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

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 2) <i>Films will only take the form of promotional videos/films by businesses using our premises for a function/meeting</i>	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)		
Mon	07.00	24.00			
Tue	07.00	24.00	<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
Wed	07.00	24.00			
Thur	07.00	24.00	<b>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</b> (please read guidance note 5)		
Fri	07.00	24.00			
Sat	07.00	24.00			
Sun	07.00	24.00			

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon			State any seasonal variations for indoor sporting events (please read guidance note 4)
Tue			
Wed			
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)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 4)		
Thur					
Fri			<b><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></b> (please read guidance note 5)		
Sat					
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 checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3) <i>Organisations wishing to use our venue for a function/event might want to provide live music eg: for a fashion show</i>		
Mon	11.00	24.00			
Tue	11.00	24.00	<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)		
Wed	11.00	24.00			
Thur	11.00	24.00	<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)		
Fri	11.00	24.00			
Sat	11.00	24.00			
Sun	11.00	24.00			

**F**

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place <u>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	<b>Please give further details here</b> (please read guidance note 3) <i>We will provide background music to accompany events hosted at our venue eg charity functions, award events, business dinners. We might also provide ambience music during our cooking classes.</i>		
Mon	9.00	24.00			
Tue	9.00	24.00	<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 4)		
Wed	9.00	24.00			
Thur	9.00	24.00	<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)		
Fri	9.00	24.00			
Sat	9.00	24.00			
Sun	9.00	24.00			

**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	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	11.00	24.00	<b>Please give further details here</b> (please read guidance note 3) <i>It is possible that an element of dance will be included in such events as a fashion show for example</i>	Both	<input type="checkbox"/>
Tue	11.00	24.00			
Wed	11.00	24.00	<b>State any seasonal variations for the performance of dance</b> (please read guidance note 4)		
Thur	11.00	24.00			
Fri	11.00	24.00	<b>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</b> (please read guidance note 5)		
Sat	11.00	24.00			
Sun	11.00	24.00			

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)			Please give a description of the type of entertainment you will be providing <i>fashion show / business events / product or company launch / trade show / foodie event / special Christmas event</i>		
Day	Start	Finish	<b>Will this entertainment take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Mon	11.00	24.00		Outdoors	<input type="checkbox"/>
Tue	11.00	24.00	<b>Please give further details here</b> (please read guidance note 3)		
Wed	11.00	24.00			
Thur	11.00	24.00	<b>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</b> (please read guidance note 4)		
Fri	11.00	24.00			
Sat	11.00	24.00	<b>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</b> (please read guidance note 5)		
Sun	11.00	24.00			

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"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3) <i>It is possible that events might run over later than 24.00</i>		
Mon	24.00	01.00			
Tue	24.00	01.00			
Wed	24.00	01.00	<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 4)		
Thur	24.00	01.00			
Fri	24.00	01.00	<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)		
Sat	24.00	01.00			
Sun	24.00	01.00			

J

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption –</b> <b>please tick</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4) <i>we might be offering events over Bank Holidays / Christmas / New Year and in this circumstance the timings might run over the standard hours to 02.00</i>		
Mon	07.00	24.00			
Tue	07.00	24.00			
Wed	07.00	24.00			
Thur	07.00	24.00			
Fri	07.00	24.00			
Sat	07.00	24.00			
Sun	07.00	24.00			
			<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)		

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

Name	LUCY FISHER
Address	HILLTOP BOURCHIER CLOSE BAMPTON DEVON
Postcode	EX16 9AB
Personal licence number (if known)	MDV PE1069
Issuing licensing authority (if known)	MID DEVON DISTRICT COUNCIL

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	07:00	24:00	<p><b>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</b> (please read guidance note 5)</p> <p>We do not expect to be running courses during all the hours given on every day of the week, but as we cannot predict the exact demand for courses or special events at this stage, I have included the maximum. We might host business breakfasts starting around 7:00/7:30. Also we hope to host evening events which might run over time, but we have no intention of regularly remaining open later than 24:00.</p>
Tue	07:00	24:00	
Wed	07:00	24:00	
Thur	07:00	24:00	
Fri	07:00	24:00	
Sat	07:00	24:00	
Sun	07:00	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)**

- There will be invited guests only
- Alcohol will not be provided to the general public walking in off the street

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

- We will operate a 'Challenge 25' policy and this will be displayed prominently
- Any staff will be trained in this policy.

