Application for a Sex Establishment Licence

I/We hereby apply for the RENEWAL of a Sex Establishment Licence under
the Local Government (Miscellaneous Provisions) Act 1983 as follows:

1.	General information (all applicants must complete this section)
	What type of licence are you applying for?
	A sex shop licence ☐ A sex cinema licence ☐ A sexual entertainment venue licence? ☒
	Are you applying as: (please tick):
	An individual A registered company A partnership
}	Please state your trading name:
	Is this application for: (please tick):
	Grant of a new licence ☐ renewal ☒ variation ☐ or transfer ☐ of an existing licence?
	If renewal, variation or transfer, please provide the existing licence number:
	2019/03785/19SEXE
	THE APPLICANT
2.	Application by an Individual
	(complete this section only if the application is by an individual)
	Title (please tick):
	Mr. Mrs. Miss Ms. Other (please state):
	Surname: Forenames:
	Maiden name or any other surrous at the surrous at
	Maiden name or any other surnames you have been known by: Received On
	Date of birth:
	Residential address:
	Postcode: Southampton &
	Position/Role in the business: Eastleigh Licensing Partnership
3.	Application by a Partnership
4).	(complete this section only if the application is by a partnership)
	You must supply information in respect of every partner – where there are more than two
	partners then please use a continuation sheet
	Title (please tick):
	Mr Mrs. Miss Ms. Other (please state):
	Surname: Forenames:
	Maiden name or any other surnames you have been known by:
	Date of birth:
ļ	Residential address:
	Postcode:
}	Title (please tick):
1	Mr. Mrs. Miss Ms. Other (please state): Surname: Forenames:
	Surname: Forenames:
	Maiden name or any other surnames you have been known by:
	maraon hame of any other sumames you have been known by.
	Date of birth:

	Registered company name: Post resident solve a registered company)			
	Registered company name: SOUTHAMPTONICLUBS LTD Registration number: 178887			
	Address of the company's registered office: as ALIR STREET TOWNERN Postcode: 1804			
	Please provide the following details for every director, shadow director and the company			
	secretary – where necessary	please use a continuation sheet.		
1	Role	Production of Sold of State of		
1	Title (please tick):			
		. Other (please state):		
	Surname:	Forenames:		
	Maiden name or any other surnames you have been known by:			
		The state of the s		
	Date of birth: 24.4 04.994			
	Residential address: 1914 A	LEGUIN L'ONSE PADRIORTE AVENUE REALING		
	Postcode: Re Va 35			
	Role:			
1	Title (please tick):			
	Mr. Mrs. Miss Ms.	Other (please state):		
	Surname:	Forenames:		
	Maiden name or any other su	rhàmes you have been known by:		
	Date of birth:	•		
	Residential address:			
	Postcode:			
5.	Contact Details			
	(all applicants must complete	this section)		
	your Residential address	lress to correspond with you unless you indicate we should use		
	Business Address:	Telephone nos.		
		Daytime:		
	Postcode:	Evening:		
		Mobile:		
	Residential address:	Email address:		
1		Website		
ì		address:		
	Please use my Residential add	ress for correspondence Yes No		
	If you have appointed a legal a reference number here:	dvisor or other agent to act for you, please give their details and		
1	Name:			
	Address:			
	Post code			
ĺ	'Phone number:			
	Email address:			
7	Reference no.:			

6.	Criminal Convictions		
0.	(all applicants must complete this section)		
	Have you, any partners in the business, any directors of the company, or any other person mentioned in this application, ever been convicted of an offence or been the subject of any enforcement action in relation to a sex establishment?		
	Yes ⊠ No ☐ (please tick)		
	If "yes" you must provide details for each conviction/enforcement action, the date of the conviction/enforcement action, the name and location of the convicting court, offence of which you were convicted/the nature of the enforcement action and the sentence/penalty imposed:		
	Berkshire Magistrates' Court		
	DR10: Driving or attempting to drive with alcohol level above limit		
	Fine: £520.00		
ĺ	Period: 18 months		
	Start date: 8 May 2017		
	End date: 7 Nov 2018		
	Conviction date: 8 May 2017		
	Removal date: 8 May 2028		
	(where necessary please use a continuation sheet)		
7.	Have any of the applicants previously been refused a sex establishment licence or had such a licence revoked? If so, give full details on a separate sheet	NO	
8.	If the applicant is a company, is the applicant a wholly owned subsidiary of another company or corporate body? If so, give full details, including full names and residential address of each director on a separate sheet	NO	
9.	If the applicant is a company, give the full names and residential addresses of each person who has a shareholding of more than 10% in the company on a separate sheet		
10.	Will the business for which the sex establishment licence is sought be carried on for the benefit of any person other than the applicant?	NO	
i	If so, give full details on a separate sheet, include company names, registration numbers, full names and residential address of each director or other person to benefit; include all persons with shareholdings greater than 10%		
11.	Does the applicant operate any other sex establishments, whether licensed or not? If so, please state the name, address and type of sex establishment (sex shop/sex cinema/sexual entertainment venue) on a separate sheet	Yes	

