WK/202006711 veps date 20/01/21



Waverley Application for a premises licence Licensing Act 2003 For help contact licensing@waverley.gov.uk Telephone: 01483 523033

\* required information

Section 1 of 21		
You can save the form at any t	time and resume it later. You do not need to be	logged in when you resume.
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference	SWA M&S Farnham	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
Are you an agent acting on behalf of the applicant?		Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.
Applicant Details		ж
* First name	Marks & Spencer Simply Foods Ltd	]
* Family name	As above	]
* E-mail	SWallsgrove@john-gaunt.co.uk	]
Main telephone number	03300584150	Include country code.
Other telephone number		]
Indicate here if the appli	icant would prefer not to be contacted by telep	bhone
Is the applicant:		8
<ul> <li>Applying as a business of</li> <li>Applying as an individual</li> </ul>	or organisation, including as a sole trader al	A sole trader is a business owned by one person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.
Applicant Business	•	
Is the applicant's business registered in the UK with Companies House?	Yes C No	Note: completing the Applicant Business section is optional in this form.
Registration number	04739922	]
Business name	Marks & Spencer Simply Foods Ltd	If the applicant's business is registered, use its registered name.
VAT number	ΝΑ	Put "none" if the applicant is not registered for VAT.
Legal status	Private Limited Company	] .

Continued from previous page		
Applicant's position in the business	Owner/operator	]
Home country	United Kingdom	The country where the applicant's headquarters are.
Registered Address		Address registered with Companies House.
Building number or name	Waterside House, 35	
Street	North Wharf Road	
District		
City or town	London	
County or administrative area		
Postcode	W2 1NW	
Country	United Kingdom	
Agent Details		
* First name	Sarah	
* Family name	Wallsgrove	
* E-mail	SWallsgrove@john-gaunt.co.uk	
Main telephone number	03300584150	Include country code.
Other telephone number		
Indicate here if you wou	ld prefer not to be contacted by telephone	
Are you:		
An agent that is a busine	A sole trader is a business owned by one person without any special legal structure.	
<ul> <li>A private individual actir</li> </ul>	ng as an agent	person without any special regarstractare.
Agent Business		
Is your business registered in the UK with Companies House?	🔿 Yes 💿 No	Note: completing the Applicant Business section is optional in this form.
Is your business registered outside the UK?	🔿 Yes 💿 No	
Business name	John Gaunt & Partners	If your business is registered, use its registered name.
VAT number -	Na	Put "none" if you are not registered for VAT.
Legal status	Partnership	

1

Continued from previous page		
Your position in the business	Client Support Manager	
Home country	United Kingdom	The country where the headquarters of your business is located.
Agent Business Address		If you have one, this should be your official
Building number or name	Units 39-41 Haslar Marine Technology Park	address - that is an address required of you by law for receiving communications.
Street	Haslar Road	
District	1 1	
City or town	Gosport	16 - C
County or administrative area	Hants	
Postcode	PO12 2AG	
Country	United Kingdom	
		,
Section 2 of 21		
PREMISES DETAILS		
	ply for a premises licence under section 17 of th he premises) and I/we are making this applicati of the Licensing Act 2003.	
Premises Address		
Are you able to provide a posta	al address, OS map reference or description of t	he premises?
Address	o reference C Description	
Postal Address Of Premises		
Building number or name	Marks & Spencer, 13	
Street	Old Market Place	
District		
City or town	Farnham	
County or administrative area	Surrey	
Postcode	GU9 7SF	
Country	United Kingdom	
Further Details		
Telephone number	03300584150	
Non-domestic rateable value of premises (£)		

Secti	on 3 of 21		
stated by the	ICATION DETAILS		
In wh	at capacity are you apply	ing for the premises licence?	
	An individual or individuals		
$\times$	A limited company / limi	ted liability partnership	
	A partnership (other than	ו limited liability)	
	An unincorporated assoc	iation	
	Other (for example a stat	utory corporation)	
	A recognised club		
	A charity		
	The proprietor of an edu	cational establishment	
	A health service body		
		ed under part 2 of the Care Standards Act n independent hospital in Wales	
	Social Care Act 2008 in re	ed under Chapter 2 of Part 1 of the Health and espect of the carrying on of a regulated ing of that Part) in an independent hospital in	
	The chief officer of police	of a police force in England and Wales	
Conf	irm The Following		
$\boxtimes$	I am carrying on or propo the use of the premises fo	osing to carry on a business which involves or licensable activities	
	I am making the applicat	ion pursuant to a statutory function	
	I am making the applicat virtue of Her Majesty's pr	ion pursuant to a function discharged by erogative	
Section	on 4 of 21		
NON	INDIVIDUAL APPLICANT	'S	
partn		ddress of applicant in full. Where appropriate give any registered number. In the case of a ure (other than a body corporate), give the name and address of each party concerned. <b>ame</b>	
Name	e	Marks & Spencer Simply Foods Ltd	
Deta	ils		
-	tered number (where cable)	04739922	
Desc	Description of applicant (for example partnership, company, unincorporated association etc)		

