



The Licensing Team
Environmental Health & Housing
North Devon Council
PO BOX 379, Barnstaple, Devon,
EX32 2GR

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APPLICATION FOR A PREMISES LICENCE TO BE GRANTED UNDER THE LICENSING ACT 2003

Form Ref: LA03/PL 9

Privacy Notice – privacy & data protection

North Devon Council, the Data Controller, collects personal information when you contact us for the licensing services we provide. We will use this information to provide these services, such as the granting of a licence, permit, registration or receipt of a notice.

We may need to share your information with other departments in North Devon Council or external/ third parties, where this is necessary to perform our public functions & services as provided by law.

For more information as a Data Subject regarding privacy & data protection, including how we manage your personal information, data retention and your rights, please see our Privacy Notice on the website: www.northdevon.gov.uk/privacy

If you require this document in an alternative format, please contact us.

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 or typed in black ink. Use additional sheets if necessary. You should keep a copy of the completed form for your records.

**APPLICATION FOR A PREMISES LICENCE TO BE GRANTED UNDER THE
LICENSING ACT 2003**

I/We* **CASEY REED**
[insert name(s) of applicant(s)]

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 name and address of premises or, if none, Ordnance Survey map reference or description MAD MATTER PLANT BASED BISTRO AND LOUNGE BAR. 8 AND 10 QUEEN'S WALK, BEAR STREET	
Post Town BARNSTABLE	Postcode EX32 7DA
Telephone number at premises (if any) N/A	8 AND 10
Non-domestic rateable value of premises £	UNKNOWN COMBINED £6,150

Part 2 – Applicant details	
Please state whether you are applying for a premises licence as Please select 'X'	
a) an individual/individuals*	<input checked="" type="checkbox"/> please complete section (A)
b) a person other than an individual*	
i. as a limited company/limited liability partnership	<input type="checkbox"/> please complete section (B)
ii. as a partnership (other than limited liability)	<input type="checkbox"/> please complete section (B)
iii. as an unincorporated association, or	<input type="checkbox"/> please complete section (B)
iv. other (for example a statutory corporation)	<input type="checkbox"/> please complete section (B)
c) a recognised club	<input type="checkbox"/> please complete section (B)
d) a charity	<input type="checkbox"/> please complete section (B)
e) the proprietor of an educational establishment	<input type="checkbox"/> please complete section (B)
f) a health service body	<input type="checkbox"/> 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	<input type="checkbox"/> 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	<input type="checkbox"/> please complete section (B)

h) the chief officer of police of a police force in please complete section (B) England and Wales

* If you are applying as a person described in (a) or (b) please confirm:

- 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)

Title: Mr Mrs Miss Ms Dr Other (please specify)

Surname REED

Forenames CACAV JAYNE

Date of birth , am 18 years old or over. Please select 'X' YES NO

Nationality WHITE BRITISH

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)

SECOND INDIVIDUAL APPLICANT (if applicable)

Title: Mr Mrs Miss Ms Dr Other (please specify)

Surname

Forenames

Date of birth I am 18 years old or over. Please select 'X' YES NO

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 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

Address

Post Town

Postcode

Registered number (where applicable)

Description of applicant (for example partnership, company, unincorporated association etc)

Telephone number (if any)

E-mail address (optional)

Part 3 – Operating Schedule

When do you want the premises licence to start? Day 17 Month 06 Year 2023 *pk*

If you wish the licence to be valid only for a limited period, when do you want it to end? Day Month Year

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

Please give a general description of the premises (please read guidance note 1)

THE PREMISES IS TWO SMALL SHOP UNITS SIDE BY SIDE, ONE SIDE IS A BISTRO, WITH A KITCHEN SELLING FOOD AND DRINK AND THE OTHER SIDE IS A BAR SELLING ALCOHOL AND SOME FOOD. I ATTACH A DIAGRAM.

