

30/09/18

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 Digi Diner 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 59 High Street			
Post town	Margate, Kent	Postcode	CT9 1DX

Telephone number at premises (if any)	[REDACTED]
Non-domestic rateable value of premises	£36,750

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/limited liability partnership please complete section (B)
 - ii as a partnership (other than limited liability) 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 (by ticking yes to one box below):

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) <input type="checkbox"/>	
Surname			First names		
Date of birth over		I am 18 years old or <input type="checkbox"/>		Please tick yes <input type="checkbox"/>	
Nationality					
Current residential address if different from premises address					
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) <input type="checkbox"/>	
Surname			First names		

Date of birth over		I am 18 years old or <input type="checkbox"/>		Please tick yes <input type="checkbox"/>	
Nationality					
Current postal address if different from premises address					
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 Digi Diner Ltd
Address UHY Kent LLP Chartered Accountants Thames House Roman Square Sittingbourne Kent ME10 4BJ
Registered number (where applicable) 11205087
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company
Telephone number (if any) [REDACTED]
E-mail address (optional) [REDACTED]

Part 3 Operating Schedule

When do you want the premises licence to start?

DD MM YYYY
3 0 0 9 2 0 1 8

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)
To be a bar and cafe with games facilities.

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 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all 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

I

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon	23:00	00:30	<u>Please give further details here</u> (please read guidance note 4)		
Tue	23:00	00:30			
Wed	23:00	00:30	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
Thur	23:00	01:30			
Fri	23:00	01:30	<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> (please read guidance note 6) Christmas Eve and New Year’s Eve until 01:30		
Sat	23:00	01:30			
Sun	23:00	00:30			

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	10:00	00:00	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Tue	10:00	00:00			
Wed	10:00	00:00			
Thur	10:00	01:00	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 6) Christmas Eve and New Year's Eve until 01:00		
Fri	10:00	01:00			
Sat	10:00	01:00			
Sun	10:00	00:00			

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):

Name Mr Robert Osman	
Date of birth [REDACTED]	
Postcode	[REDACTED]
Personal licence number (if known) [REDACTED]	
Issuing licensing authority (if known) Thanet 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 9).

None

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variations</u> (please read guidance note 5)
Day	Start	Finish	
Mon	07:00	00:30	
Tue	07:00	00:30	
Wed	07:00	00:30	
Thur	07:00	01:30	<u>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</u> (please read guidance note 6) Christmas Eve and New Year's Eve until 01:30
Fri	07:00	01:30	
Sat	07:00	01:30	
Sun	07:00	00:30	

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 10)

The premises will be a cafe with certain digital games facilities. Planning consent has been granted from 07:00 until 01:30 but on Sundays – Wednesdays the operation hours will be less. CCTV will be fitted. There is no application for live or recorded music after 23:00. Food will be provided up to 23:00.

b) The prevention of crime and disorder

The premises are of a nature which would not, in the ordinary way, attract crime and disorder and the management will very carefully monitor this with the aid of CCTV.

c) Public safety

The usual risk assessments for fire safety, health and safety and food hygiene will be completed prior to the premises opening.

d) The prevention of public nuisance

The nature of the premises and the relatively limited hours in conformity with the planning consent do not present a likelihood of nuisance.

e) The protection of children from harm

The Challenge 25 system will be in place with only photographic ID, including but not exclusively passport or driving licence with a refusals book being maintained.

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.


[Applicable to all individual applicants, including those in a 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.

