



**NORTHAMPTON
BOROUGH COUNCIL**

**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~~ MR. DAWID NIZIALEK
(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			
<u>19A/21 ABINGTON SQUARE NORTHAMPTON</u>			
Post town	<u>NORTHAMPTON</u>	Postcode	<u>NN1 4AE</u>

Telephone number at premises (if any)	[REDACTED]
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 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)

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Borough Council
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- 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)

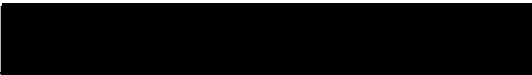
Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
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)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
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	NIZIALEK & DAUGHTER LIMITED				
Address	8 DONDWAN COURT NORTHAMPTON NN3 3DD				
Registered number (where applicable)	08578794				
Description of applicant (for example, partnership, company, unincorporated association etc.)	COMPANY				
Telephone number (if any)					
E-mail address (optional)					

Part 3 Operating Schedule

When do you want the premises licence to start?

DD MM YYYY
01 08 2013

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)

DELICATESSEN, GENERAL FOODS, OFF LICENCE
FRUITS & VEGETABLES, MEATS, BAKERY
PRODUCTS, TAKE-AWAY

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)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon				Please give further details here (please read guidance note 3)	
Tue					
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur					
Fri			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 (please read guidance note 5)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	
			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 3)	
Mon				
Tue			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)	
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 5)	
Fri				
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			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)	
Tue				
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

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors	<input type="checkbox"/>	
					Outdoors	<input type="checkbox"/>	
Day	Start	Finish	Both				<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)				
Tue							
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)				
Thur							
Fri			<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 5)				
Sat							
Sun							

E

Live music Standard days and timings (please read guidance note 6)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	
			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 3)	
Mon				
Tue				
Wed				
Thur				
Fri				
Sat				
			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 4)	
			<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 5)	
Sun				

F

Recorded music Standard days and timings (please read guidance note 6)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		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 3)			
Mon						
Tue						
Wed						
Thur						
Fri						
Sat						
Sun			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)			
			<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 5)			

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	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 3)		
Mon					
Tue					
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)		
Thur					
Fri			<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 5)		
Sat					
Sun					

H

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

I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish	Both		
Mon	05 ⁰⁰	23 ⁰⁰	<u>Please give further details here</u> (please read guidance note 3)		
Tue	05 ⁰⁰	23 ⁰⁰			
Wed	05 ⁰⁰	23 ⁰⁰	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Thur	05 ⁰⁰	23 ⁰⁰			
Fri	05 ⁰⁰	24 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 5)		
Sat	05 ⁰⁰	24 ⁰⁰			
Sun	10 ⁰⁰	23 ⁰⁰			

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (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	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	05 ⁰⁰	23 ⁰⁰			
Tue	05 ⁰⁰	23 ⁰⁰			
Wed	05 ⁰⁰	23 ⁰⁰			
Thur	05 ⁰⁰	23 ⁰⁰			
Fri	05 ⁰⁰	24 ⁰⁰			
Sat	05 ⁰⁰	24 ⁰⁰			
Sun	10 ⁰⁰	23 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 5)		

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor:

Name	PAUL CANDLER	
Address	98 LEA WAY WELLINGBOROUGH	
Postcode	NN8 3NR	
Personal licence number (if known)	1170671	
Issuing licensing authority (if known)	NORTHAMPTON	

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).

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon			<p><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 5)</p>
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

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)

b) The prevention of crime and disorder

c) Public safety

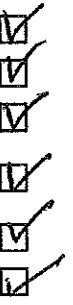
d) The prevention of public nuisance

e) The protection of children from harm

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>Nizialah Dewji</i>
Date	<i>22-08-2013</i>
Capacity	<i>Co. Director</i>

For joint applications, signature of 2nd applicant or 2nd 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)

Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			

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.

[REDACTED]

To: Responsible Authorities
Cc: Environmental Health Admin
Subject: NBC - Licensing Act 2003 - Application for a Premises Licence - Fresh, 19A-21 Abington Square

On 27th August we received the above application. Last date for representations is 24th September 2013.