	THE PREMISES, VEHICLE, VESSEL OR STALL		
12	Is the application in respect of: a premises ⊠ a vehicle ☐ a vessel ☐ a stall ☐		
	If the application is in respect of a vehicle, vessel or stall, where is it proposed that it shall be used?		
13	. If the application is in respect of a premises, give the full postal address:		
	35-41 LONDON ROAD, SOUTHAMPTON,		
	Postcode: SO15 2AD		
14	Is the whole of the premises to be used as a sex establishment? Yes		
	If not, give a description of the use of the remainder of the premises:		
	The names of those responsible for managing the remainder of the premises:		
15.	The state of the s		
	owner, lessee, sub-lessee etc.)		
40	LESSEE		
16.	If the applicant has tenure of the premises other than as freeholder, state:		
	The name and address of the landlord:		
	The amount of the annual rental; £		
	The length of the unexpired term		
	The length of notice required to terminate the tenancy nonths		
17.	What is the current use of the premises?		
	NIGHTCLUB/CAFE		
18.	Is there planning permission for use of the premises, vehicle, vessel or stall as a sex establishment? NO		
	If yes, give the date of that permission		
19.	If there is no planning permission for use of the premises, vehicle, vessel or stall as a sex		
	establishment, give full details as to whether and why the use of the premises is a lawful use:		
	APPLICATION HAS BEEN SUBMITTED, AWAITING RESPONSE.		
20.	Are the premises, vehicle, vessel or stall licensed now or intended to be licensed under any other legislation e.g. the Licensing Act 2003?		
ĺ	Yes If so, give the nature and reference number of each licence:		
	PREMESIS LICENCE, 2019/03677/01SPRV		
21.	Is customer access to the premises, vehicle, vessel or stall:		
	Directly from the street?		
	Yes From other premises? NO		
,	If from other premises, give full details below:		
	in noncotter premises, give full details below.		
22.	Are all points of customer access to be supervised at all times that the premises are open for		
	business?		
	Yes		
23.	Give full details of door control and supervision of access to the premises, including whether		
- 1	those controlling access are licensed by the SIA:		
	AS STATED ON ORIGINAL LICENSE		

24. Give details of the measures proposed to ensure that any person entering the premises is over 18 years of age, including what forms of ID will be accepted:

AS STATED ON ORIGINAL LICENSE

25. Give full details of any proposed exterior signage, advertising, window displays etc. at the premises - include photographs, illustrations etc.:

AS STATED ON ORIGINAL LICENSE

26. Give full details of the measures to be taken to comply with the Indecent Displays (Control) Act 1981, as amended, including the means by which persons outside the premises will be prevented from seeing the interior:

- 27. If the premises are to be used as a sexual entertainment venue, provide full details of:
- (a) the type and nature of the entertainment to be provided:

AS STATED ON ORIGINAL LICENSE

(b) arrangements for the separation of performers and audience:

AS STATED ON ORIGINAL LICENSE

- (c) what contact, if any is to be permitted between performers and audience will be permitted:

 AS STATED ON ORIGINAL LICENSE
- (d) where sexual entertainment will take place (e.g. open areas, private booths or both):
 AS STATED ON ORIGINAL LICENSE
- (e) What measures will be put in place to supervise sexual entertainment, the conduct of performers and audience (e.g. security staff, CCTV, etc). Enclose copies of any codes of conduct or similar documents and clearly indicate the sanctions which will be taken by the management of the venue for any breaches of them:

AS STATED ON ORIGINAL LICENSE

(f) What measures are in place to ensure compliance with the law by the business and persons employed in the venue in whatever capacity, in particular in connection with human trafficking and modern slavery?

AS STATED ON ORIGINAL LICENSE

TYPE OF APPLICATION

28. Renewal

If the application is for renewal of an existing licence, have there been any changes in the business since the last grant of a licence?

NO

If Yes, give full information here:

29. Variation

If variation of an existing licence is sought, give full details here:

Ensure that you include plans and other documents clearly showing what is proposed and indicating which existing licence conditions it is proposed should be varied.

30. Transfer

If the application is for transfer of an existing licence, do you enclose the signed consent of the previous licence holder to the transfer?

