

Cherwell District Council

**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.

We Vue Entertainment Limited

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			
Vue Cinema			
Bure Place			
Post town	Bicester	Post code	OX26 6FA

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£ NOT YET DETERMINED

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as
Please tick yes

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
 - i. as a limited company 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 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 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:

Please tick yes

- 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

- o a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as 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		
I am 18 years old or over					<input type="checkbox"/> Please tick yes
Current postal address if different from premises address					
Post Town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

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		
I am 18 years old or over					<input type="checkbox"/> Please tick yes
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	Vue Entertainment Limited
Address	Vue Entertainment 10 Chiswick Park 566 Chiswick High Road London W4 5XS
Registered number (where applicable)	4699504
Description of applicant (for example, partnership, company, unincorporated association etc.)	Limited Company
Telephone number (if any)	0208 396 0100

E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

Day			Month			Year		
A	S	A	P					

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

Day			Month			Year		

A

Please give a general description of the premises (please read guidance note1)

These premises will operate as a multiplex cinema within a larger mixed use retail and entertainment development. The applicant operates in excess of 70 cinemas throughout England, Wales and Scotland the majority of which are licensed for the sale of alcohol as well as the primary activity of showing films

The sale of alcohol and the provision of other types of regulated entertainment other than the showing of films will be ancillary to the use of the premises as a cinema.

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 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick yes

- 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 a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)

Provision of entertainment facilities:

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

Provision of late night refreshment (if ticking yes, fill in box L)

Supply of alcohol (if ticking yes, fill in box M)

In all cases complete boxes N, O and P

A

Plays Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	0900	0300	Please give further details here (please read guidance note 3) The performances of play	Both	<input type="checkbox"/>
Tue	0900	0300			
Wed	0900	0300	State any seasonal variations for performing plays (please read guidance note 4)		
Thur	0900	0300			
Fri	0900	0300	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 (please read guidance note 5) An additional hour on the day that British Summertime commences.		
Sat	0900	0300			
Sun	0900	0300		From the end of permitted hours on New Year Eve to the start of permitted hours on New Year's Day	

B

Films Standard days and timings (please read guidance note 6)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	24 hours		Please give further details here (please read guidance note 3) Including the showing of movies and pop dvds	Both	<input type="checkbox"/>
Tue	24 hours				
Wed	24 hours		State any seasonal variations for the exhibition of films (please read guidance note 4)		
Thur	24 hours				
Fri	24 hours		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 5) An additional hour on the day that British Summertime commences.		
Sat	24 hours				
Sun	24 hours			From the end of permitted hours on New Year Eve to the start of permitted hours on New Year's Day	

C

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			State any seasonal variations for indoor sporting events (please read guidance note 4)
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)		
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 5)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon	0900	0300	Performance of live amplified and non-amplified music		
Tue	0900	0300			
Wed	0900	0300	State any seasonal variations for the performance of live music (please read guidance note 4)		
Thur	0900	0300			
Fri	0900	0300			
Sat	0900	0300	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 (please read guidance note 5) An additional hour on the day that British Summertime commences.		
Sun	0900	0300	From the end of permitted hours on New Year Eve to the start of permitted hours on New Year's Day		

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon	0900	0300	Playing of recorded music through in-house music system		
Tue	0900	0300			
Wed	0900	0300	State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur	0900	0300			
Fri	0900	0300			
Sat	0900	0300	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 (please read guidance note 5) An additional hour on the day that British Summertime commences.		
Sun	0900	0300	From the end of permitted hours on New Year Eve to the start of permitted hours on New Year's Day		

G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon	0900	0300			
Tue	0900	0300	State any seasonal variations for the performance of dance (please read guidance note 4)		
Wed	0900	0300			
Thur	0900	0300	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 5) An additional hour on the day that British Summertime commences.		
Fri	0900	0300			
Sat	0900	0300	From the end of permitted hours on New Year Eve to the start of permitted hours on New Year's Day		
Sun	0900	0300			

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
Tue			Please give further details here (please read guidance note 3)		
Wed					
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)		
Fri					
Sat			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 (please read guidance note 5)		
Sun					

I

Provision of facilities for making music Standard days and timings (please read guidance note 6)			<u>Please give a description of the facilities for making music you will be providing</u>							
			<u>Will the facilities for making music be indoors or outdoors or both – please tick</u> (please read guidance note 2)	<table border="1"> <tr> <td>Indoors</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Outdoors</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Both</td> <td><input type="checkbox"/></td> </tr> </table>	Indoors	<input checked="" type="checkbox"/>	Outdoors	<input type="checkbox"/>	Both	<input type="checkbox"/>
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 3)							
Mon	0900	0300								
Tue	0900	0300								
Wed	0900	0300	<u>State any seasonal variations for the provision of facilities for making music</u> (please read guidance note 4)							
Thur	0900	0300								
Fri	0900	0300	<u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u> (please read guidance note 5)							
Sat	0900	0300	An additional hour on the day that British Summertime commences.							
Sun	0900	0300	From the end of permitted hours on New Year Eve to the start of permitted hours on New Year's Day							