Regards

[REDACTED]
Licensing Administration
Northampton Borough Council

Tel 01604 837020

**NORTHAMPTON LICENSING
AUTHORITY
LICENSING ACT 2003**

Mr Pawel Cander is applying for the new grant of a premises licence for Fresh, 19A/21 Abington Square, Northampton, NN1 4AE. If granted the application will allow the following licensable activities to take place:
Sale of alcohol on the premises. The intention to make an application for the grant to the premises licence is to sell alcohol on the above premises.

Any person wishing to make representations in relation to this application may do so by writing to:

Phil Bayliss, Licensing Officer, Northampton Borough Council, The Guildhall, St Giles Square, Northampton, NN1 1DE. Tel: 01604 838545 Fax: 01604 838723

Email: licensing@northampton.gov.uk

Representations may be made for 28 consecutive days from the date of this notice. The last date for representations being 26/09/13. A copy of the application is being kept by the Licensing Authority at the above address and can be viewed Monday to Thursday 9.00am to 5.00pm and 9.00am to 4.30pm on Fridays, except Bank Holidays. It is an offence knowingly or recklessly to make a false statement in connection with an application the maximum fine for which a person is liable on summary conviction for making a false statement is a Level 5 fine on the standard scale.

This notice being date 29/08/13

Should you require any assistance, please contact me on (01604) 467181 quoting reference URN MNN468216.

