

For access to Premises
Please call [REDACTED]



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 **J P LEISURE SCUNTHORPE 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 OSCARS BAR 6 GILLIATT STREET SCUNTHORPE NORTH LINCOLNSHIRE			
Post town	SCUNTHORPE	Postcode	DN15 6EY

Telephone number at premises (if any)	01724307290
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/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)	
Surname			First names Type text here		
Date of birth			I am 18 years old or over <input type="checkbox"/> Please tick yes		
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 15 for information)					

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)	
Surname			First names		
Date of birth		I am 18 years old or over		<input type="checkbox"/>	Please tick yes
Nationality					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service: (please see note 15 for information)					
Current residential 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 J P LEISURE SCUNTHORPE LIMITED
Address OSCAR, S BAR 6 GILLIATT STREET SCUNTHORPE DN15 6EY
Registered number (where applicable) 12232564
Description of applicant (for example, partnership, company, unincorporated association etc.) LIMITED COMPANY

Telephone number (if any) 01724307290
E-mail address (optional) oscars.entertainment2020@gmail.com

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
0	9	1 1 2 0 2 0

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 HAS BEEN USED AS A PUBLIC HOUSE AND NITE CLUB FOR A NUMBER OF YEARS. IT HAS TWO BARS AND IS PLACE ON TWO LEVEL, WITH THE DANCE FLOOR AND TOILETS ON GROUND LEVEL. THE BAR AND SEATING AREA ON THE FIRST LEVEL. IT HAS A MAXIMUM OF 500 PATRONS AT ANY ONE TIME.

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

LIMIT OF 500

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

A

Plays Standard days and timings (please read guidance note 7)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
			<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Tue					
			<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> (please read guidance note 6)		
Wed					
Thur					
Fri					
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 7)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)		
Wed					
Thur			<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> (please read guidance note 6)		
Fri					
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
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 6)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)		
Tue					
			<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> (please read guidance note 6)		
Wed					
Thur					
Fri					
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) THE PREMISES WILL BE PROVIDING SOME LIVE MUSIC FROM TIME TO TIME FOR THE ENTERTAINMENT OF THE CUSTOMERS OR FOR PRIVATE BOOKINGS		
Mon	10.00	04.00			
Tue	10.00	04.00	<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)		
Wed	10.00	04.00			
Thur	10.00	04.00	<u>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</u> (please read guidance note 6)		
Fri	10.00	04.00			
Sat	10.00	05.00			
Sun	10.00	04.00			

F

Recorded music Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) THE PREMISES HAS A DJ SYSTEM WHICH CAN BE USED FOR BACK GROUND MUSIC OR FOR THE ENTERTAINMENT OF THE CUSTOMERS AT PRIVATE BOOKINGS OR THE PROVISION OF ENTERTAINMENT ON A NIGHT TIME.		
Mon	10.00	04.00			
Tue	10.00	04.00	<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
Wed	10.00	04.00			
Thur	10.00	04.00	<u>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</u> (please read guidance note 6)		
Fri	10.00	04.00			
Sat	10.00	05.00			
Sun	10.00	04.00			

G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance 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"/>
Mon	10.00	04.00	<u>Please give further details here</u> (please read guidance note 4) THE CUSTOMERS WILL BE ABLE TO USE THE DANCE FLOOR TO DANCE TO THE ENTERTAINMENT FOR PRIVATE BOOKING OR FOR THE NIGHT TIME ENTERTAINMENT PROVIDED.	Both	<input type="checkbox"/>
Tue	10.00	04.00			
Wed	10.00	04.00	<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)		
Thur	10.00	04.00			
Fri	10.00	04.00	<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> (please read guidance note 6)		
Sat	10.00	05.00			
Sun	10.00	04.00			

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
Mon	10.00	04.00		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue	10.00	04.00	<u>Please give further details here</u> (please read guidance note 4) AS A PREMISES WE WOULD LIKE TO PROVIDE PRIVATE BOOKINGS FOR CHILDRENS PARTIES/ BIRTHDAYS ANY ANY OTHER PARTY THAT WE ARE BOOKED FOR. THERE WILL BE REGULATIONS PUT IN PLACE AND DOCUMENTED TO KEEP CHILDREN SAFE FROM HARM.		
Wed	10.00	04.00			
Thur	10.00	04.00	<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5)		
Fri	10.00	04.00			
Sat	10.00	05.00	<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> (please read guidance note 6)		
Sun	10.00	04.00			

