NORWICH City Council
Licensing Office
City Hall
St. Peters Street

Application to vary a premises licence to specify an individual as designated premises supervisor 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 Ali Calt being the premises licence holder, apply to vary (full name(s) of premises licence holder) a premises licence to specify the individual named in this application as the premises supervisor under section 37 of the Licensing Act 2003

Premises licence number				
05/02008	PREMTR.			

Norwich NR2 1NH

licensing@norwich.gov uk

Part 1 – Premises details	
Postal address of premises or, if none, ordnance	survey map reference or description
31. St. Stephens Rd	
•	
Post town NORWICH	Post code NRIZSP
Telephone number (if anv)	

Description of premises (please read guidance note 1)

Off liceans inc

Niwi-mar tet-

Tull of and designated enomines are switten	
Full name of proposed designated premises supervisor	
Mehmet Sert	
Personal licence number of proposed designated premises supervisor and issuing author that licence (if any)	ity of
09/01681/PERS.	
Full name of existing designated premises supervisor (if any)	
Mehmet Sert. All Capti	
Please tio	:k 🕶 yes
would like this application to have immediate effect under section 38 of the Licensing Act 20	)03 🔟
have enclosed the premises licence or relevant part of it	
(If you have not enclosed the premises licence, or relevant part of it, please give reasons why	n <b>ot</b> )
Reasons why I have failed to enclose the premises licence or relevant part of it	
·	
Please tic	k ✓ yes
<ul> <li>I have made or enclosed payment of the fee</li> <li>I will give a copy of this application to the chief officer of police</li> </ul>	
I have enclosed the consent form completed by the proposed premises	Ī
supervisor  I have enclosed the premises licence, or the relevant part of it or explanation	
I will give a copy of this form to the existing premises supervisor, if any	
<ul> <li>I understand that if I do not comply with the above requirements my application will be rejected</li> </ul>	

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO 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 3 – Signatures (please read guidance note 2)

signature of applicant or applicant's solicitor or other duty authorised agent (see guidance note 5). If signing on behalf of the applicant please state in what capacity.
Signature
Date. 6, 2013,
Capacity
For joint applications signature of 2 <sup>nd</sup> applicant or 2 <sup>nd</sup> applicant's solicitor or other authorised agent (please read guidance note 4). If signing on behalf of the applicant please state in what capacity.
Signature
Date Capacity
Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 5)  31. St. Stephens Red.
Post town No Lwicht Telephone number (if any)
If you would prefer us to correspond with you by e-mail your e-mail address (optional)

#### **Guidance notes**

- 1.
- Describe the premises. For example the type of premises it is.

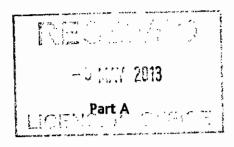
  The application form must be signed.

  An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.

  Where there is more than one applicant, both applicants or their respective agents must sign 2. 3.
- 4. the application form.
- 5. This is the address which we shall use to correspond with you about this application.



Licensing Office
City Hall
St. Peters Street
Norwich
NR2 1NH
licensing@norwich.gov.uk



## Consent of individual to being specified as premises supervisor

[full name of prospective premises supervisor]  of Alleast All
licence, details of which I set out below.
Personal licence number 09/0/68//PERS [insert personal licence number, if any] Personal licence issuing authority
signed anne (please print) dated
PART B
Consent of premises licence holder to transfer
I/we Ali Capt [full name of premises licence holder(s)] the premises licence holder of premises licence number OS 10 2008 [insert PRIMIR premises licence number] relating to MINI INVALLE.  [name and address of premises to which the application relates] hereby give my consent for the transfer of premises licence number as 102 2008 [insert premises licence number] to MENNO LECT [full name of transferee].
: ;ned കുടടുംame (please print] യപ്രo.ടdated



Mr Ian Streeter Licensing Manager Norwich City Council St Peters Street Norwich

Date: 10th May 2013

Dear Mr Streeter

The Licensing Team	_
Bethel Street Police Station	
Norwich	
Norfolk	
NR2 1NN	_
Tel:	
Fax:	
Email: <u>lic</u>	<u>.k</u>
www.norfc	
Non-Emer	

### Re: Application to transfer & vary DPS - St Stephens Off Licence

I can confirm that we have received a copy of the application to transfer the premises and vary DPS for St Stephens Off Licence, 31 St Stephens Road Norwich to Mr Mehmet Sert.