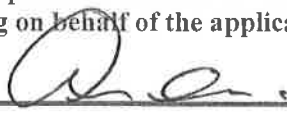
Part 4 – Signatures (please read guidance note 11)



Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Declaration	<ul style="list-style-type: none"> • [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] 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)
Signature	

Date	
Capacity	

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 13). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	29/8/19
Capacity	Solicitor

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14) Mackenzie Dillon The Old Police Station 58/60 Gladstone Road			
Post town	Broadstairs, Kent	Postcode	CT10 2TA
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) 			

Notes for Guidance

- 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.
- In terms of specific regulated entertainments please note that:
 - Plays: no licence is required for performances between 08:00 and 23.00 on any day, provided that the audience does not exceed 500.
 - Films: no licence is required for 'not-for-profit' film exhibition held in community premises between 08.00 and 23.00 on any day provided that the audience does not exceed 500 and the organiser (a) gets consent to the screening from a person who is responsible for the premises; and (b) ensures that each such screening abides by age classification ratings.
 - Indoor sporting events: no licence is required for performances between 08.00 and 23.00 on any day, provided that the audience does not exceed 1000.
 - Boxing or Wrestling Entertainment: no licence is required for a contest, exhibition or display of Greco-Roman wrestling, or freestyle wrestling between 08.00 and 23.00 on any day, provided that the audience does not exceed 1000. Combined fighting sports – defined as a contest, exhibition or display which combines boxing or wrestling with one or more martial arts – are licensable as a boxing or wrestling entertainment rather than an indoor sporting event.
 - Live music: no licence permission is required for:
 - a performance of unamplified live music between 08.00 and 23.00 on any day, on any premises.

Consent of individual to being specified as premises supervisor

ROBERT OSMAN

[full name of prospective premises supervisor]

of

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[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 DIGI DINER LTD

[name of applicant]

relating to a premises licence

[number of existing licence, if any]

for

THE DIGI DINER
59, HIGH STREET
MARGATE
KENT CT9 1DX

[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

ROBERT OSMAN

[name of applicant]

concerning the supply of alcohol at

THE DIGI DINER

[name and address of premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

[REDACTED]

[insert personal licence number, if any]

Personal licence issuing authority

THANET DISTRICT COUNCIL

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

Signed

[REDACTED]

Name (please print)