J

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			<u>Will the facilities for dancing be indoors or outdoors or both – please tick</u> (see guidance note 2)						
			<table border="1"> <tr> <td>Indoors</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Outdoors</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Both</td> <td><input type="checkbox"/></td> </tr> </table>	Indoors	<input checked="" type="checkbox"/>	Outdoors	<input type="checkbox"/>	Both	<input type="checkbox"/>
Indoors	<input checked="" type="checkbox"/>								
Outdoors	<input type="checkbox"/>								
Both	<input type="checkbox"/>								
Day	Start	Finish	<u>Please give a description of the facilities for dancing you will be providing</u>						
Mon	0900	0300	<u>Please give further details here</u> (please read guidance note 3)						
Tue	0900	0300							
Wed	0900	0300	<u>State any seasonal variations for providing dancing facilities</u> (please read guidance note 4)						
Thur	0900	0300							
Fri	0900	0300	<u>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5)						
Sat	0900	0300	An additional hour on the day that British Summertime commences.						
Sun	0900	0300	From the end of permitted hours on New Year Eve to the start of permitted hours on New Year's Day						

K

Provision of facilities for entertainment of a similar description to that falling within i or j Standard days and timings (please read guidance note 6)			<u>Please give a description of the type of entertainment facility you will be providing</u>		
Day	Start	Finish	<u>Will the entertainment facility be indoors or outdoors or both – please tick</u> (please read guidance note 2)	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 3)		
Wed					
Thur			<u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u> (please read guidance note 4)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within i or j at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		
Sun					

L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	2300	0500		Both	<input checked="" type="checkbox"/>
Tue	2300	0500	<u>Please give further details here</u> (please read guidance note 3) Provision of hot food and drinks		
Wed	2300	0500	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Thur	2300	0500			
Fri	2300	0500	<u>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</u> (please read guidance note 5)		
Sat	2300	0500	An additional hour on the day that British Summertime commences.		
Sun	2300	0500	From the end of permitted hours on New Year Eve to the start of permitted hours on New Year's Day		

M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises	<input checked="" type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	0900	0230			
Tue	0900	0230			
Wed	0900	0230			
Thur	0900	0230			
Fri	0900	0230			
Sat	0900	0230			
Sun	0900	0230			
			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 5)		
			An additional hour on the day that British Summertime commences.		
			From the end of permitted hours on New Year Eve to the start of permitted hours on New Year's Day		

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name Jaimini Bhatia	
Address 5 Cotswold Drive Randlay Telford	
Postcode	TF3 2NR
Personal Licence number (if known) BTW/PER 0235	
Issuing licensing authority (if known) Telford and Wrekin Council	

N

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 8) NONE

O

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	24 hours		
Tue	24 hours		
Wed	24 hours		
Thur	24 hours		
Fri	24 hours		
Sat	24 hours		
Sun	24 hours		

P 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)

See below

b) The prevention of crime and disorder

1. Notices stating that CCTV is in operation will be displayed throughout the venue;
2. A tamper proof CCTV system shall be installed, maintained and operated at the premises in liaison with and to the satisfaction of The Metropolitan Constabulary and shall be used to record during all hours the premises are open to the public. *TVP*
3. Sale of alcohol will cease at 02:30 or 30 minutes before the end of the last film showing at the premises whichever is the earlier.
4. Each auditoria is visited by a member of staff during film showings to monitor screens and the behavior of customers. These staff are issued with night vision goggles or equivalent.

c) Public safety

1. The occupancy capacity of the premises shall be identified by way of Risk Assessment;
2. All staff shall receive training in emergency evacuation procedures

d) The prevention of public nuisance

1. Considering the nature and location of the premises it is not considered that any steps are required to promote this licensing objective

e) The protection of children from harm

1. The premises shall operate a proof of age scheme and Challenge 21 policy. Notices setting out this policy shall be displayed within the premises.
2. All staff involved in the sale of alcohol shall be properly trained (as per the premise licence holder's own training programme) and retrained every 6 months.

Please tick yes

- I have made or enclosed payment of the fee

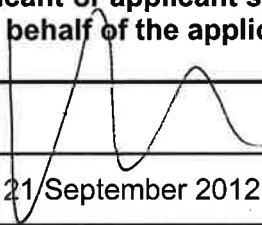


- I have enclosed the plan of the premises
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable
- I understand that I must now advertise my application
- I understand that if I do not comply with the above requirements my application will be rejected

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 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant’s solicitor or other duly authorised agent (See guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	21/September 2012
Capacity	Poppleston Allen – Solicitors for and on behalf of the applicant

For joint applications signature of 2nd applicant or 2nd applicant’s solicitor or other authorised agent. (please read guidance note 12). **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 13)			
Angela Gardner 37 Stoney Street The Lace Market			
Post town	Nottingham	Post code	NG1 1LS
Telephone number (if any)	0115 9349 157		
If you would prefer us to correspond with you by e-mail your e-mail address (optional)			
a.gardner@popall.co.uk			