31. Other information in support of the application

Use this part of the application to set out any additional information which you wish the licensing authority to take into account when considering the application:

	MANAGEMENT				
32.					
	business ("th	_	*		
	Full name:		ICTOR MIL	HALACHE	
	Residential a	ddress:			
	Postcode:				
	Date of birth:				
	the business	be that per	son's sole a	remises, vehicle, vessel or stall and will the and exclusive occupation? Yes	
34.	Give details of the arrangements for the day to day management of the premises in the absence of the manager:				
	include full na	ames, resid	ential addre	esses and dates of birth of such persons.	
35.	On what days	and at wh	at times will	the business will be open:	
	Day	From	То	Give details of any proposed except	ions to the hours
		(use 24 h	our clock)	given	
	Monday	21:00	05:00		
	Tuesday	21:00	05:00		
	Wednesday	21:00	05:00		
	Thursday	21:00	05:00		
	Friday	21:00	05:00		
	Saturday	21:00	05:00		
	Sunday	21:00	05:00		
36.	the interior an particular, det advertising, in images to be (this will not b	nd exterior of ails of the p acluding the used e necessar	of the premisoroposals in nature, con	our photographs and designs illustrating ses, vehicle, vessel or stall giving, in respect of exterior signage and intent and size of signage and any	
		nges have	taken place	since the last grant of a licence.	
	Payment		-1 - 4 - 4 h Š	-4:	
91	(all applicants				
	I will pay the application fee for a sex establishment licence by: Debit or credit card Cheque Cash (please tick)				
20	Checklist	card C	neque 🔼	Cash (please tick)	
30.	(all applicants				
	The form is fu company secr		ed, signed a	and dated by each individual, partner or th	
	The fee is end	closed			
	Continuation sheets, clearly marked to indicate the question numbers, are enclosed				
	Plans and other documents are enclosed				

39	(all applicants n	nust complete this section)		
	The information contained in this form is true and accurate to the best of my knowledge and belief. I understand that if I make a false statement which I know to be false in any material respect or which I do not believe to be true in connection with an application for the grant of a sex establishment licence I will be guilty of an offence and liable on summary conviction to an unlimited fine.			
	I understand that Southampton City Council may consult other agencies about my suitability to be granted a sex establishment licence, and that those other agencies may include other local authorities and the police.			
	I understand that the purpose of the sharing of this data is to form a full assessment of my suitability to be granted a sex establishment licence. I also understand that the sharing of information about me may extend to sensitive personal data, such as data about any previous criminal offences. Some details will also be displayed in the council's public register of licences.			
	I understand that the licensing authority may be required by law to disclose, from time to time, further information relating to applications and licences to the appropriate authorities for the purposes of law enforcement and the prevention of fraud.			
		formation about the Council's handling of your personal data can be found in y, available online (http://www.southampton.gov.uk/privacy), or on request.		
	An individual ap 4) must complet	plicant (section 2) or all partners (section 3) or the company secretary (section te this section		
. •	Signed: < Name (please print) Capacity of signatory:	LAUREN LINES Company Director		
	Signed: Name (please print) Capacity of signatory:	Dated		
	Signed: Name (please print) Capacity of signatory:	Dated		
	Signed: Name (please print) Capacity of signatory:	Dated		
- 1		·		

Shareholder Information

Mr Dean Yeoman

Other Sex Establishments Information Sexual Entertainment Venue Black Diamond Gentlemen's Club 108 Friar Street Reading RG1 1EP

Application for the RENEWAL Of a Sex Establishment Licence



Please read the following notes before completing this form

- A All questions must be answered except where otherwise stated. If relevant questions are not answered, the application form will rejected and returned to the applicant for amendment.
- Any person who, in connection with an application for the grant, renewal or transfer of a sex establishment licence makes a false statement which he knows to be false in any material respect or which he does not believe to be true is guilty of an offence and liable on summary conviction to an unlimited fine.
- 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 in black ink. Use additional sheets if necessary.
- **D** When fully completed, a copy of this form, plans and other accompanying documents must be sent to the Chief Officer of Police:

E-mail: force.licensing@hampshire.pnn.police.uk

Phone: 023 8053 3368

Post/in person: Force Licensing Team, Hampshire Constabulary, Southampton Police Office,

Civic Centre, Southampton SQ14 7LY

E Send this fully completed form, together with the fee, plans and accompanying documents to the Council's Licensing Team at the address below.

Contacting the Licensing Team:

If you require further information, you may contact the Licensing Team as follows:

Email: licensing@southampton.gov.uk

Post: Licensing Team, PO Box 1767, Southampton SO18 9LA

Phone: 023 8083 3002 (option 4)

In person: Licensing Team, Civic Centre, Southampton SO14 7LY

Payments

You must pay for your licence application before it can be accepted. We can accept payment by debit or credit card, by cheque or in cash. Please note that a subsequent failure of a cheque to clear will invalidate your application and may give rise to a criminal offence.