

New Premises Licence

Premises Details

Premises Address *

2 George Street Merseyside ST. HELENS WA10 1BU

Telephone number at premises (if any)

Non-domestic value of premises. *

£ 10,000

Applicant Details

I/We 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.

Please state whether you are applying for a premises licence as:

a person other than an individual -as a limited company/
limited liability partnership

Applicant Details

If you are applying as a person described in one of the above please confirm: *

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or

Other Applicant (Non Individual)

Name *

Md Faisal Ahmad

Registered Address *

Town/City *

Other Applicant (Non Individual)

County	<input type="text" value=""/>
Postcode *	<input type="text" value=""/>
Registered Number (where applicable)	<input type="text" value=""/>
Description of applicant (for example partnership, company, unincorporated association, etc) *	<input type="text" value="Owner of Green Olive"/>
Telephone Number	<input type="text" value=""/>
Email *	<input type="text" value=""/>

Operating Schedule

When do you want the premises licence to start? *	<input type="text" value="09/05/2023"/>
If you wish the licence to be valid only for a limited period, when do you want it to end?	<input type="text" value=""/>
Please give a general description of the premises. *	<input type="text" value="The premises is a restaurant"/>
If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.	<input type="text" value=""/>

Operating Schedule

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 read guidance note 2) *

- Plays
- Films
- Indoor Sporting Events
- Boxing or Wrestling

Operating Schedule

- Live Music
- Recorded Music
- Performances of Dance
- Anything of a similar description falling under Music or Dance
- Provision of late night refreshment
- Supply of Alcohol

Supply of Alcohol Standard Times

Standard days and timings, where you intend to use the premises for the supply of alcohol. (please read guidance note 7)*
Please enter times in 24hr format (HH:MM)

Day *	Every Day
	16:00
	22:30

Supply of Alcohol

Will the supply of alcohol be for consumption on premises or off premises or both? (please read guidance note 8) *	On the premises
State any seasonal variations for the supply of alcohol. (please read guidance note 5)	
Please state any non-standard timings, where you intend to use the premises for the supply of alcohol at different times from the Standard days and times listed?(please read guidance note 6)	

Designated Premises Supervisor

Designated Premises Supervisor

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)

Title *	Mr
First name *	Saleh
Surname *	Uddin Talukdar
Street address *	█
	██████████
Town/City *	██████
County	
Postcode *	██████
Personal Licence Number (if known)	PA2674
Issuing Licensing Authority (if known)	Oldham

Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 7) * Please enter times in 24hr format (HH:MM)

Day *	Every Day
	16:00
	22:30

Opening Hours

State any seasonal variations. (please read guidance note 5)	None
Please state any Non-standard timings, where you intend the premises to be open to the public at different times from the	None

Opening Hours

Standard days and times listed? (please read guidance note 6)

Licensing Objectives

Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

a) General - all four licensing objectives (b, c, d and e) (please read guidance note 10)

Alcohol will only be served with meals. New staff will receive adequate training relating to the serving of Alcohol, the challenge 25 policy and the handling of awkward guests, all to provide a safe and enjoyable setting for guests of all ages. All staff will receive regular training while employed.

b) The prevention of crime and disorder

CCTV cameras are operational covering the whole serving area. The layout of the restaurant is open allowing employees to regularly check up and assess guests. Staff will be adequately trained to deal with guests who may cause problems. The layout of the tables permits guests of different needs, ages, etc to be sat away from one another, regardless of the party size.

c) Public safety

All drinks will only be served with food. The bar area is also the reception area, and is modest in size with limited alcohol visible. CCTV covers all of the serving floor area and the cameras are visible for patrons to see. The bar area is always attended to by a member of staff. Their job is solely to welcome guests and deal with any queries. It is their role to ensure the safety of all guests on site

d) The prevention of public nuisance

The restaurant aims to be family friendly and inclusive. All patrons will be advised to be quiet when they leave the premises, and there's a double door upon entry meaning that noise from the restaurant will be kept minimal.

e) The protection of children from harm

The floor plate is split into 2 areas, each with a number of different sized tables with no steps between. This allows guests with children or wheelchair users to be located away from other patrons who may cause issues.

Declarations

Declaration Type *

Sole Applicant - Individual or Other

Declarations

I have uploaded a copy of the plan of the premises. I have uploaded a copy of the consent form completed by the individual I wish to be designated premises supervisor, if applicable. I understand 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,

Declarations

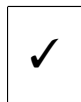
including those in partnership which is not a limited liability partnership, but not companies or limited liability partnerships I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15)

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.

Signature/Declaration of applicant or applicant's solicitor or other duly authorised agent (see Guidance Note 11 & 12). If signing/applying on behalf of the applicant, please state your name and in what capacity you are authorised to sign/apply. When submitting an on-line application form the 'Declaration made' checkbox must be selected.



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).

Full Name *

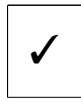
Md faisal ahmad

Date *

15/05/2023

Capacity *

Applicant



Declaration made

Do you wish to provide alternative correspondence details? *

No

Email confirmation

On submission an email confirmation will be sent using the details below

Forename

Surname /Company Name

Md Faisal Ahmad

Email *

Email confirmation

Telephone

