

ENVIRONMENT, CULTURE
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**Bracknell
Forest
Council**

BRACKNELL FOREST BOROUGH COUNCIL

Passed To:

BFBC Reference
: LN/

BRACKNELL FOREST BOROUGH COUNCIL

Licensing Team, Time Square, Market Street, Bracknell, Berkshire, RG12 1JD

**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 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 Taj Miah..... (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			
Sandhurst-Tandoori			
80 High Street			
Sandhurst			
Berkshire			
Post town	Sandhurst	Post code	GU47 8ED

Telephone number at premises (if any)

01252 877 808

Non domestic rateable value of premises

£ 5,500

Part 2 – Applicant Details

Please state whether you are applying for a Premises Licence as:

- Please tick ✓
- a) an individual or individuals* please complete section (A)
- b) a person other than an individual* please complete section (B)
- i. as a limited company

- 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 please complete section (B)
- h) The chief officer of police of a police force in England and Wales please complete section (B)

Please tick ✓

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

- 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 Mrs Miss Ms Other title (for example, Rev)

Surname: First names:

Please tick ✓

I am 18 years old or over

Current postal address if different from premises address:

Post Town: Postcode:

Daytime contact telephone number:

Email address (optional):

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr

Mrs

Miss

Ms

Other title
(for example, Rev)

Surname

First names

Please tick

I am 18 years old or over

Current postal address
if different from
premises address

Post Town

Postcode

Daytime contact telephone number

Email address (optional)

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

Day		Month		Year			
0	1	0	6	2	0	0	9

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

Day		Month		Year			

If 5000 or more people are expected to attend the premises at any one time, please state the number expected to attend

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

Indian/Bangladeshi Restaurant/Take-away

What licensable activities do you intend to carry on from the premises?
(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick ✓

- | | |
|---|--------------------------|
| 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 type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input type="checkbox"/> |
| g) performance 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)

Sale by retail 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	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
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					

B

Films Standard days and timings (please read guidance note 6)			Will the exhibition of a films 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)	Both	
Tue					
Wed			State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur					
Fri			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)		
Sat					
Sun					

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			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)
Thur			
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainment 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)	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue			State any seasonal variations for the boxing or wrestling entertainment (please read guidance note 4)		
Wed					
Thur			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)		
Fri					
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music 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)	Both	
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur					
Fri			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. (Please read guidance note 5)		
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music 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)	Both	
Tue					
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur					
Fri			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 5)		
Sat					
Sun					

G

Performance 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)	Both		
Tue						
Wed				State any seasonal variations for the performance of dance (please read guidance note 4)		
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						

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing	Indoors		
Day	Start	Finish		Outdoors		
Mon			Please give further details here (please read guidance note 3)	Both		
Tue						
Wed				State any seasonal variations for the entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)		
Thur						
Fri				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. (please read guidance note 5)		
Sat						
Sun						

Provision of facilities for making music Standard day and timings (please read guidance note 6)			Please give a description of the facilities for making music you will be providing		
			Will the facilities for making music be indoors or outdoors or both – please tick (✓) (please read guidance note 2)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3)		
Tue			Please give further details here (please read guidance note 3)		
Wed			State any seasonal variations for the provision of facilities for making music (please read guidance note 4)		
Thur			State any seasonal variations for the provision of facilities for making music (please read guidance note 4)		
Fri			Non standard timings. Where you intend to use the premises for the provision of facilities for making music at different times to those listed in the column on the left, please list. (please read guidance note 5)		
Sat					
Sun			Non standard timings. Where you intend to use the premises for the provision of facilities for making music at different times to those listed in the column on the left, please list. (please read guidance note 5)		

J

Provision of facilities for dancing Standard days & timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick (✓) (please read guidance note 2)		
			Indoors		
			Outdoors		
			Both		
Day	Start	Finish			
Mon			Please give a description of the facilities for dancing you will be providing		
Tue			Please give further details here (please read guidance note 3)		
Wed			State any seasonal variations for providing dancing facilities (please read guidance note 4)		
Thur					
Fri			State any seasonal variations for providing dancing facilities (please read guidance note 4)		
Sat					
Sun			Non standard timings. Where you intend to use the premises for the provision of facilities for dancing at different times to those listed in the column on the left, please list. (please read guidance note 5)		

