Date of birth old or over	1 am 18 years	Please tick yes
Nationality Britisn		
Current postal address if different from premises address		
Post town	Posto	code and
Daytime contact telephone num	ber	
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	
Address	
management and a second and the	P. 11
Registered number (wh	ere applicable)
Description of applican	t (for example, partnership, company, unincorporated association etc.)
felephone number (if a	ny)
E-mail address (optiona	:1)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD MM YYYY 15 0 1 9

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

DD MM YYYY

Plea	se give a general description of the premises (please read guidance	e note 1)				
Веа	ch kiosk serving hot and cold snacks, ice creams, hot and cold drin	ks, beach goods and hire.				
If 5.	000 or more people are expected to attend the premises at any	,				
	one time, please state the number expected to attend.					
Wha	it licensable activities do you intend to carry on from the premises?	?				
(plea	ase see sections 1 and 14 and Schedules 1 and 2 to the Licensing A	et 2003)				
Prov	rision of regulated entertainment (please read guidance note 2)	Please tick all that apply				
a)	plays (if ticking yes, fill in box A)	9				
(1)	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)	27 227 m²				
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

Standa	pply of alcohol ndard days and		Will the supply of alcohol be for consumption – please tick (please read	On the premises	
timings (please read guidance note 7)			guidance note 8)	Off the premises	
Day	Start	Finish		Both	X
Mon	10:00	21:00	State any seasonal variations for the supply of alcohol (please read guidance note 5)		se
Tue	10:00	21:00			
Wed	10:00	21:00			
Thur	10:00	21:00	Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the		
Fri	10:00	21:00	column on the left, please list (please read guidance note 6)		
Sat	10:00	21:00			
Sun	10:00	21:00			

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):

anie
oss Andrews
nte of birth
ldress
stcode []
rsonal licence number (if known)
uing licensing authority (if known)

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).

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)		blic nd read	State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	07:00	21:30	
Tue	07:00	21:30	
Wed	07:00	21:30	
Thur	07:00	21:30	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 6)
Fri	07:00	21:30	
Sat	07:00	21:30	
Sun	07:00	21:30	

 ${f M}$ 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)

Existing beach cafe with small outside area, selling teas, coffees, selling beach goods etc. The proprietor receives regular requests for beer and has plans to serve is out of bio degradeable and cardboard cups—zero plastic, details of this will be provided. The present situation is, customers from the Botany Bay Hotel buy beer in the bar and take their glasses down onto the beach. Licensing our client's premises will prevent that issue.
b) The prevention of crime and disorder
The premises will have very limited opening hours from 07:00 - 21:30. Alcohol will only be sold between 10:00 and 21:00 hours. It will be limited in time between 15th March - 31st October. The proprietors have run the premises for some years and are capable of ensuring there is no crime and disorder. The premises can be secured. No substantial stocks of alcohol

c) Public safety

will be kept on the premises.

The premises are already used by members of the public. There will be particular attention for any risk from glass and bottles.

d) The prevention of public nuisance

The premises are only open whilst supervised by the DPS or his wife. The sale of alcohol will be a relatively small proportion of the amount of overall sales.

e) The protection of children from harm

The Challenge 25 policy has been explained very clearly to the applicant who is happy to adopt it. The applicant will only accept photographic ID such as, but not exclusively, passport or driving licence. A refusals book will be maintained.

Checklist:

Please tick to indicate agreement

• I have made or enclosed payment of the fee.

I have enclosed the plan of the premises.

X