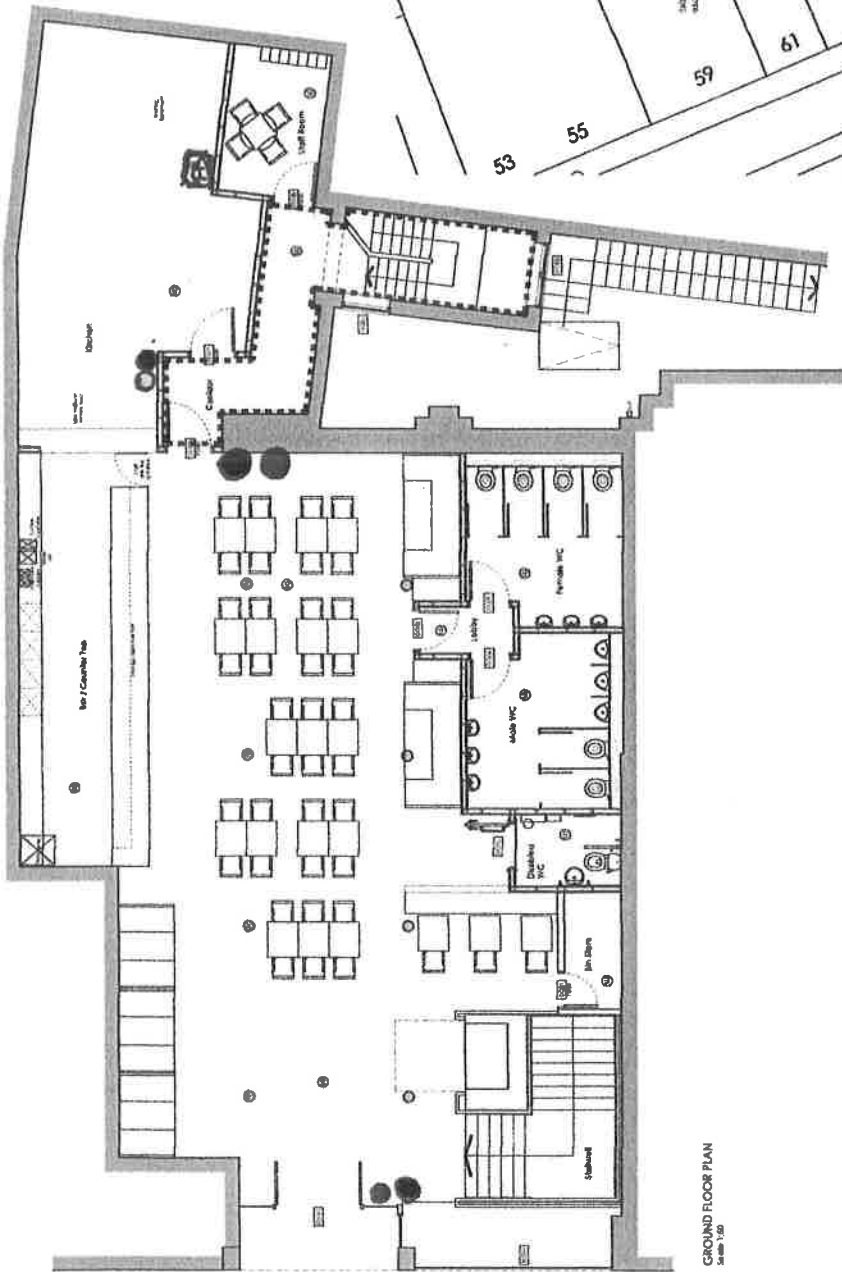
Robert OSMAN

Date

29 | 08 | 2018

GROUND FLOOR FIRE SAFETY LOCATIONS

- 2KG CO2
- 6LTC WATER
- 6LTC WET CHEMICAL
- FIRE BLANKET



GROUND FLOOR PLAN
Scale 1:50

LEGEND

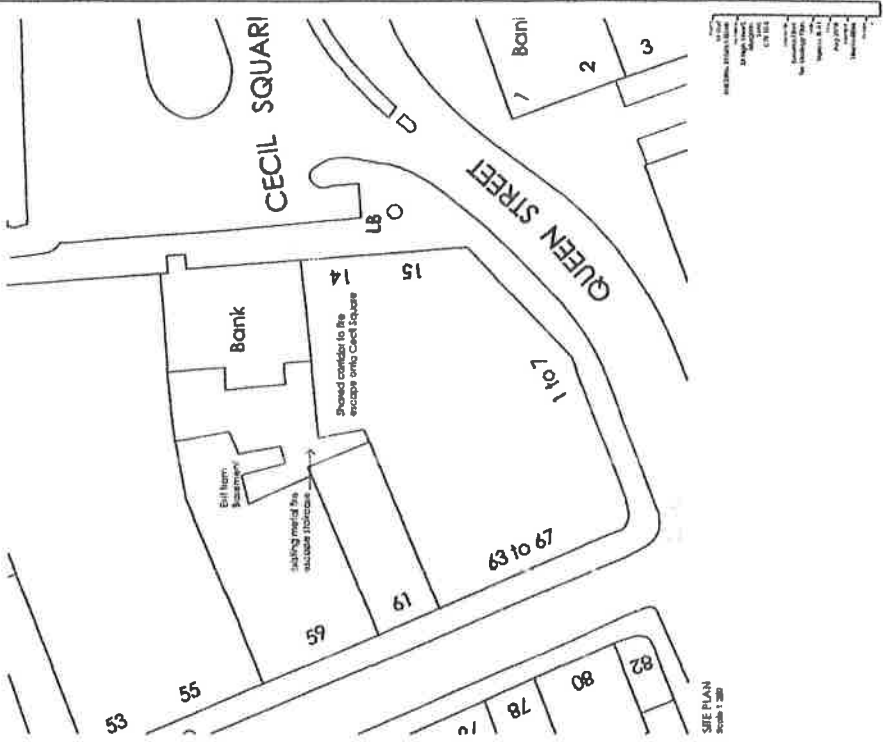
- 2KG CO2
- 6LTC WATER
- 6LTC WET CHEMICAL
- FIRE BLANKET

THIS PLAN IS THE PROPERTY OF THE FIRE SAFETY ENGINEER AND IS NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM, WITHOUT THE WRITTEN PERMISSION OF THE FIRE SAFETY ENGINEER.