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)			Please give a description of the type of entertainment facility you will be providing				
			Will the entertainment facility be place Indoors or outdoors or both – please tick (✓) (please read guidance note 2)	<table border="1"> <tr> <td>Indoors</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Outdoors</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Both</td> <td><input type="checkbox"/></td> </tr> </table>	Indoors	<input type="checkbox"/>	Outdoors
Indoors	<input type="checkbox"/>						
Outdoors	<input type="checkbox"/>						
Both	<input type="checkbox"/>						
Day	Start	Finish	Please give further details here (please read guidance note 3)				
Mon							
Tue			State any seasonal variations for the provisions of facilities for entertainment of a similar description to that falling within (i) or (j) (please read guidance note 4)				
Wed							
Thur			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. (please read guidance note 5)				
Fri							
Sat			From end of the permitted hours to start of permitted hours on new year's eve.				
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)				
			<table border="1"> <tr> <td>Indoors</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Outdoors</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Both</td> <td><input type="checkbox"/></td> </tr> </table>	Indoors	<input checked="" type="checkbox"/>	Outdoors	<input type="checkbox"/>
Indoors	<input checked="" type="checkbox"/>						
Outdoors	<input type="checkbox"/>						
Both	<input type="checkbox"/>						
Day	Start	Finish	Please give further details here (please read guidance note 3)				
Mon							
Tue			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)				
Wed							
Thur			Hours to be extended by 2 hours on 12 occasions per year. Giving 10 days notice to the police and licensing authority.				
Fri	23.00	00.00					
Sat	23.00	00.00	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)				
Sun							

M

Sale of alcohol Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption on or off the premises or both— please tick (✓) (please read guidance note 7)	On the premises	✓
Day	Start	Finish		Off the premises	
Mon	12.00	23.00	State any seasonal variations for the sale of alcohol (please read guidance note 4) Hours to be extended by 2 hours on 12 occasions per year. Giving 10 days notice to the police and licensing authority. Non standard timings. Where you intend to use the premises for the sale of alcohol at different times to those listed in the column on the left, please list. (please read guidance note 5) From end of the permitted hours to start of permitted hours on new year's eve.	Both	
Tue	12.00	23.00			
Wed	12.00	23.00			
Thur	12.00	23.00			
Fri	12.00	00.00			
Sat	12.00	00.00			
Sun	12.00	00.00			

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

Name
Taj Miah

Address
 Oak Farm Close
 Blackwater, Camberley
 Surrey

Postcode
GU17 0JU

Personal licence number (if known)
Applied for personal license

Issuing licensing authority (if known)
Hart District 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)

None

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) Hours to be extended by 2 hours on 12 occasions per year. Giving 10 days notice to the police and licensing authority.
Day	Start	Finish	Non standard timings. Where you intend to open 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) From end of the permitted hours to start of permitted hours on new year's eve.
Mon	12.00	23.00	
Tue	12.00	23.00	
Wed	12.00	23.00	
Thur	12.00	23.00	
Fri	12.00	00.00	
Sat	12.00	00.00	
Sun	12.00	23.00	

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)

Conditions taken from the application guide U14
The licensee will be an active member of pub watch

b) The prevention of crime and disorder

CD 20
CD 48
Pub watch
Will not serve anyone who comes in the cuisine drunk.
The licensee will be an active member of pub watch

c) Public safety

PS9
PS14
PS17
PS35
PS39
PS48

d) The prevention of public nuisance

PN30
PN31
PN29
PN52
When customers leaving at late night, will tell them to leave quietly.

e) The protection of children from harm

PC23
PC24
The management will implement a policy approved by the trading standards. With regard to the Responsibility for alcohol sales.

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- Please tick ✓**
- I have made or enclosed payment of the fee
 - I have enclosed a 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 proposed 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 ... 12th May 2009
.....