Yours Sincerely

Bridget Yates-Glover








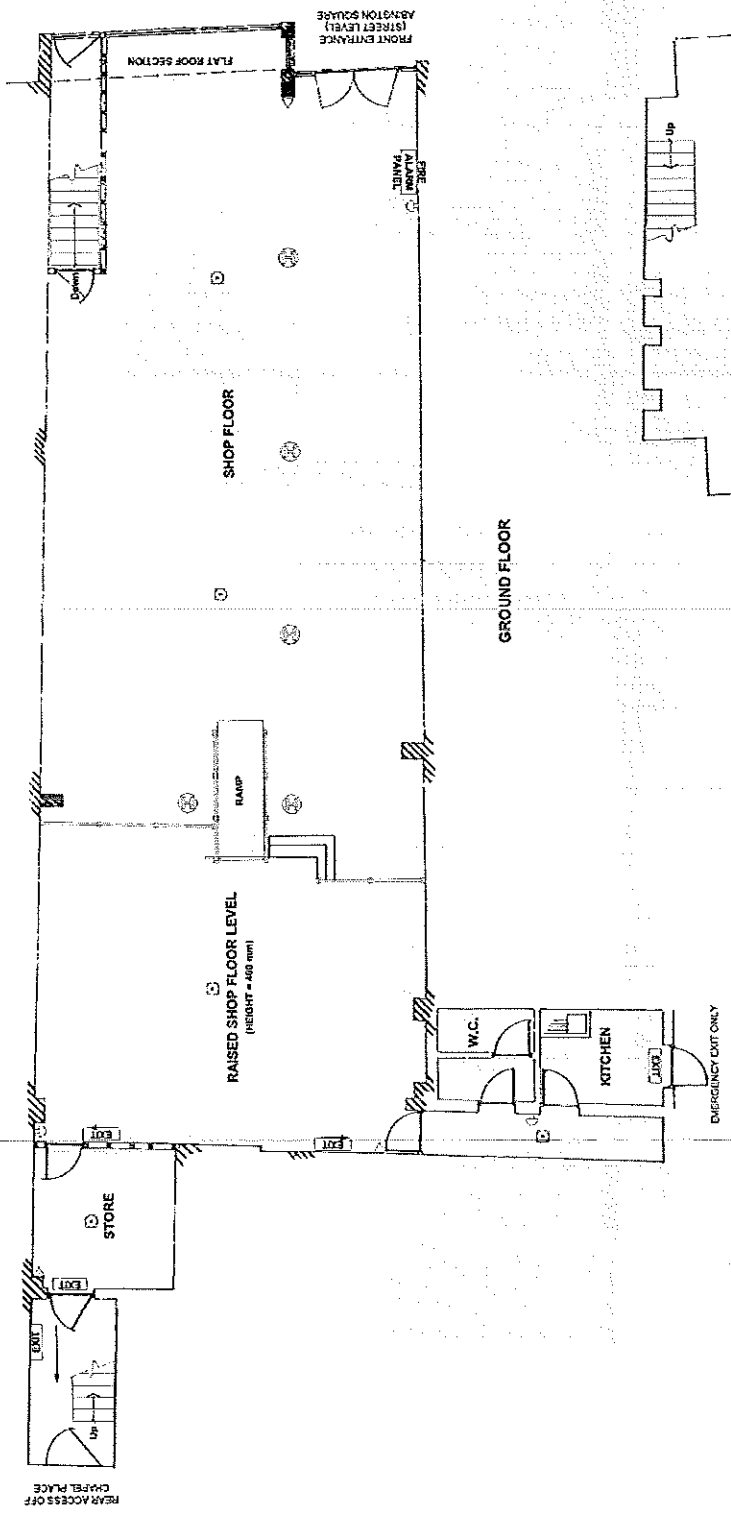
Johnston Press plc

Registered No. 1916792 (England)

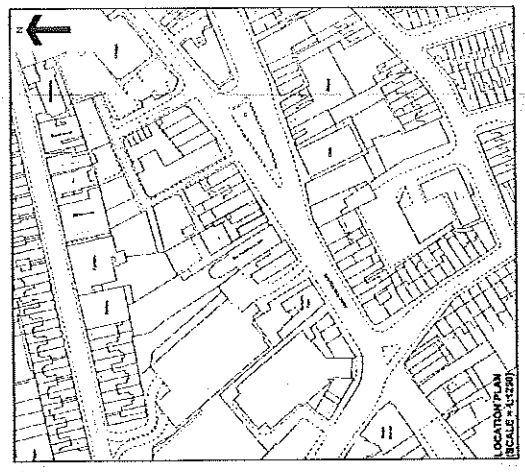
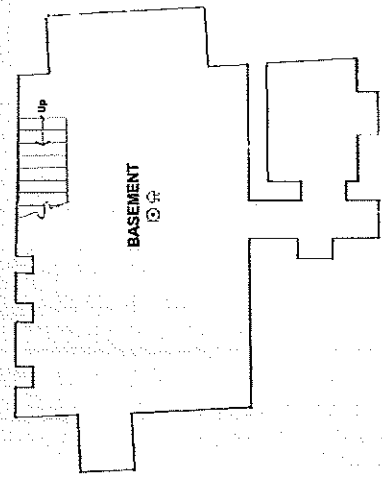
Vat Reg No. GB 551082761

[Faint, illegible text or stamp, possibly a date or reference number]

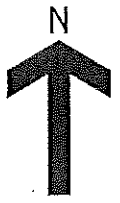
- LEGEND**
-  CIRCULAR STEEL SUPPORT
 -  SMOKE DETECTOR
 -  FIRE ALARM BELL
 -  BREAK GLASS CALL POINT
 -  ILLUMINATED EMERGENCY EXIT SIGN CONNECTED TO FIRE ALARM SYSTEM



GROUND FLOOR



TITLE:	EXISTING & PROPOSED FLOOR PLAN
PROPERTY ADDRESS:	19A/21 ARINGTON SQUARE, NORTHAMPTON, NN1 4AE
SCALE:	1:50



Bill Edwards

From: Bryan David <david.bryan@northants.pnn.police.uk>
Sent: 04 September 2013 16:08
To: Bill Edwards; Louise Faulkner
Subject: 19A/21 Abington Square.

Dear Mr Edwards and Mrs Faulkner,

I act on behalf of the Chief Officer of Police, Mr Lee.

Northamptonshire Police are formally objecting to the grant of a Premises Licence for the above address.

Firstly the applicant has filled in the times for the provision of Late Night Refreshment incorrectly and in addition the four Licensing Objectives have not been addressed (boxes are blank).

Northamptonshire Police cannot properly assess whether the licensing objectives will be undermined due to the lack of information contained within the application.

Regards

David Bryan Constable 113 | Licensing Officer | Northamptonshire Police

☎ Telephone 101 Ext 8634 | 📠 Facsimile 01604 632645 |


✉ Email david.bryan@northants.police.uk

📍 Address First Floor, 14 Fish Street, Northampton. NN1 2AA

| Working in Partnership for Safer Stronger Communities |

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 Please consider the environment before printing this email. Thank you ...

NORTHAMPTONSHIRE POLICE - Visit us at <http://www.northants.police.uk>

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Northamptonshire Police monitors Internet and email activity.