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)

(please select 'x')

Provision of regulated entertainment

- 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 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)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)	
Mon				
Tue				
Wed			State any seasonal variations for performing plays (please read guidance note 5)	
Thur				
Fri			Non standard timings. Where you intend to use the premises for the performance of plays at different times from those listed in the column on the left, please list (please read guidance note 6)	
Sat				
Sun				

B

Films Standard days and timings (please read guidance note 7)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)	
Mon				
Tue				
Wed			State any seasonal variations for the exhibition of films (please read guidance note 5)	
Thur				
Fri			Non standard timings. Where you intend to use the premises for the exhibition of films at different times from those listed in the column on the left, please list (please read guidance note 6)	
Sat				
Sun				

C

Indoor sporting events Standard days and timings (please read guidance note 7)			Please give further details (please read guidance note 4)
Day	Start	Finish	State any seasonal variations for indoor sporting events (please read guidance note 5) Non standard timings. Where you intend to use the premises for indoor sporting events at different times from those listed in the column on the left, please list (please read guidance note 6)
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 3) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4) State any seasonal variations for boxing or wrestling (please read guidance note 5) Non standard timings. Where you intend to use the premises for boxing or wrestling at different times from those listed in the column on the left, please list (please read guidance note 6)
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

E

Live music Standard days and timings (please read guidance note 7)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)	
Mon				
Tue				
Wed			State any seasonal variations for the performance of live music (please read guidance note 5)	
Thur				
Fri			Non standard timings. Where you intend to use the premises for the performance of live music at different times from those listed in the column on the left, please list (please read guidance note 6)	
Sat				
Sun				

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)	
Mon				
Tue				
Wed			State any seasonal variations for playing recorded music (please read guidance note 5)	
Thur				
Fri			Non standard timings. Where you intend to use the premises for the playing of recorded music at different times from those listed in the column on the left, please list (please read guidance note 6)	
Sat				
Sun				

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 type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)	
Mon				
Tue				
Wed			State any seasonal variations for the performance of dance (please read guidance note 5)	
Thur				
Fri			Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times from those listed in the column on the left, please list (please read guidance note 6)	
Sat				
Sun				

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	Will the entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Mon			Please give further details here (please read guidance note 4)	
Tue				
Wed			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)	
Thur				
Fri			Non standard timings. Where you intend to use the premises for this entertainment of a similar description to that falling within (e), (f) or (g) at different times from those listed in the column on the left, please list (please read guidance note 6)	
Sat				
Sun				

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 type="checkbox"/>
				Outdoors <input type="checkbox"/>
				Both <input type="checkbox"/>
			Please give further details here (please read guidance note 3)	
Day	Start	Finish	<p>State any seasonal variations for the provision of late night refreshment (please read guidance note 5)</p> <p>Non standard timings. Where the you to use the premises for the supply of alcohol at different times from those listed in the column on the left, please list (please read guidance note 6)</p>	
Mon				
Tue				
Wed				
Thur				
Fri				
Sat				
Sun				

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"/>
			State any seasonal variations (please read guidance note 5)	
* Day	Start	Finish	<p>NO SEASONAL VARIATIONS.</p> <p>Non standard timings. Where you intend to use the premises for the supply of alcohol at different times from those listed in the column on the left, please list (please read guidance note 6)</p>	
Mon				
Tue	11 AM	21.30 10:30pm		
Wed	11 AM	21.30 10:30pm		
Thur	11 AM	21.30 10:30pm		
Fri	11 AM	22.00 10:30pm		
Sat	11 AM	22.00 10:30pm		
Sun	12pm	16.00 4:30pm		

* Hours confirmed by telephone with PF

State the name and details of the individual whom you wish to specify on the licence as premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name **CASEY JAYNE REED**

Date of birth

Address

Post Town

Postcode

Personal Licence number (if known) **NDEVPA 2675**

Issuing licensing authority (if known) **NORTH DEVON COUNCIL**

K

Please highlight any adult entertainment or services, activities, or 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)

NO OTHER ACTIVITIES WILL BE AT THIS PREMISES, OTHER THAN ALREADY STATED.

L

Hours premises are open to the public

Standard days and timings (please read guidance note 7)

Day	Start	Finish
Mon		
* Tue	11 AM	22.00 10.30 pm
Wed	11 AM	22.00 10.30 pm
Thur	11 AM	22.30 10.30 pm
Fri	11 AM	22.30 10.30 pm
Sat	11 AM	22.30 10.30 pm
Sun	12 pm	4.30 pm 11.30 pm

State any seasonal variations (please read guidance note 5)

THERE WILL BE NO SEASONAL VARIATIONS.

