

[Insert name and address of relevant licensing authority and its reference number (optional).]

**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 **SHELL UK OIL PRODUCTS LIMITED**

*(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			
<b>SHELL PEPYS CORNER WORPLE ROAD RAYNES PARK</b>			
<b>Post town</b>	LONDON	<b>Postcode</b>	SW20 8RE

Telephone number at premises (if any)	<b>0208 944 9990</b>
Non-domestic rateable value of premises	<b>£ AS PER TELEPHONE CONVERSATION WITH CASPER BATES ON 15<sup>TH</sup> OCTOBER 2014, BAND C WILL APPLY AS THE PROPERTY CANNOT BE LOCATED IN THE VOA REGISTER.</b>

**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.**

<b>Name</b> SHELL UK OIL PRODUCTS LIMITED
<b>Address</b>  SHELL CENTRE LONDON SE1 7NA
<b>Registered number (where applicable)</b> 3625633
<b>Description of applicant (for example, partnership, company, unincorporated association etc.)</b> PRIVATE LIMITED COMPANY
<b>Telephone number (if any)</b> 0207 934 1234
<b>E-mail address (optional)</b>

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD		MM		YYYY			
1	9	1	1	2	0	1	4

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)

PLEASE SEE ATTACHED OVERVIEW.

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 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**

Plays Standard days and timings (please read guidance note 6)			<b>Will the performance of a play 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 type="checkbox"/>			
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)					
Mon								
Tue								
Wed						<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Thur								
Fri						<b>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</b> (please read guidance note 5)		
Sat								
Sun								

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b><u>Will the exhibition of films 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"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>			
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Tue					
Wed			<b><u>State any seasonal variations for the exhibition of films</u></b> (please read guidance note 4)		
Thur					
Fri			<b><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></b> (please read guidance note 5)		
Sat					
Sun					

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)
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**

<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 type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)		
Thur					
Fri			<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)		
Sat					
Sun					

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b>Will the playing of recorded music 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 type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue			<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 4)		
Wed					
Thur			<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					
Sat					
Sun					

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of dance 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 the performance of dance</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 dance at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sat								
Sun								

# 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		
Day	Start	Finish	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed					
Thur			<b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 4)		
Fri					
Sat			<b><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></b> (please read guidance note 5)		
Sun					

**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 checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3) <b>THE PROVISION OF HOT DRINKS ONLY.</b>		
Mon	23.00	05.00			
Tue	23.00	05.00			
Wed	23.00	05.00			
Thur	23.00	05.00			
Fri	23.00	05.00			
Sat	23.00	05.00			
Sun	23.00	5.00			
			<b><u>State any seasonal variations for the provision of late night refreshment</u></b> (please read guidance note 4)		
			<b><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></b> (please read guidance note 5)		

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Mon	00.00	24.00			
Tue	00.00	24.00			
Wed	00.00	24.00			
Thur	00.00	24.00			
Fri	00.00	24.00			
Sat	00.00	24.00			
Sun	00.00	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 SELVACHSOTHY ANANDASOTHY	
Address  20 CLARENCE AVENUE NEW MALDEN SURREY	
Postcode	KT3 3ED
Personal licence number (if known) PA0516	
Issuing licensing authority (if known) KINGSTON UPON THAMES	

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).**

NONE.

L

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b><u>State any seasonal variations</u></b> (please read guidance note 4)
Day	Start	Finish	
Mon	00.00	24.00	
Tue	00.00	24.00	
Wed	00.00	24.00	
Thur	00.00	24.00	
Fri	00.00	24.00	
Sat	00.00	24.00	
Sun	00.00	24.00	

**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 5)

**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)

PLEASE SEE ATTACHED SHEET.

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

PLEASE SEE ATTACHED SHEET.

**c) Public safety**

PLEASE SEE ATTACHED SHEET.

**d) The prevention of public nuisance**

PLEASE SEE ATTACHED SHEET.

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



PLEASE SEE ATTACHED SHEET.

**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	<i>Stoement pp. Lockett &amp; Co</i>
Date	20 <sup>TH</sup> OCTOBER 2014.
Capacity	DULY AUTHORISED AGENTS.

**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	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13) SARA CLEMENT (LICENSING MANAGER) LOCKETT HOUSE 13 CHURCH STREET			
Post town	<b>KIDDERMINSTER</b>	Postcode	<b>DY10 2AH</b>
Telephone number (if any)	01562 864488		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) sara@lockett.uk.com			

### Notes for Guidance

1. Describe the premises, for example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies, you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

**Section M Describe the steps you intend to take to promote the four licensing objectives:**

**a) General-all four licensing objectives (b, c, d, e)**

A suitable and sufficient CCTV system with recording facilities will be in place at site and will operate at all times the premise is open for licensable activities. Images can be made available upon reasonable request by the Police or other relevant officers of a responsible authority.