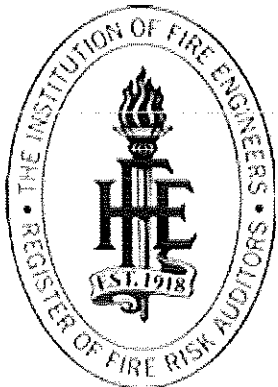
From: Ian Grieve <IGrieve@northantsfire.org.uk>
Sent: 28 August 2013 16:09
To: Isobel Thompson
Subject: RE: NBC - Licensing Act 2003 - Application for a Premises Licence - Fresh, 19A-21 Abington Square

Isobel, thank you and we have no representations.

Regards
Ian Grieve
Fire Protection Officer

Northamptonshire Fire And Rescue Service
Walker House
3 Pondwood Close
Moulton Park
Northampton
NN3 6RT

Tel – 01604 797104
Fax – 01604 797140
Email – igrieve@northantsfire.org.uk



From: Isobel Thompson [<mailto:isobelthompson@northampton.gov.uk>]
Sent: 28 August 2013 15:22
To: Children & Family Service; Health Board; Lee Hunter; licensing-mailbox; Paul Mallard; Planning; Trading Standards
Cc: Environmental Health Admin
Subject: NBC - Licensing Act 2003 - Application for a Premises Licence - Fresh, 19A-21 Abington Square

On 27th August we received the above application. Last date for representations is 24th September 2013.

Regards

Isobel Thompson
Licensing Administration
Northampton Borough Council

Tel 01604 837020

Bill Edwards

From: Bill Edwards
Sent: 25 September 2013 13:34
To: 'licensing-NRCS@northamptonshire.gov.uk'; 'stephen.horsley@northants.nhs.uk'; 'licensing-mailbox@northantsfire.org.uk'; Lee Hunter; 'licensing@northamptonshire.gov.uk'; 'liquorlicensing@northants.police.uk'; Environmental Health Admin; Paul Mallard; Neil Polden
Subject: Sub Committee Hearing Fresh 19/21 Abington Square, Northampton

Dear All,

A sub committee has been arranged to hear the premises licence application of Fresh, 19/21 Abington Square, following an objection by the Police. I would like to let you know that it has come top our attention that there is a discrepancy regarding the applicant. The application names a Mr David Nizialek as the applicant, but the newspaper advertisement states a Mr Pawel Cander as the applicant.

After communicating with the 'applicants' I can confirm it is Mr Cander who is the applicant. Mr Nizialek is a director in the business.

On this occasion we are willing to let this go as there is a hearing scheduled anyway where the matter will be raised but felt it important to let you know.

Kind Regards

Bill Edwards
Senior Licensing Officer
Northampton Borough Council
01604 838986

Bill Edwards

From: Ian Grieve <IGrieve@northantsfire.org.uk>
Sent: 27 September 2013 07:10
To: Bill Edwards
Subject: FW: Sub Committee Hearing Fresh 19/21 Abington Square, Northampton

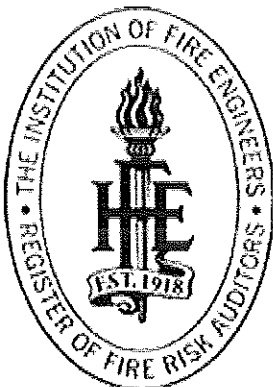
From: licensing-mailbox
Sent: 27 September 2013 07:07
To: 'Bill Edwards'
Subject: RE: Sub Committee Hearing Fresh 19/21 Abington Square, Northampton

Bill thank you

Regards
Ian Grieve
Fire Protection Officer

Northamptonshire Fire And Rescue Service
Walker House
3 Pondwood Close
Moulton Park
Northampton
NN3 6RT

Tel – 01604 797104
Fax – 01604 797140
Email – igrieve@northantsfire.org.uk



From: Bill Edwards [<mailto:bedwards@northampton.gov.uk>]
Sent: 25 September 2013 13:34
To: 'licensing-NRCS@northamptonshire.gov.uk'; 'stephen.horsley@northants.nhs.uk'; licensing-mailbox; Lee Hunter; 'licensing@northamptonshire.gov.uk'; 'liquorlicensing@northants.police.uk'; Environmental Health Admin; Paul Mallard; Neil Polden
Subject: Sub Committee Hearing Fresh 19/21 Abington Square, Northampton