Non standard timings. Where you intend to use the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 6)

PRIVATE FUNCTIONS THAT ARE BOOKABLE ON A SUNDAY, e.g SMALL PARTYS OF 12-15 FOR BABY SHOWERS, BIRTHDAY MEALS. MUST BE BOOKED IN ADVANCE, OTHERWISE WILL BE SHUT.

M

Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)

PLEASE SEE ATTACHED PIECE OF PAPER.

b) The prevention of crime and disorder

PLEASE SEE ATTACHED PIECE OF PAPER.

c) Public safety

PLEASE SEE ATTACHED PIECE OF PAPER.

d) The prevention of public nuisance

PLEASE SEE ATTACHED PIECE OF PAPER.

e) The protection of children from harm

PLEASE SEE ATTACHED PIECE OF PAPER.

Checklist

Please tick ✓

- I have made or enclosed payment of the fee £190-00
- I have enclosed the plan of the premises
- I have sent copies of this application and plan to the 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

[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 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 11/06/2022

Capacity OWNER

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

Part 5 – Contact name (where not previously given) and postal address for correspondence associated with this application
(please read guidance note 14)

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, 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. In terms of specific regulated entertainments please note that:
 - Plays: no licence is required for performances between 08:00 and 23.00 on any day, provided that the audience does not exceed 500.
 - Films: no licence is required for 'not-for-profit' film exhibition held in community premises between 08.00 and 23.00 on any day provided that the audience does not exceed 500 and the organiser (a) gets consent to the screening from a person who is responsible for the premises; and (b) ensures that each such screening abides by age classification ratings.
 - Indoor sporting events: no licence is required for performances between 08.00 and 23.00 on any day, provided that the audience does not exceed 1000.
 - Boxing or Wrestling Entertainment: no licence is required for a contest, exhibition or display of Greco-Roman wrestling, or freestyle wrestling between 08.00 and 23.00 on any day, provided that the audience does not exceed 1000. Combined fighting sports – defined as a contest, exhibition or display which combines boxing or wrestling with one or more martial arts – are licensable as a boxing or wrestling entertainment rather than an indoor sporting event.
 - Live music: no licence permission is required for:
 - a performance of unamplified live music between 08.00 and 23.00 on any day, on any premises.
 - a performance of amplified live music between 08.00 and 23.00 on any day on premises authorised to sell alcohol for consumption on those premises, provided that the audience does not exceed 500.
 - a performance of amplified live music between 08.00 and 23.00 on any day, in a workplace that is not licensed to sell alcohol on those premises, provided that the audience does not exceed 500.
 - a performance of amplified live music between 08.00 and 23.00 on any day, in a church hall, village hall, community hall, or other similar community premises, that is not licensed by a premises licence to sell alcohol, provided that (a) the audience

CONTINUED FROM PAGE 11 SECTION M.

4 LICENSING OBJECTIVES.

A - THE PREVENTION OF CRIME AND DISORDER -
SEE SECTION B.

PUBLIC SAFETY -
SEE SECTION C.

THE PREVENTION OF PUBLIC NUISANCE -
SEE SECTION D.

THE PROTECTION OF CHILDREN FROM HARM -
SEE SECTION E.

SECTION B -

THE PREVENTION OF CRIME AND DISORDER -

A COMPREHENSIVE COLOUR C.C.T.V SYSTEM
MUST BE PUT IN PLACE AND BE MAINTAINED AND
CHECKED REGULARLY.

ALL EXIT AND ENTRY AREAS MUST BE COVERED
BY THE C.C.T.V SYSTEM.

THERE WILL BE NO SERVING CUSTOMERS WHO
SEEM TO BE INTOXICATED.

THERE WILL BE NO DRUG USE ALLOWED ON THE
PREMISES.

THE LOUNGE BAR LAYOUT WILL PREVENT OVER-
CROWDING FOR LESS CHANCE OF CONFLICT,
CRIME / DISORDER.