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"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) REFRESHMENT WILL ONLY BE PROVIDED FOR PRIVATE BOOKINGS AND THIS WILL BE PROVIDED BY THE PARTY BOOKING WITH US. THIS WILL BE DOCUMENTED SO PROOF CAN BE PROVIDED UPON REQUEST IF NEEDED.		
Mon	10.00	04.00			
Tue	10.00	04.00	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5) COFFEE AND TEA WILL BE PROVIDE TO ANY CUSTOMER AT ANY TIME.		
Wed	10.00	04.00			
Thur	10.00	04.00	<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)		
Fri	10.00	04.00			
Sat	10.00	05.00			
Sun	10.00	04.00			

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 type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)		
Mon	10.00	04.00			
Tue	10.00	04.00			
Wed	10.00	04.00			
Thur	10.00	04.00			
Fri	10.00	04.00			
Sat	10.00	05.00			
Sun	10.00	04.00			
			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)		

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 JASON PETER BENSTEAD	
Date of birth [REDACTED]	
Address 6 Gilliatt Street, Scunthorpe, DN15 6EY	
Postcode	DN15 6EY
Personal licence number (if known) NL/00629	
Issuing licensing authority (if known) NORTH LINCOLNSHIRE 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).

CHILDREN PARTIES WILL BE PROVIDED BY PRIVATE BOOKINGS AND WE WILL DOCUMENT ALL THE PARTIES. CHILDREN 18 OR OVER WILL HAVE TO PROVE THERE AGE BY THE STANDARD FORM OF ID AT THE MAIN DOOR. THEY WILL THEN AFTER PROOF ONLY WILL THEY BE GIVEN A WRIST BAND TO GET SERVED WITH ALCOHOL.
 ALL DRINKS WILL BE SERVED ONE AT A TIME WITH NO OFFER AT THE BAR WHILE THE PRIVATE BOOKING IS TAKING PLACE.
 THERE WILL BE A TUCK SHOP ON THE DANCE FLOOR SO ANY CHILD UNDER THE AGE OF 18 YEARS OF AGE WILL BE SEVRD WITH REFRESHMENTS AWAY FROM THE MAIN BAR.
 DEPENDING ON THE AGE OF THE CHLIDREN AT THE PRVATE BOOKING A ADULT OR A PARENT WILL BE ASK TO STAY ON THE PREMISES FOR THE REMAINDER OF THE PARTY.
 THIS WILL BE DOCUMENTED ON A BOOKING BASIS. ALL DOCUMENTATION OF THE BOOKING WILL BE ABLE TO BE REVEIUED ON REQUEST OF THE COUNCIL OR THE POLICE
 THE NUMBER OF DOOR SUPERVISORS WILL BE 1 PER 50 CUSTOMERS AT ANY CHILDRENS BOOKING.

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	00.00	23.59	WE ARE ASKING FOR A 24 HOUR LICENCE FOR THE PREMISES AS WE WOULD LIKE TO USE THE VENUE FOR AS MANY DIFFRENT BOOKINGS AS POSSIBLE. WE ARE ASKING FOR THE 24 HOURS LICENCE BUT THE VENUE WILL ONLY PROVDE THE PROVISION OF ALCOHOL BETWEEN THE HOURS OF 10.00 - 04.00 MONDAY TO FRIDAY (INCLUDING SUNDAY) 10.00 - 05.00 ON A SATURDAY
Tue	00.00	23.59	
Wed	00.00	23.59	THE REST OF THE TIME WE WOULD LIKE TO USE THE PREMISES BUT PROVIDE SOFT DRINKS AND TEA AND COFFEE TO THE CUSTOMERS
Thur	00.00	23.59	<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)
Fri	00.00	23.59	
Sat	00.00	23.59	
Sun	00.00	23.59	

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)

