

RECEIVED

21 FEB 2020

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 George Hadjiyiannis

(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 161 Ashley Road			
Post town	Hale	Postcode	WA15 9SD

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£17,250

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/limited liability partnership please complete section (B)
- ii as a partnership (other than limited liability) 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 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 (by ticking yes to one box below):

- 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 checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname Hadjiyanis			First names George		
Date of birth 22/08/1985		I am 18 years old or over <input checked="" type="checkbox"/>		Please tick yes	
Nationality British Citizen					
Current residential address if different from premises address		152 Manchester Road			
Post town	Wilmslow			Postcode	SK9 2JW
Daytime contact telephone number			07904214984		
E-mail address (optional)		info@thesymposium.co.uk			
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)					

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		
Date of birth		I am 18 years old or over		<input type="checkbox"/>	Please tick yes
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 residential 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
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?

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

Current situation of 161 Ashley Rd Hale

- *The venue has been closed since April 2019
- *The current landlord has approached The Symposium brand Wilmslow as a preferred tenant as he believes their style of operation and customer base is well suited for his venue
- * The Symposium as a company agree that with 4 years trading in the current venue in Wilmslow and with members of the team (including security and management) well established we are ready to open a second location
- * The current situation of 161 Ashley Road is a small 350sft shop unit at ground level. Inside the shop unit there are double doors with a double staircase leading into the basement which is 2500 sqft and a double fire escape leading back up to ground level.
- * The premises is fully fitted and approved to operate as a night club by the local fire department
- * We believe the former premises was originally successful as both "one six one" cocktail bar for multiple years and then " suburbia " for a further number of years.
- * The *suburbia* brand then turned into *club arvinia* which did not work due to its nightclub approach and attracting a younger market leading to violence problems, low average spend and short trading hours. The venue closed after less than one year.

The Symposium's proposed operation should licensing variations be approved

- *the Symposium will trade as predominantly a cocktail bar with an average age group of 35-40
- * It will operate with its knowledge gained from its Wilmslow location on maximising support of the Licensing objectives.
 - (-operating a strict no drugs policy,
 - regular security members that will not tolerate any form of abuse or violence towards staff or members of the public
 - the style and ethos of operation will be the same as our Wilmslow location. Warm, professional, safe drinking environment for after dinner socialites and private parties.
 - the style of cocktail bar will be relaxed lounge bar environment with piano to start followed by a more party background old soul/ disco music and saxophone.
 - as our Wilmslow location does we will welcome local staff from other bar and

restaurants that have finished work and want to enjoy post work drinks. (15% of our trade)

- we will embrace a members scheme that we currently have. This is a membership given to regular guests, guests that have proven to be well disciplined and drink safely. This allows the security team to know who new guests are and influence their decision on allowing entry for the first time.
- we will work well with the local authorities and other drinking establishments to support a safe to drink town. (bringing integrity and enthusiasm to the local pubwatch group)
- we will not open the doors to the basement until 8pm. Prior to that the upstairs shop will be a cafe/ wine bar concept.
- we will embrace a dispersals policy as we do in Wilmslow, our security team will encourage guests to get home safely into taxis after the doors are shut after 3a, for a minimum of 30 minutes.
- we would like to work with the local authorities, take their advice and constantly look to improve public safety, prevention of crime and disorder, prevention of public nuisance and protection of children from harm.
- we will do this by constantly referring to our premises licence conditions, previous knowledge and welcoming new ideas.
- we have learnt that to attract a responsible drinking audience music choice is essential and can influence a guests social behaviour, for guest to be happy and friendly ' happy and friendly' music contributes to creating this. That doesn't eliminate the possibility of guests who have personal and mental issues that puts them in the ' not safe to drink bracket'. To tackle this there should be always a regular security member present who is well experienced and has the skills to follow the SIA regulations on how to refuse entry and in the worst case scenario eject a guest, and at the right time involve the police should they feel necessary. This is core to the style of security we would potentially be bringing.
- for more detailed information on how we will support the licensing objectives we wish to bring forward our licence conditions from Wilmslow)

Our financial forecast shows us that with the drinking hours we have requested we will be able to operate a profitable and professional business. We believe that our project will add to the social scene and fit in nicely, keeping guests in Hale as opposed to venturing elsewhere for after dinner drinks.