THE FIRE SAFETY ENGINEER HAS CONDUCTED A VISUAL INSPECTION OF THE PREMISES AND HAS IDENTIFIED THE FIRE SAFETY EQUIPMENT LOCATIONS. THIS PLAN IS NOT A SUBSTITUTE FOR A FULL FORMAL ASSESSMENT OF THE PREMISES.

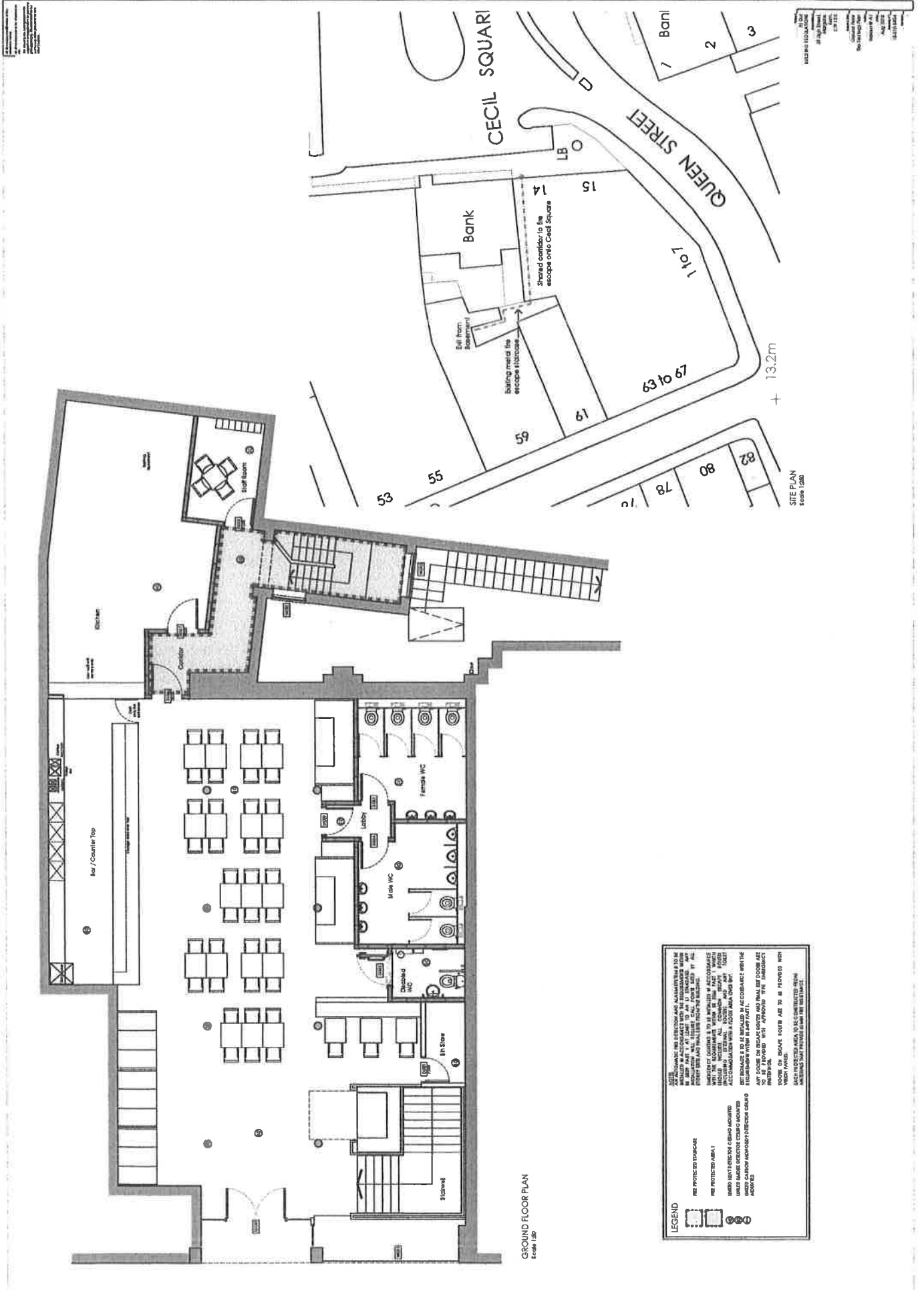
THIS PLAN IS VALID FOR 12 MONTHS FROM THE DATE OF ISSUANCE. ANY CHANGES TO THE PREMISES OR EQUIPMENT LOCATIONS MUST BE REPORTED TO THE FIRE SAFETY ENGINEER IMMEDIATELY.