The applicant is a Mr Mehmet Sert who has been involved in managing the premises for some time. The Police wish to object to this application as it is felt that this person should not be allowed to be the DPS and Premises Licence Holder due to previous issues with him and the running of the shop.

The Premises Licence is currently being reviewed by trading standards due to underage sales and counterfeit liquor at the shop and Mr Sert has had the most involvement in this premises and admitted to being the owner during this time. In addition to this, Mr Sert has previously received a fixed penalty notice for selling to an underage person.

I have been unable to contact Mr Sert to obtain his personal details in order to carry out Police checks to establish if there are any other additional reasons for the objection.

Due to evidence submitted by Trading Standards for the review, the Police have no other option but to object to this transfer and vary DPS taking place. I have no confidence that Mr Sert is capable of running the shop in accordance with the Law, the Police request that the licensing committee decide as to whether it is appropriate for this person to hold the licence and be responsible for authorising the sales of alcohol.

Please accept this representation initially to object to the applications and further additional representation prior to the hearing will be submitted.

Regards

Yours faithfully,

Michelle Bartram Licensing Officer





APPENDIX



Citywide Services
Public Protection (Licensing)
City Hall
St Peters Street
Norwich NR2 1NH



Application to transfer 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  (Insert name of applicant)  apply to transfer the premises licence described below under section 42 of the Licensing Act 2003 for the premises described in Part 1 below				
Premises licence number	05/02	2008/PREMTR.		
Part 1 – Premises details				
Postal address of premises or, if none, ordnand 31. St. Stephens Rd	ce survey map	p reference or description		
Post town Nonucles	Postgode	VLI 3SP1.		
Telephone number at premises (if any)	<del></del>	, ,		
Please give a brief description of the premises				
off wesing				
Mini. Market				
Name of current premises licence holder				
$\alpha = \alpha$				

Part 2 - Applicant details

In what capacity are you applying for the premises licence to be transferred to you?

a) an individual or individuals\*

Please tick ☑ yes

please complete section (A)

<ul><li>b) a person other than an individual *</li><li>i. as a limited company</li></ul>	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)				
c) a recognised club	please complete section (B)				
d) a charity	please complete section (B)				
e) the proprietor of an educational establishme	nt please complete section (B)				
f) a health service body	please complete section (B)				
g) an individual who is registered under Part 2 Care Standards Act 2000 (c14) in respect of an independent hospital in Wales					
ga) a person who is registered under Chapter 2 1 of the Health and Social Care Act 2008 (with meaning of that Part) in respect of an independent hospital in England	hin the please complete section (B)				
h) the chief officer of police of a police force England and Wales	n please complete section (B)				
*If you are applying as a person described in (a) or (b) please confirm:					
	Please tick ☑ yes				
<ul> <li>I am carrying on or proposing to carry or of the premises for licensable activities;</li> </ul>					
I am making the application pursuant to a	a				
o statutory function or					
o a function discharged by virtue of	of Her Majesty's prerogative				
(A) INDIVIDUAL APPLICANTS (fill in as app	olicable)				
Mr Mrs Miss Miss M	Other title (for example, Rev)				
Surname	First names				
sert	Mehmet.				

I am 18 years old	or over				/	
Current postal address if different from premises address	79 Pla Nez Noem	ntsm 2NJ	an d	ه∫د .		
Post town			Post code			•
Daytime contact t	elephone number			_		
E-mail address (optional)						
SECOND INDIV	IDUAL APPLICAN	NT (fill in as	applicable)			
Mr Mrs	Miss	☐ Ms	s 🗆	Other ti	tle mple, Rev)	
Surname			First names			
					· .	
I am 18 years old	or over			Pl	ease tick ☑ yes ]	
Current postal address if different from premises address					,	
Post town			Post code			
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	
Address	
	•
Desistant much su (sub one and limbte)	
Registered number (where applicable)	
Description of applicant (for example partnership, company, unincorporated	I aggaziation ata )
Description of applicant (for example partnership, company, unincorporated	i association etc.)
	,
T-11	
Telephone number (if any)	
E-mail address (optional)	
Part 3	
rants	Please tick ☑ yes
	r lease tick in yes
Are you the holder of the premises licence under an interim authority notice	2
And you the notate of the premises needed under all mermit audionty notice	•
Do you wish the transfer to have immediate effect?	ſŪ∕
Do you wish the transfer to have immediate effect?	
If not when would you like the transfer to take effect?	Month Year⊖
	Month Year□
If not when would you like the transfer to take effect?	Month Year□
If not when would you like the transfer to take effect?	
If not when would you like the transfer to take effect?	Month Year□  Please tick ☑ yes
If not when would you like the transfer to take effect?  Day	Please tick ☑ yes
If not when would you like the transfer to take effect?	Please tick ☑ yes
If not when would you like the transfer to take effect?  Day	Please tick ☑ yes