Continued from previous page		
Limited		
Address	-	
Building number or name	Waterside House, 35	]
Street	North Wharf Road	
District		
City or town	London	
County or administrative area		
Postcode	W2 1NW	
Country	United Kingdom	
Contact Details		
E-mail	SWallsgrove@john-gaunt.co.uk	
Telephone number	03300584150	
Other telephone number		
* Date of birth	dd mm yyyy	
* Nationality		Documents that demonstrate entitlement to work in the UK
	Add another applicant	]
Section 5 of 21		
OPERATING SCHEDULE		
When do you want the premises licence to start?	21 / 01 / 2021 dd mm yyyy	
If you wish the licence to be valid only for a limited period, when do you want it to end	dd mm yyyy	x
Provide a general description	of the premises	
licensing objectives. Where yo	ses, its general situation and layout and any oth ur application includes off-supplies of alcohol a plies you must include a description of where th	nd you intend to provide a place for
Retail store over one floor with	licensed facilities (off sales)	

Continued from previous page	
If 5,000 or more people are	
expected to attend the premises at any one time,	
state the number expected to	···
attend	
Section 6 of 21	
PROVISION OF PLAYS	
See guidance on regulated enter	rtainment
Will you be providing plays?	
C Yes	No
Section 7 of 21	
PROVISION OF FILMS	
See guidance on regulated enter	rtainment
Will you be providing films?	
C Yes	5 No
Section 8 of 21	
PROVISION OF INDOOR SPORT	ING EVENTS
See guidance on regulated enter	rtainment
Will you be providing indoor spo	orting events?
C Yes	No
Section 9 of 21	
PROVISION OF BOXING OR WR	ESTLING ENTERTAINMENTS
See guidance on regulated enter	tainment
Will you be providing boxing or v	wrestling entertainments?
C Yes 💽	5 No
Section 10 of 21	
PROVISION OF LIVE MUSIC	
See guidance on regulated enter	tainment
Will you be providing live music?	
C Yes	No
Section 11 of 21	
PROVISION OF RECORDED MUS	SIC
See guidance on regulated enter	tainment
Will you be providing recorded n	nusic?
C Yes (	No
Section 12 of 21	
PROVISION OF PERFORMANCES	S OF DANCE
See guidance on regulated enter	tainment
Will you be providing performan	ces of dance?

Continued from previous	page		
Section 13 of 21			
PROVISION OF ANYTH DANCE	ING OF A SIMILAR DESCR	IPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF	
See guidance on regula	ted entertainment		
Will you be providing a performances of dance	nything similar to live musi ?	ic, recorded music or	
C Yes	No		
Section 14 of 21			
LATE NIGHT REFRESH	<b>MENT</b>		
Will you be providing la	te night refreshment?		
C Yes	No		
Section 15 of 21			
SUPPLY OF ALCOHOL	E.		
Will you be selling or su	pplying alcohol?		
Yes	C No		
Standard Days And Ti	mings		
MONDAY		Cive timings in 24 hours clock	
	Start 06:00	Give timings in 24 hour clock. End 00:00 (e.g., 16:00) and only give details for the days	
	Start	End of the week when you intend the premises	
		to be used for the activity.	
TUESDAY			
	Start 06:00	End 00:00	
	Start	End	
WEDNESDAY			
	Start 06:00	End 00:00	
	Start	End	
THURSDAY			
monserri	Start 06:00	End 00:00	
	Start	End	
FRIDAY			
	Start 06:00	End 00:00	
	Start	End	
SATURDAY			
	Start 06:00	End 00:00	
	Start		
	Statt	End	

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Continued from previous page	8		
SUNDAY			
Start	06:00	End 00:00	
Start		End	]
Will the sale of alcohol be for a	consumption:	L	If the sale of alcohol is for consumption on
C On the premises	• Off the premises (	🔿 Both	the premises select on, if the sale of alcohol is for consumption away from the premises select off. If the sale of alcohol is for consumption on the premises and away from the premises select both.
State any seasonal variations			
For example (but not exclusive	ely) where the activity will o	occur on additional da	ays during the summer months.
Non-standard timings. Where column on the left, list below	the premises will be used fo	or the supply of alcoh	ol at different times from those listed in the
For example (but not exclusive	ely), where you wish the acti	tivity to go on longer	on a particular day e.g. Christmas Eve.
State the name and details of t licence as premises supervisor		ish to specify on the	
Name			
First name	r C r r r	1.0	
Family name	. i ,		
Date of birth	dd mm yyyy	٦	