CRIME PREVENTION NOTICES MUST BE DISPLAYED IN THE WINDOW.

THERE WILL BE NO IRRESPONSIBLE PROMOTIONS THAT MAY LEAD TO EXCESSIVE CONSUMPTION OF ALCOHOL.

ALL INCIDENTS OF CRIME AND DISORDER WILL BE LOGGED APPROPRIATELY AND REPORTED AS NECESSARY.

ALL STAFF MUST BE TRAINED IN ALL ABOVE ACTIONS. STAFF WILL BE ALSO TRAINED TO -

- CHALLENGE 21 - CHALLENGE 21 SIGN MUST BE SITUATED ON THE TILL.

I.D EXCEPTED WILL BE

A PHOTO DRIVING LICENSE.

A PASSPORT

AND CARD WITH THE PASS HOLOGRAM ON IT.

IF NONE OF THE ABOVE IS PRESENTED THEN THE SALE OF ALCOHOL WILL BE REFUSED. WHEN THE SALE OF ALCOHOL IS REFUSED THIS WILL BE LOGGED DOWN IN THE LOG/INCIDENT BOOK.

THERE WILL BE TRAINING TO SPOT INTOXICATED CUSTOMERS, AND TO REFUSE SERVICE.

THERE WILL BE TRAINING ON ACTIONS TO TAKE IN AN EMERGENCY.

THERE WILL BE TRAINING ON HOW TO USE THE INCIDENT /LOG BOOK, WHAT INFO IS NEEDED, TIME, DATE, NATURE OF INCIDENT ETC AND WILL BE KEPT ON THE PREMISES.

CONTINUED FROM PAGE 11 SECTION M.

4 LICENSING OBJECTIVES CONTINUED -

SECTION C -

PUBLIC SAFETY -

PUBLIC SAFETY WILL BE MONITORED BY C.C.T.V., ANY AND ALL INCIDENTS INCLUDING VIOLENCE, REMOVAL OF DRUGS AND WEAPONS SHALL BE LOGGED AND REPORTED AS NECESSARY TO THE APPROPRIATE AUTHORITIES AND OR EMERGENCY SERVICES.

THERE WILL BE NO SERVING CUSTOMERS WHO SEEM TO BE INTOXICATED.

THERE WILL BE NO DRUG USE PERMITTED ON THE PREMISES.

NO OVER-CROWDING WILL BE PERMITTED IN THE LOUNGE BAR.

APPROPRIATE TRAINING TO BE GIVEN TO ALL MEMBERS OF STAFF TO CARRY OUT ALL OF THE ABOVE.

SECTION D -

THE PREVENTION OF PUBLIC NUISANCE -

KEEPING NOISE LEVEL TO A MINIMUM.

THERE WILL BE NO EXCESSIVELY LOUD MUSIC BEING PLAYED.

ONCE A MONTH THERE WILL BE AN OPEN MIC NIGHT WITH NO AMPLIFIERS ONLY ACOUSTIC GUITARS.

OPEN MIC NIGHT WILL ONLY RUN ONCE A MONTH FROM 7pm to 9:30pm.

ONLY LOW LEVEL BACKGROUND MUSIC WILL BE PLAYED IN THE LOUNGE BAR DAILY.

CUSTOMERS WILL BE REMINDED TO BE QUIET WHEN LEAVING THE LOUNGE BAR AT CLOSING.

OUTSIDE SEATING WILL BE REMOVED AT 9:30 PM DAILY.

CUSTOMERS WHO ARE SEEN TO BE REOFFENDERS OF NUISANCE SHALL BE EJECTED FROM THE PREMISES INDEFINATELY.

ALCOHOL WILL NOT BE SERVED TO ALREADY INTOXICATED CUSTOMERS.

ALL MEMBERS OF STAFF WILL BE TRAINED IN THE ABOVE ACTIONS, AND LOGGING AND REPORTING.

SECTION E -

PROTECTION OF CHILDREN FROM HARM -

NO CHILDREN UNDER THE AGE OF 18 WILL BE PERMITTED INTO THE LOUNGE BAR, AT ANY TIME.

CHILDREN WILL BE PERMITTED INTO THE BISTRO WITH AN ADULT.