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 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all that apply

- | | |
|--|-------------------------------------|
| a) plays (if ticking yes, fill in box A) | <input type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input checked="" type="checkbox"/> |

- 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 7)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	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 4)		
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Thur					
Fri			<u>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</u> (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 to 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)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
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 6)
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			
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 5)		
Thur					
Fri			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 (please read guidance note 6)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) Please see further details in Box F		
Mon					
Tue			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5) Christmas Eve 23:00 – 02:45 New Years Eve 23:00- 03:45		
Wed	23:00	01:45			
Thur	23:00	01:45	<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 6)		
Fri	23:00	02:45			
Sat	23:00	02:45			
Sun	23:00	02:45			

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input checked="" type="checkbox"/>	
Day	Start	Finish		Outdoors	<input type="checkbox"/>	
Mon			<p><u>Please give further details here</u> (please read guidance note 4)</p> <p>WEDNESDAY : OPEN 8pm Live Piano 9pm – 11pm followed by background music serving drinks until 1.45 am last orders and carriages 1.45-2am</p> <p>THURSDAY: OPEN 8pm Live Piano 9pm – 11pm followed by background music serving drinks until 2.45am – followed by carriages 2.45 am – 3am.</p> <p>FRIDAY: OPEN 8pm Live Piano 9pm-11pm followed by DJ and saxophone 11pm-3am- last orders 2.45 followed by carriages 2.45-3am</p> <p>SATURDAY: :OPEN 8pm Live BAND 9pm-11pm followed by DJ and saxophone 11pm-3am- last orders 2.45 followed by carriages 2.45-3am</p> <p>SUNDAY: OPEN 6pm LIVE JAZZ 7pm-10pm followed by background music until 3am. Last orders 2.45 carriages 2.45 – 3am.</p>	Both	<input type="checkbox"/>	
Tue						
Wed	23:00	01:45		<p><u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)</p> <p>Christmas Eve 23:00 – 02:45</p> <p>New Years Eve 23:00- 03:45</p>		
Thur	23:00	01:45				
Fri	23:00	02:45		<p><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 6)</p>		
Sat	23:00	02:45				
Sun	23:00	02:45				

G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place <u>indoors or outdoors or both</u> – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 4)		
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 at different times to 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	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	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 4)		
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 5)		
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 6)		
Sun					

I

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"/>
Day	Start	Finish		Both	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 5)		
Thur					
Fri			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 (please read guidance note 6)		
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"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5) Christmas Eve 12:00 – 02:45 New Year’s Eve 12:00- 03:45		
Mon					
Tue					
Wed	12:00	01:45			
Thur	12:00	01:45			
Fri	12:00	02:45			
Sat	12:00	02:45			
Sun	12:00	02:45			
			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 6)		

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):

Name George Hadijyiannis	
Date of birth 22/08/1985	
Address 152 Manchester Road Wilmslow	
Postcode	SK9 2JW
Personal licence number (if known) PERS2640	
Issuing licensing authority (if known) Cheshire East Council	

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 9).

L

<p>Hours premises are open to the public Standard days and timings (please read guidance note 7)</p>			<p>State any seasonal variations (please read guidance note 5) Christmas Eve 12:00 – 03:00 New Year’s Eve 12:00- 04:00</p>
Day	Start	Finish	<p>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 (please read guidance note 6)</p>
Mon			
Tue			
Wed	12:00	02:00	
Thur	12:00	03:00	
Fri	12:00	03:00	
Sat	12:00	03:00	
Sun	12:00	03:00	

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 10)

Please see attached document titled 'Proposed Conditions for Symposium'

b) The prevention of crime and disorder

Please see attached document titled 'Proposed Conditions for Symposium'

c) Public safety

Please see attached document titled 'Proposed Conditions for Symposium'

d) The prevention of public nuisance

Please see attached document titled 'Proposed Conditions for Symposium'

e) The protection of children from harm

Please see attached document titled 'Proposed Conditions for Symposium'

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.
- [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	<ul style="list-style-type: none">• [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
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	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	24/02/2020
Capacity	

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	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			