<u> </u>	
If you have not enclosed the consent form referred to above please give the reasons why not. steps have you taken to try and obtain the consent?	What -
	1
	}
Please tick 5	1 yes
If this application is granted I would be in a position to use the premises during the application period for the licensable activity or activities authorised by the licence (see section 43 of the Licensing Act 2003)	
Please tick 5	∄ yes
XI and the combine Beauty	
I have enclosed the premises licence	
If you have not enclosed premises licence referred to above please give the reasons why not.	
	)
-	
•	
·	
·	
I have made or enclosed payment of the fee	
I have enclosed the consent form signed by the existing premises licence holder or      The enclosed the consent form signed by the existing premises licence holder or      The enclosed the consent form signed by the existing premises licence holder or      The enclosed the consent form signed by the existing premises licence holder or      The enclosed the consent form signed by the existing premises licence holder or      The enclosed the consent form signed by the existing premises licence holder or      The enclosed the consent form signed by the existing premises licence holder or      The enclosed	шл
<ul> <li>my statement as to why it is not enclosed</li> <li>I have enclosed the premises licence or relevant part of it or explanation</li> </ul>	
I have sent a copy of this application to the chief officer of police today	
<ul> <li>I understand that if I do not comply with the above requirements my application will be rejected</li> </ul>	

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Part 4 – Signatures (please read guidance note 2)

Signature of applicant or applicant's solicitor or other duly authorised agent (See guidance note 3). If signing on behalf of the applicant please state in what capacity.

Signature				
Date 04/05/13				
Date 04/05/13  Capacity applicant and N	12,200			
For joint applicants signature of second applicant, second applicant's solicitor or other authorised agent (please read guidance note 4). 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 5)				
•				
Post town	Post Code			
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 it is, its general situation and layout and any other information which would be relevant to the licensing objectives.
- 2. The application form must be signed.
- 3. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- 4. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
- 5. This is the address which we shall use to correspond with you about this application.



Licensing Office City Hall St. Peters Street Norwich NR2 1NH licensing@norwich.gov.uk



Consent of individual to being specified as premises supervisor

. , ( )
of Alseath F9 PLANSMAN CLOS NR2 2ND
of Alicapti 79 PLANSMAN CLOS NR2 2NJ
nome 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[type of application]
by .ft.li. Capt
for Nonwood Ministry Manager 1931 1945 Steel 1945 1945 1945 1945 1951 1951 1951 1951
.A.J.f
and any premises licence to be granted or varied in respect of this application made
by Mehmet Sert Iname of applicant
by Mehmet Sect [name of applicant] concerning the supply of alcohol at
. L.L
I also confirm that I am applying for, intend to apply for or currently hold a personal
licence, details of which I set out below.
Parsanal licence number 09/0/68//PEP-C lineart parsanal licence number if any
Personal licence number 09/0/68/PERS [insert personal licence number, if any] Personal licence issuing authority
insert name and address and telephone number of personal licence issuing authority, if
any
signed
ame (please print) dated
<i>(ე.</i> Ң <i>I. И.S</i> dated
•
PART B
Consent of premises licence holder to transfer
consent of premises desired flotder to district
I/we Ali Caft [full name of premises licence holder(s)]
the premises licence holder of premises licence number 05/02008 [insert PRIMIR
premises licence number] relating to MINI macket
31. Stephens Rd. NRI 35P [name and address of
premises to which the application relates] hereby give my consent for the transfer of
premises licence number @s.f.@2.0005Ele.E.m.I.llinsert premises licence number
to ple hme Lerf [full name of transferee].
cianad
signed <del>ಮಿಸಿ.ಸಿ.ಸಿ.ಸಿ.ಸಿ.ಸಿ</del> name (please print]
dated
The second secon