ALCOHOL WILL BE LIMITED FOR ADULTS WHO ARE ACCOMPANIED BY YOUNG CHILDREN.

SECTION E CONTINUED -

PROTECTION OF CHILDREN FROM HARM -

CHILDREN WILL BE PERMITTED INTO THE BISTRO ACCOMPANIED BY AN ADULT WHO IS EATING A SUBSTANTIAL MEAL IF CONSUMING ALCOHOL BETWEEN THE HOURS OF 11AM AND 9PM.

ANY INCIDENTS CONCERNING CHILDREN SHALL BE LOGGED IN LOG / INCIDENT BOOK AND REPORTED TO THE APPROPRIATE AUTHORITIES.

OTHER POLICIES THAT WILL BE IN PLACE -

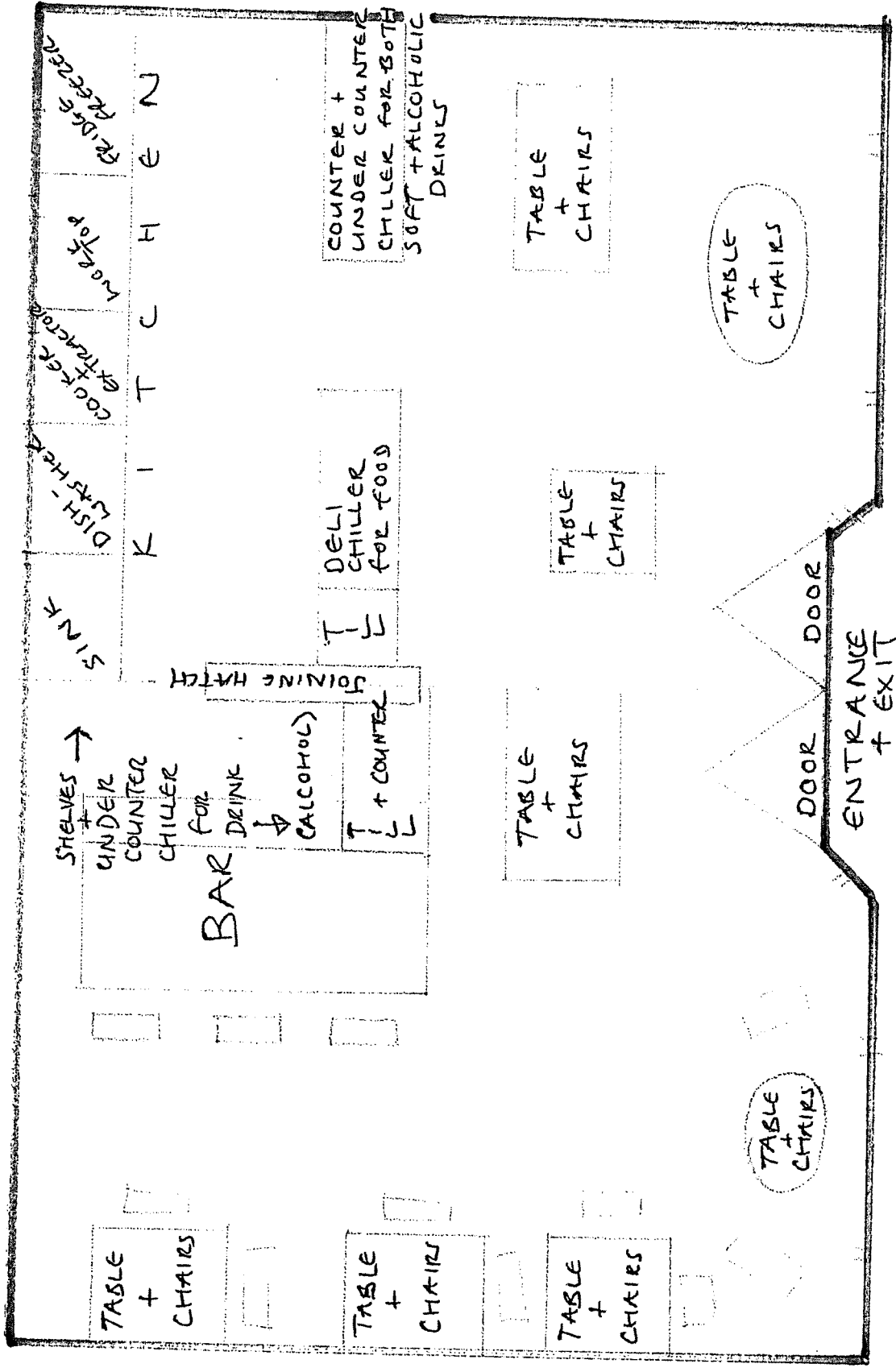
ALCOHOL WILL ONLY BE SERVED IN THE BISTRO ALONG SIDE FOOD ORDERS AND NOT ON ITS OWN.