WE WILL FOLLOW THE FOUR LICENSING OBJECTIVES AND WE WILL FOLLOW THE STARS ON THE BARS PAPERWORK WHICH IS PROVIDED BY NORTH LINCOLNSHIRE COUNCIL. WHICH CAN BE VIEWED ON THE PREMISES

b) The prevention of crime and disorder

WE WILL HAVE DOOR SUPERVISORS TO THE RECOMMENDED NUMBER WHICH IS ONE PER 100 PATRONS, IF IT IS CHILDREN IT WOULD BE ONE PER 50. THIS IS ALSO COVERED IN THE STARS ON THE BAR PAPERWORK WHICH CAN BE VIEWED ON THE PREMISES

c) Public safety

PUBLIC SAFETY IS THE MAIN THING IN A PUBLIC HOUSE AND NITE CLUB. ALL DOOR SUPERVISORS ARE TRAINED AND HAVE AN IN-HOUSE RADIO WHICH IS CONNECTED TO THE MANAGEMENT AT ALL TIMES WHILE THEY ARE WORKING. ALL STAFF ARE TRAINED AND RE-TRAINED EVERY SIX MONTHS IN LICENSING LAWS, PROTECT CHILDREN FROM HARM, PUBLIC NUISANCE AND CRIME AND DISORDER. ALL STAFF ARE TRAINED ON THE STARS ON THE BARS PAPERWORK FROM NORTH LINCOLNSHIRE COUNCIL. THIS IS DOCUMENTED AND KEPT ON THE PREMISES.

d) The prevention of public nuisance

ALL STAFF ARE TRAINED IN THIS AREA AND ARE RETRAINED EVERY 6 MONTHS, WE PROVIDE SIA DOOR STAFF AT THE MAIN DOOR TO CONTROL THE PATRONS IN AND OUT OF THE PREMISES. THE PREMISES WAS OPEN TO THE PUBLIC UP TO JULY OF 2019. WE HAVE NEVER HAD A PROBLEM WITH CRIME AND DISORDER, PUBLIC NUISANCE OR PROTECTION CHILDREN FROM HARM.

e) The protection of children from harm

ALL STAFF ARE TRAINED IN THIS AREA AND WE PROVIDE THE NUMBER OF DOOR SUPERVISORS TO THE NUMBER OF CHILDREN WHICH IS 1 PER 50 ON THE LICENCE. IF WE PROVIDE A CHILDREN'S PARTY WE ALWAYS ASK PARENTS TO STAY WITH THEIR CHILDREN DEPENDING ON THE AGE OF THE CHILDREN AT THE BOOKING.

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 or my share code issued by the Home Office online right to work checking service (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
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	proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)
Signature	
Date	09/10/2020
Capacity	DIRECTOR

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	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

**North
Lincolnshire
Council**

www.northlincs.gov.uk

**WASTE & PUBLIC PROTECTION
LICENSING ACT 2003
APPLICATION FOR THE GRANT OF A PREMISES LICENCE
PRESCRIBED FORM OF NOTICE**

Take notice that the undersigned have made an application to the North Lincolnshire Council on **09/10/2020.....for a grant of a premises licence in respect of the premises known as :

(Name of Premises) OSCAR BAR

Situated at (address) 6 Gilliatt Street, Scunthorpe, DN15 6EY

For the said premises to be used for the purpose(s) of :
(brief summary of the application setting out matters such as the proposed licensable activities and the proposed hours of opening)

THE PREMISES WILL BE USED FOR THE SALE OF INTOXICATING LIQUOR AND MUSIC AND DANCE ON THE PREMISES, WE ARE ASKING FOR A LICENCE FROM 10AM - 4AM SUNDAY TO FRIDAY AND 10AM - 5AM ON SATURDAY.

Interested parties can make representations in writing to:

Waste & Public Protection, Licensing Division, P O Box 42, Church Square House, Scunthorpe, North Lincolnshire DN15 6XQ, no more than 28 days starting on the day on which the application was given to North Lincolnshire Council's Licensing Division ** stating the grounds of objection. For guidance the Licensing Policy can be found on the North Lincolnshire website www.northlincs.gov.uk

(The grant application setting out the full details can be viewed at Church Square House 9.30 am to 4.30 pm Monday to Friday)

Signed . 

It is an offence knowingly or recklessly to make a false statement in connection with an application and the maximum fine for which a person is liable on summary conviction for the offence is £5000.

NB ** when the application was made to North Lincolnshire Council.