DATE: 15/08/2024
FIRE SAFETY ENGINEER: [Name]
SCALE: 1:50



SEE PLAN
Scale 1:500

GROUND FLOOR FIRE STRATEGY PLAN



GROUND FLOOR PLAN
Scale 1:50

LEGEND

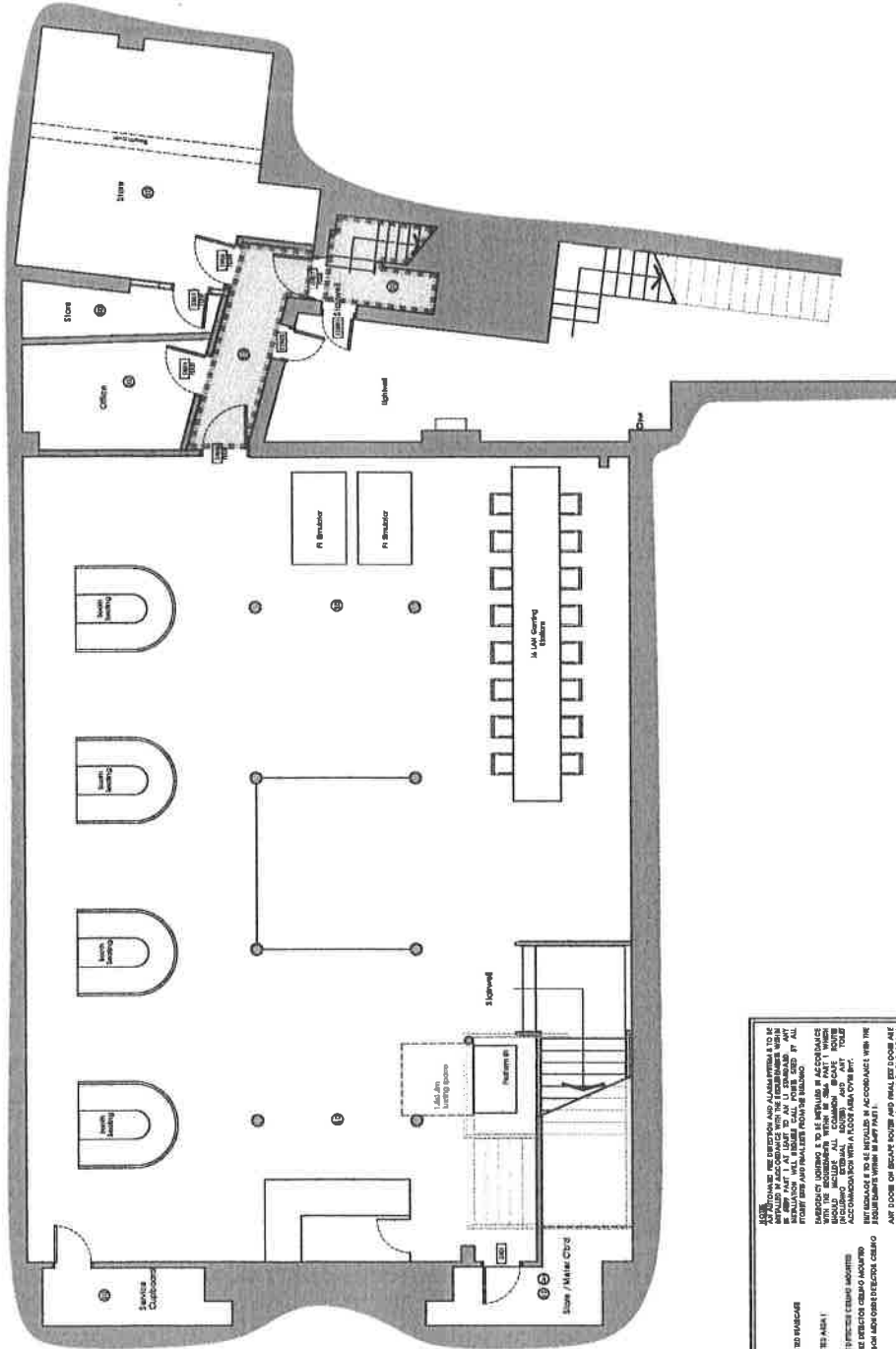
- FIRE PROTECTED STAIRCASE
- FIRE PROTECTED AREA 1
- FIRE PROTECTED AREA 2
- FIRE PROTECTED AREA 3