LOGS TO BE KEPT :-

- DISORDER, VIOLANCE OR/AND ANTI-SOCIAL BEHAVIOUR.
- ALL CRIMES REPORTED TO US.
- ALL CRIMES REPORTED TO POLICE.
- ALL CUSTOMERS THROWN OUT / EJECTED.
- ANY COMPLAINTS RECEIVED.
- SEIZURE OF DRUGS / WEAPONS.
- FAULTS IN C.C.T.V.
- ANY / ALL VISITS BY RESPONSIBLE LOCAL AUTHORITY OR EMERGENCY SERVICES.

8 and 10 QUEEN'S WALK, BEAR STREET, BARNSTAPLE, EX32 7DA

THE MAD
HATTERS
PLANT
BASED
BISTRO
AND
LOUNGE
BAR



OUTSIDE SEATING



The Licensing Team
Environmental Health & Housing
North Devon Council
PO BOX 379, Barnstaple, Devon,
EX32 2GR

Contact Details:
Tel: 01271 388870
Fax: 01271 388328
Email: licensing@northdevon.gov.uk
Web: www.northdevon.gov.uk/licensing

CONSENT OF INDIVIDUAL TO BEING SPECIFIED AS PREMISES SUPERVISOR

Form Ref: LA03/PL 14A

Data Protection

North Devon Council is the Data Controller.

Your personal information will be held and used in accordance with the requirements of the Data Protection Act 1998. We will use the information you have provided in connection with the administration of Licensing.

We may lawfully disclose information to other public sector agencies to:

- prevent or detect fraud and any other crime;
- support national fraud initiatives;
- protect public funds;
- progress your request for service.

We may also use basic information about you, e.g name and address, in other areas of service provision at North Devon Council if this:

- helps you to access our services more easily;
- promotes the more efficient and cost-effective delivery of services;
- helps us to recover monies that you owe us.

We will not use your personal information in a way that may cause you unwarranted detriment.

For further information regarding the National Fraud Initiative, please visit the Council's website – www.northdevon.gov.uk/fairprocessingnotice

If you require this document in an alternative format, please contact us.

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

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CONSENT OF INDIVIDUAL TO BEING SPECIFIED AS
PREMISES SUPERVISOR

Details

I, CASEY JAYNE REED
[full name of prospective premises supervisor]

of 11, BRISTOL ROAD, BARNSTAPLE, DEVON EX32 7DA.
[home 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

A PREMISES LICENCE.
[type of application]

relating to premises licence

[number of existing licence, if any]

for MAD HATTER PLANT BASED BISTRO AND LOUNGE
8 AND 10 QUEENS WALK, BEAR STREET, BARNSTAPLE EX32 7DA.
BAR.
[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by

CASEY JAYNE REED
[name of applicant]

concerning the supply of alcohol at

8 AND 10 QUEENS WALK, BEAR STREET,
BARNSTAPLE, DEVON EX32 7DA.
[name and address of premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to

apply for or currently hold a personal licence, details of which I set out below.

Personal Licence number NDEVPA2675

[insert personal licence number, if any]

Personal Licence issuing authority NORTH DEVON COUNCIL - 01271 388415
[insert name and address and telephone number of personal licence issuing authority, if any]

THE LICENCING TEAM, LYNTON HOUSE, COMMERCIAL ROAD
Signed [Signature] BARNSTAPLE DEVON EX3 1DG

Name (please print) CASEY, REED

Date 11/6/2022