Capacity

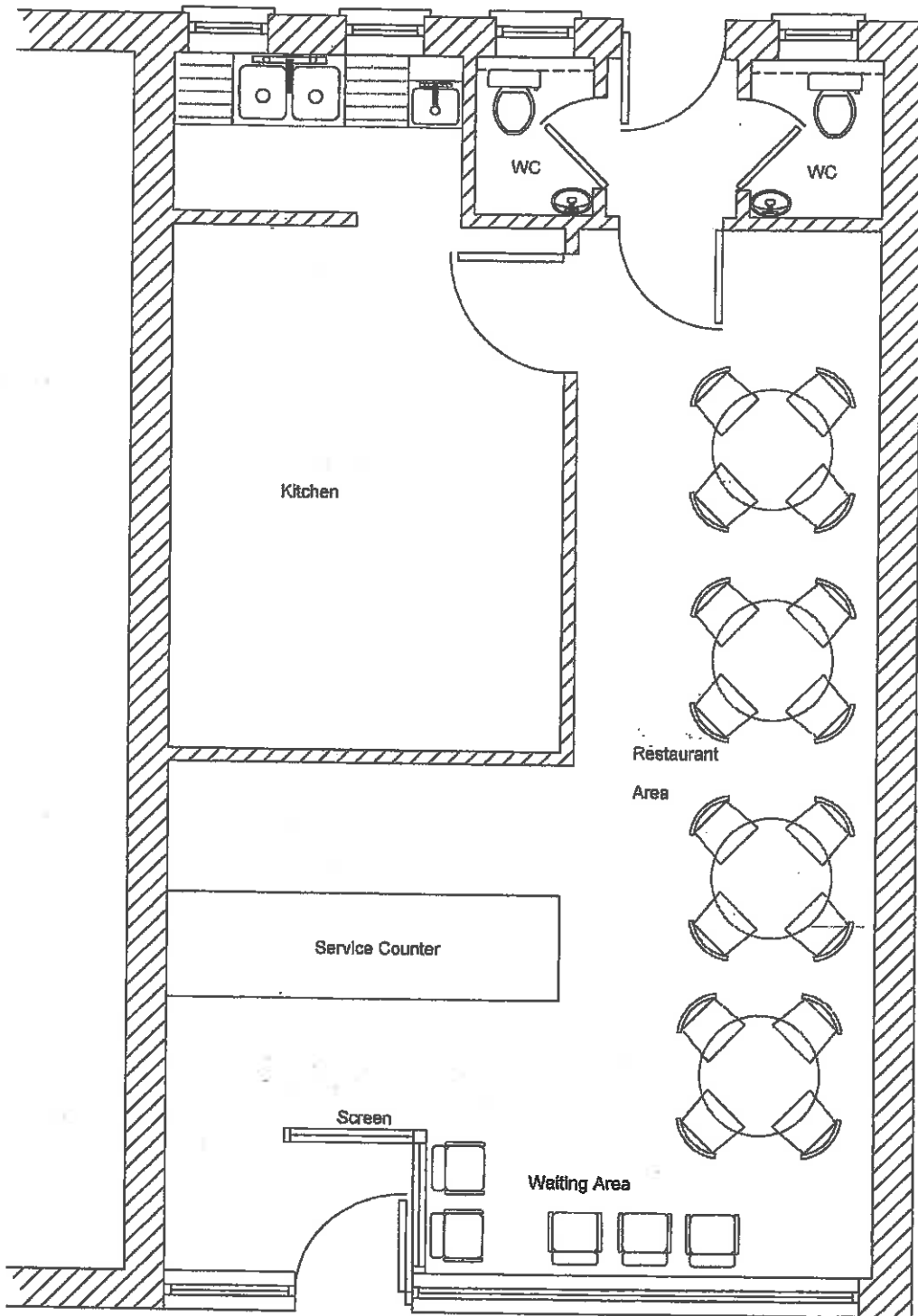
For joint applications signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent. (please read guidance note 12). If signing on behalf of the applicant please state in what capacity.

Signature

Date

Capacity

Contact Name (where not previously given) and address for correspondence associated with this application (please read guidance note 19) 	
Post town	Post code
Telephone number (if any)	
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)	



Mr Taj Mia
80 High Street,
Sandhurst, GU47 8ED

Drawing : FP 1
Floor Plan

Scale 1:50 on A4



1m

Agent: Yateley Drawing Service Ltd
www.YateleyDrawingService.co.uk