**c) Public safety**

- Fire alarms will be installed and tested on a regular basis
- Fire exits will be clearly marked.
- The main public entrance/exit will be via the pedestrian Terrace

**d) The prevention of public nuisance**

- Notices will be displayed by the exits requesting guests to leave quietly after evening courses/events
- Noise levels (music + otherwise) will be monitored and adjusted for the time of day

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



- We will operate a 'Challenge 25' policy (see above)  
 - No alcohol will be provided/sold to children under 18, apart from 16/17 year olds with a meal when accompanied by an adult.

**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	10.5.16
Capacity	Co-owner/Director of company & Personal Licence Holder

**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.**

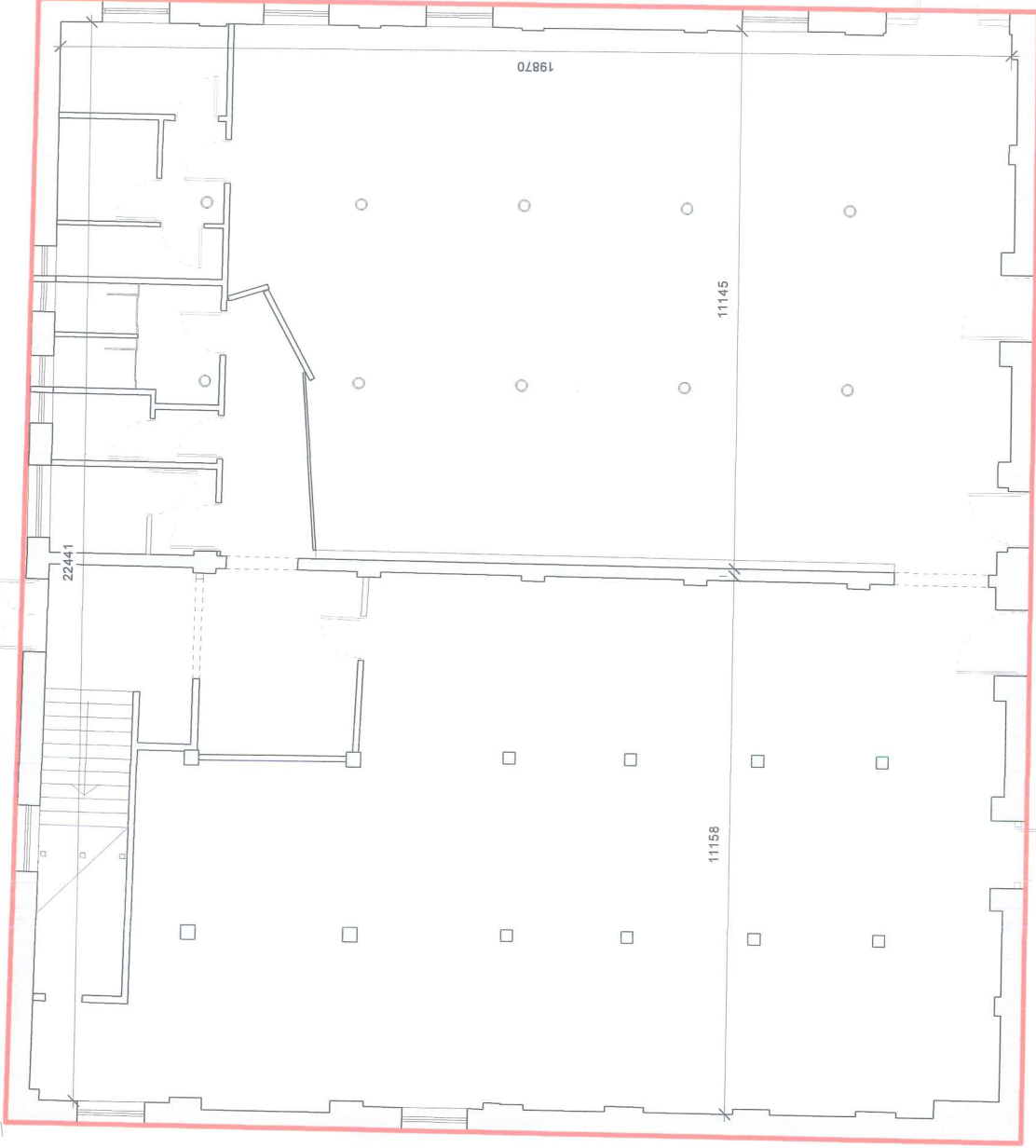
Signature	
Date	
Capacity	

HAVEN ROAD



Key:

Red Line Indicates Ownership



Ground Floor Plan 1:100 @ A3

1:100



PLANNING

60 Haven Road  
 Exeter

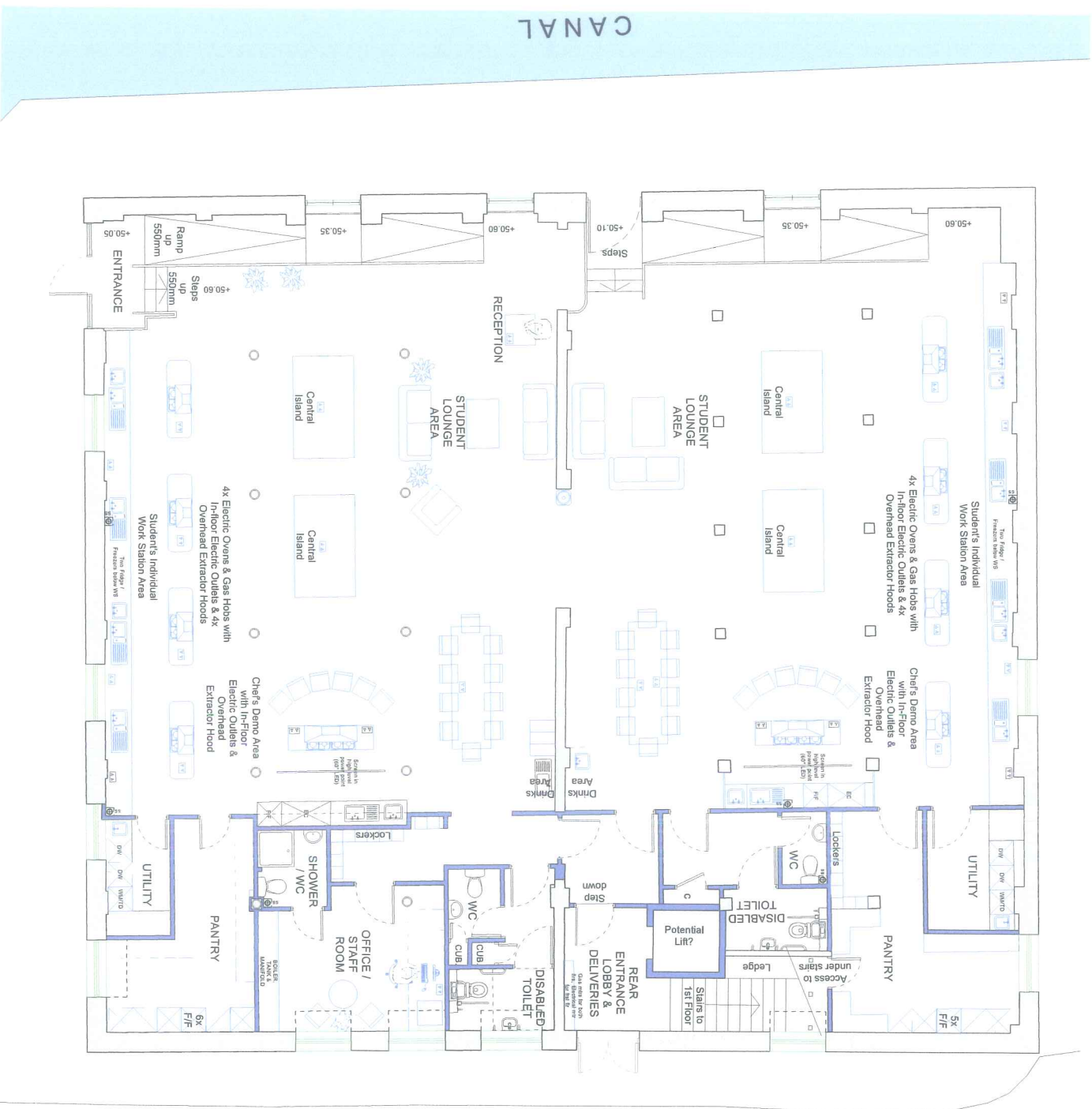
for  
 Mr & Mrs. F Fisher

Ground Floor Plan  
 and Roof Plan

Scale: 1:100, 1:500 @ A3

Drawing No: 1102 / P02 Rev -  
 The Boat Shed, Michael Browning Way  
 Exeter, EX2 8DD  
 01392 438051 mail@gs-uk.com

60 HAVEN ROAD - EXETER



HAVEN ROAD



No 60 HAVEN ROAD EXETER - UPGRADE & ALTERATION

Proposed Ground Floor Plan - Scale 1:50 @ A1 (1:100 @ A3)

Drawing No: 1129-20