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

A refusals book will be operated and maintained and will be produced to a relevant officer of the Police or other relevant officers of a responsible authority upon request.

A Challenge 25 policy will be operated at the premise, acceptable forms of identification are a passport, photocard driving licence and PASS accredited identification card.

Spirits will be located behind the counter.

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

A suitable and sufficient CCTV system with recording facilities will be in place at site and will operate at all times the premise is open for licensable activities. Images can be made available upon reasonable request by the Police or other relevant officers of a responsible authority.

Spirits will be located behind the counter.

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

**c) Public Safety.**

A suitable and sufficient CCTV system with recording facilities will be in place at site and will operate at all times the premise is open for licensable activities. Images can be made available upon reasonable request by the Police or other relevant officers of a responsible authority.

**d) Prevention of public nuisance.**

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

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

Staff will be trained with regard to their responsibilities in the retail sale of alcohol and regular refresher training will also be undertaken. Training records can be made available for inspection upon reasonable request by the Police or other relevant officers of a responsible authority.

A refusals book will be operated and maintained and will be produced to a relevant officer of the Police or other relevant officers of a responsible authority upon request.

A Challenge 25 policy will be operated at the premise, acceptable forms of identification are a passport, photocard driving licence and PASS accredited identification card.

Spirits will be located behind the counter.

**Consent of individual to being specified as premises supervisor  
I, Selvachsothy Anandasothy**

.....  
[full name of prospective premises supervisor]

of 20, Clarence Avenue New Malden Surrey. KT3 3ED.....  
[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. - SALE OF ALCOHOL FOR CONSUMPTION OFF  
[type of application] THE PREMISE

by ..... SHELL UK OIL PRODUCTS & LIMITED ..  
[name of applicant]

relating to a premises licence: ...  ..... [number of existing licence, if any]

or..... Shell Pepys Corner, WORPLE ROAD, RAUNES PARK, LONDON, SW20 8RE  
[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: ..... SHELL UK OIL PRODUCTS LIMITED  
[name of applicant]

concerning the supply of alcohol at:

..... Shell pepys Corner Worples Road, London, SW20 8RE  
.....  
[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: PA 0516 ..... [insert personal licence number, if any]

Personal licence issuing authority: KINGSTON UPON THAMES  
QUINTON J. HIGH STREET KINGSTON UPON THAMES  
KT1 1EU (0208 547 8002)  
[Insert name and address and telephone number of personal licence issuing authority, if any]

Signed  \_\_\_\_\_

Name (please print) MR. A. SELWACHSOOTHY \_\_\_\_\_

Dated 18/9/14 \_\_\_\_\_

Date of Birth 13/10/1968 \_\_\_\_\_

Place of Birth SRI LANKA . \_\_\_\_\_

**PUBLIC NOTICE OF AN APPLICATION FOR A PREMISES LICENCE UNDER SECTION 17 OF THE LICENSING ACT 2003**

Notice is hereby given that an application was made to **LONDON BOROUGH OF MERTON** for a premises licence under the above Act on the **21<sup>ST</sup> OCTOBER 2014**

Applicant: **SHELL UK OIL PRODUCTS LIMITED**

Address of premises: **SHELL PEPYS CORNER  
WORPLE ROAD  
RAYNES PARK  
LONDON, SW20 8RE.**

Proposed licensable activities:

**SALE OF ALCOHOL FOR CONSUMPTION OFF THE PREMISES  
PROVISION OF LATE NIGHT REFRESHMENT**

Proposed days and hours of licensable activity:

	<b>EVERY DAY</b>
<b>ALCOHOL SALES</b>	<b>00.00 TO 24.00</b>
<b>PROVISION OF LATE NIGHT REFRESHMENT</b>	<b>23.00 TO 05.00</b>

The postal address of the Licensing Authority where the register is kept and the application may be inspected is:

**\*LONDON BROUGH OF MERTON, 14<sup>TH</sup> FLOOR,  
MERTON CIVIC CENTRE, LONDON ROAD, MORDEN,  
SM4 5DX.**

Any person wishing to make representations on this matter shall give notice, in writing, stating the nature and grounds for making such representations to The Licensing Officer at the above address\* within 28 days of the date of this notice – by the **18<sup>TH</sup> NOVEMBER 2014**. Further information is available by visiting the web site [www.merton.gov.uk](http://www.merton.gov.uk) .

It is an offence, under section 158 of the Licensing Act 2003, to knowingly or recklessly make a false statement in or in connection with an application and the maximum fine on summary conviction of such an offence is £5000.