NOTES

1. ALL PROTECTED AREAS TO BE CONFINED TO THE PROTECTED AREA BY FIRE RESISTANT WALLS AND DOORS.
2. ALL PROTECTED AREAS TO BE CONFINED TO THE PROTECTED AREA BY FIRE RESISTANT WALLS AND DOORS.
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9. ALL PROTECTED AREAS TO BE CONFINED TO THE PROTECTED AREA BY FIRE RESISTANT WALLS AND DOORS.
10. ALL PROTECTED AREAS TO BE CONFINED TO THE PROTECTED AREA BY FIRE RESISTANT WALLS AND DOORS.

DATE: 10/10/2011
 DRAWN BY: [Name]
 CHECKED BY: [Name]
 APPROVED BY: [Name]
 PROJECT NO: [Number]
 SHEET NO: [Number]

BASEMENT FIRE STRATEGY PLAN



LEGEND

- FIRE PROTECTED BOUNDARIES
- FIRE PROTECTED AREA
- FIRE EXTINGUISHER CABINET LOCATIONS

NOTES

1. ALL FIRE PROTECTED AREAS AND BOUNDARIES ARE TO BE CONSTRUCTED IN ACCORDANCE WITH THE REQUIREMENTS OF THE FIRE PROTECTION CODE AND THE FIRE PROTECTION CODE OF THE CITY OF TORONTO.

2. ALL FIRE PROTECTED AREAS AND BOUNDARIES ARE TO BE CONSTRUCTED IN ACCORDANCE WITH THE REQUIREMENTS OF THE FIRE PROTECTION CODE AND THE FIRE PROTECTION CODE OF THE CITY OF TORONTO.

3. ALL FIRE PROTECTED AREAS AND BOUNDARIES ARE TO BE CONSTRUCTED IN ACCORDANCE WITH THE REQUIREMENTS OF THE FIRE PROTECTION CODE AND THE FIRE PROTECTION CODE OF THE CITY OF TORONTO.

DATE: 10/10/2014
 DRAWN BY: [Name]
 CHECKED BY: [Name]
 APPROVED BY: [Name]
 PROJECT NO: [Number]
 SHEET NO: [Number]

SCALE: 1/8" = 1'-0"

GROUND FLOOR CCTV PLACEMENT