PROPOSED DESIGNATED PREMISES SUPERVISOR CONSENT	
How will the consent form of the proposed designated premises supervisor be supplied to the authority?	
○ Electronically, by the proposed designated premises supervisor	
<ul> <li>As an attachment to this application</li> </ul>	
Reference number for consent DPS CONSENT form (if known)	If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.
Section 16 of 21	
ADULT ENTERTAINMENT	
Highlight any adult entertainment or services, activities, or other entertainme premises that may give rise to concern in respect of children Give information about anything intended to occur at the premises or ancillar	y to the use of the premises which may give
rise to concern in respect of children, regardless of whether you intend childre (but not exclusively) nudity or semi-nudity, films for restricted age groups etc	
NA	ч ,
Section 17 of 21	
HOURS PREMISES ARE OPEN TO THE PUBLIC	
Standard Days And Timings	
MONDAY Start 06:00 End 00:00 Start End End	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.

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r			
Continued from previou	s page		
TUESDAY			
	Start 06:00	End	00:00
	Start	End	
WEDNESDAY			
	Start 06:00	End	00:00
	Start	End	
THURSDAY			
monophi	Start 06:00	End	00:00
	Start	End	
		Liid	
FRIDAY			
	Start 06:00	End	00:00
	Start	End	
SATURDAY			
	Start 06:00	End	00:00
	Start	End	
SUNDAY			
	Start 06:00	End	00:00
	Start	End	
State any seasonal varia	ations		
		tivity will occur on a	additional days during the summer months.
	Where you intend to use mn on the left, list below		e open to the members and guests at different times from
	19		
For example (but not e	xclusively), where you w	ish the activity to g	o on longer on a particular day e.g. Christmas Eve.
Continue da la fac			
Section 18 of 21 LICENSING OBJECTIVE			
	intend to take to promo	ote the four licensin	g objectives:
	ensing objectives (b,c,d,e		Construction of controls
	insing objectives (b,c,d,e	•)	

Continued from previous page...

List here steps you will take to promote all four licensing objectives together.

The company maintains comprehensive regulatory compliance procedures and all aspects of the four licensing objectives are covered by these procedures.

These measures will be in place when this new store opens and include the matters set out in the boxes below.

Our Client Support Manager is named as the DPS but on the grant of the new Licence and before trading, the Licence will be varied to the day to day Store Manager for M&S.

It is very unlikely the store will trade between the hours of 0600 to 0000 but the hours have been applied for to allow some flexibility for peak trading periods such as Christmas when the store may well choose to open earlier or trade later.

b) The prevention of crime and disorder

Digital CCTV will be installed. Data will be retained for a minimum period of 31 days and will be made available to the police for evidential purposes.

c) Public safety

No additional steps required to promote the licensing objectives identified beyond existing statutory duties

d) The prevention of public nuisance

No additional steps required to promote the licensing objectives identified beyond existing statutory duties

e) The protection of children from harm

Staff training to ensure that in case of any doubt whether a purchaser is over the age of 18 to refuse sales of alcohol unless valid identification is produced. Documented staff training regarding their responsibilities within the licensing act.

A Challenge 25 Scheme will be adopted.

Section 19 of 21

NOTES ON DEMONSTRATING ENTITLEMENT TO WORK IN THE UK

Continued from previous page	
Capacity 80000-89999	£56,000.00
Capacity 90000 and over	£64,000.00
* Fee amount (£)	315.00
DECLARATION	
	ce, liable on conviction to a fine up to level 5 on the standard scale, under section 158 of the false statement in or in connection with this application.
I Ticking this box indicat	es you have read and understood the above declaration
This section should be complet behalf of the applicant?"	ted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
* Full name	John Gaunt & Partners
* Capacity	Solicitors
* Date	23 / 12 / 2020
	dd mm yyyy
	Add another signatory
Once you're finished you need	to do the following:
1. Save this form to your compu	
	.uk/apply-for-a-licence/premises-licence/waverley/apply-1 to upload this file and continue
with your application.	
Don't forget to make sure you h	nave all your supporting documentation to hand.
	SUMMARY CONVICTION TO A FINE OF ANY AMOUNT UNDER SECTION 158 OF THE
LICENSING ACT 2003, TO MAI	KE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION
KNOW, OR HAVE REASONABL THEIR IMMIGRATION STATUS CONDITIONS AS TO EMPLOY ASYLUM AND NATIONALITY	TION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY LE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO MENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN
OFFENCE WHERE THEY DO SO IS DISQUALIFIED	O IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE

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