**Lockett & Co – duly authorised agents**

## **Convenience Store Overview.**

This is a well-established convenience store site traded by Shell UK Oil Products Limited but operated by Selvasothy Jayapiragas. There are 6 pumps located on the forecourt. There are no facilities on site for the maintenance and/or sale of motor vehicles.

## **The Convenience Store.**

The convenience store has a retail area of approximately 860 sq ft. The purpose built store has been designed to serve both the local community along with passing trade. The convenience store operates 24 hours per day, seven days per week under the company's own format. The store stocks a range of fresh foods and dairy produce, groceries and other domestic products and also offers 'express' lunch facilities. In addition dry fuel products such as BBQ charcoal/kindling/logs are available. Off sales are a standard and expected feature of the convenience store service.

## **Security.**

The internal and external digital CCTV system benefits from a recorder with 31 day image retention. Recordings can be made available to Police and other enforcement agencies as needed. The convenience store operates at closed door policy between the hours of Midnight and 05.00 hours seven days per week with all service taking place through the night hatch.

## **The Operation.**

The convenience store is operated by the Manager, assisted by a team of full and part time staff. The Designated Premises Supervisor, is trained and certified through an accredited scheme and is responsible for training all staff-utilising the Lockett & Co Due Diligence pack-and keeping complete training records. The Challenge 25 trading initiative is used supported by the refusals system with records kept in the Refusals Log.

The following two pages provide an overview of the content of the Lockett & Co Due Diligence package.

# LOCKETT & CO DUE DILIGENCE PACKAGE OVERVIEW

Lockett & Co will provide each licensed site with a complete due diligence package to consisting of the following material:

## **1. A Premises Licence Manual:**

The manual consists of all the relevant information and guidance the licence holder would require relating to the premises licence and the requirements under the Licensing Act 2003. There is a location within the manual to store Part A of the premises licence and instruction provided regarding the requirement of the Section 57 notice and Part B Summary being displayed.

## **2. Staff Training Manual:**

This manual is designed to enable the licence holder to undertake regular in house staff training relating to alcohol and age restricted products to ensure that all staff members including any new members of staff understand their legal duties and what the requirements are under the Licensing Act 2003 for alcohol and age restricted products and the penalties that may be applicable if the law is not adhered to.

## **3. Premises Refusals Log:**

The log is to enable all staff to record all details of any refused sales to customers (for example if they are underage, do not have any ID, etc). The log allows all refusals to be kept in one place and provides the detailed information that is required under the Licensing Act 2003, which can then be produced at any time upon request to the Police, Trading Standards or other relevant officer to ensure that staff has been compliant with the requirements. This log is also signed off by the relevant DPS or site manager on a regular basis to ensure compliance.

## **4. Premises Incident Log:**

The log is to enable staff to record any incidents that occur at the premises (for example theft, non-payment for goods, drive offs, acts of aggression or violence, etc).

## **5. Refusals Cards Alcohol:**

The cards are for the staff members serving customers to give out to the customer when they are refused service when trying to purchase alcohol, telling them why they were refused. The use of the card can assist in reducing potential confrontation.

## **6. Refusals Cards Age Restricted:**

The cards are for the staff members serving customers to give out to a customer when they are refused service for age restricted products, telling them why they were refused. The use if the card can assist in reducing potential confrontation.

## **7. U 25 Drink Awareness Badges:**

The badges are for staff members to wear on their uniform, to identify to customers that they will be requesting ID from anyone who appears to be under the age of 25 when purchasing alcohol and age restricted products.



### **8. U 25 Drink Awareness Posters (per set A3, A4 & A2):**

The posters are provided for the premises licence holder as a set of four to display in and around the premise, the four posters are as follows: 1. Advises that anyone who appears to be under the age of 25 will be asked for ID when purchasing alcohol, 2. Advises it is an offence to purchase or attempt to purchase alcohol on behalf of anyone who is under the age of 18. 3. Advises that it is a criminal offence to buy alcohol on behalf of a child. 4. Advises that anyone who appears to be under the age of 25 will be asked to produce ID when buying any age restricted product.

### **9. Tobacco Posters**

The posters are for the premises licence holder to display on or near to the cigarette gantry that it is illegal to sell tobacco products to anyone under the age of 18. The poster meets the legislative requirements that the retailer must display in respect of tobacco sales.

### **10. Staff Guide to Selling Alcohol and Age Restricted Products Booklet:**

The small booklet is provided to each member of staff at the premises and is distributed to them as part of their in house training, it is designed as an easy guide for staff members to refer to regarding their responsibilities with regard to the sale of alcohol and age restricted products.

**Please note: Any legislative changes will be advised to the premises licence holder the changes will also be updated within the material provided to each site as and when it is required.**

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