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. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please 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.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

**CONSENT OF INDIVIDUAL TO BEING SPECIFIED AS
PREMISES SUPERVISOR**

To be completed in block capitals

I Mrs Jaimini Bhatia of 5 Cotswold Drive, Randlay, Telford, TF3 2NR hereby confirm that I give my consent to be specified as the Designated Premises Supervisor in relation to the application for a New Premises Licence by Vue Entertainment Limited relating to a Premises Licence for Vue Cinema, Bure Place, Bicester, OX26 6FA and any premises licence to be granted or varied in respect of this application made by Vue Entertainment Limited concerning the supply of alcohol at Vue Cinema, Bure Place, Bicester, OX26 6FA

I also confirm that I hold a personal licence, details of which I set out below:

Personal Licence Number:-

BTW/PER 0235

Personal Licence Issuing Authority:-

Telford and Wrekin Council

Signed

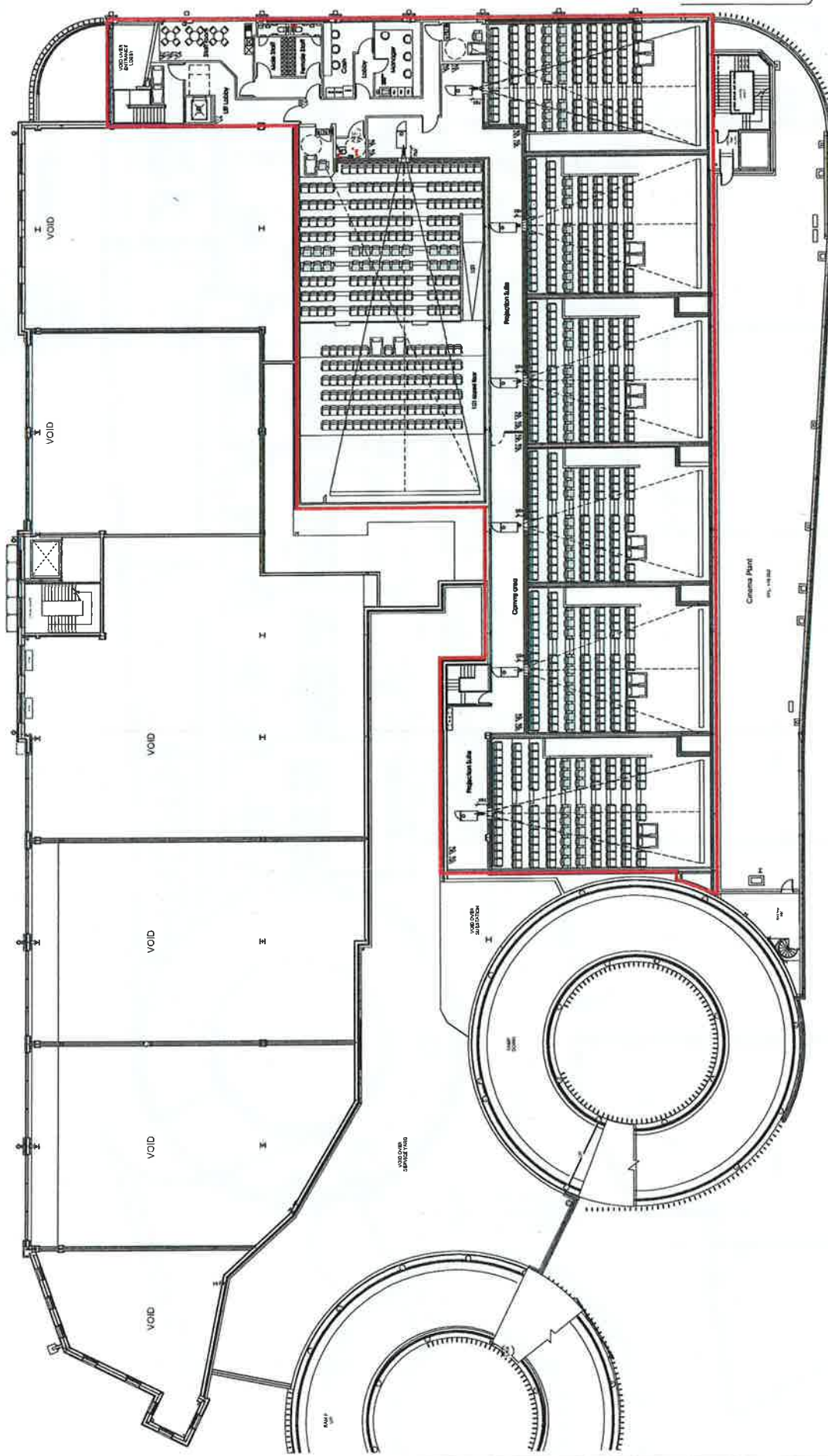


Name Printed

JAIMINI BHATIA

Dated

21.09.12



REVISIONS

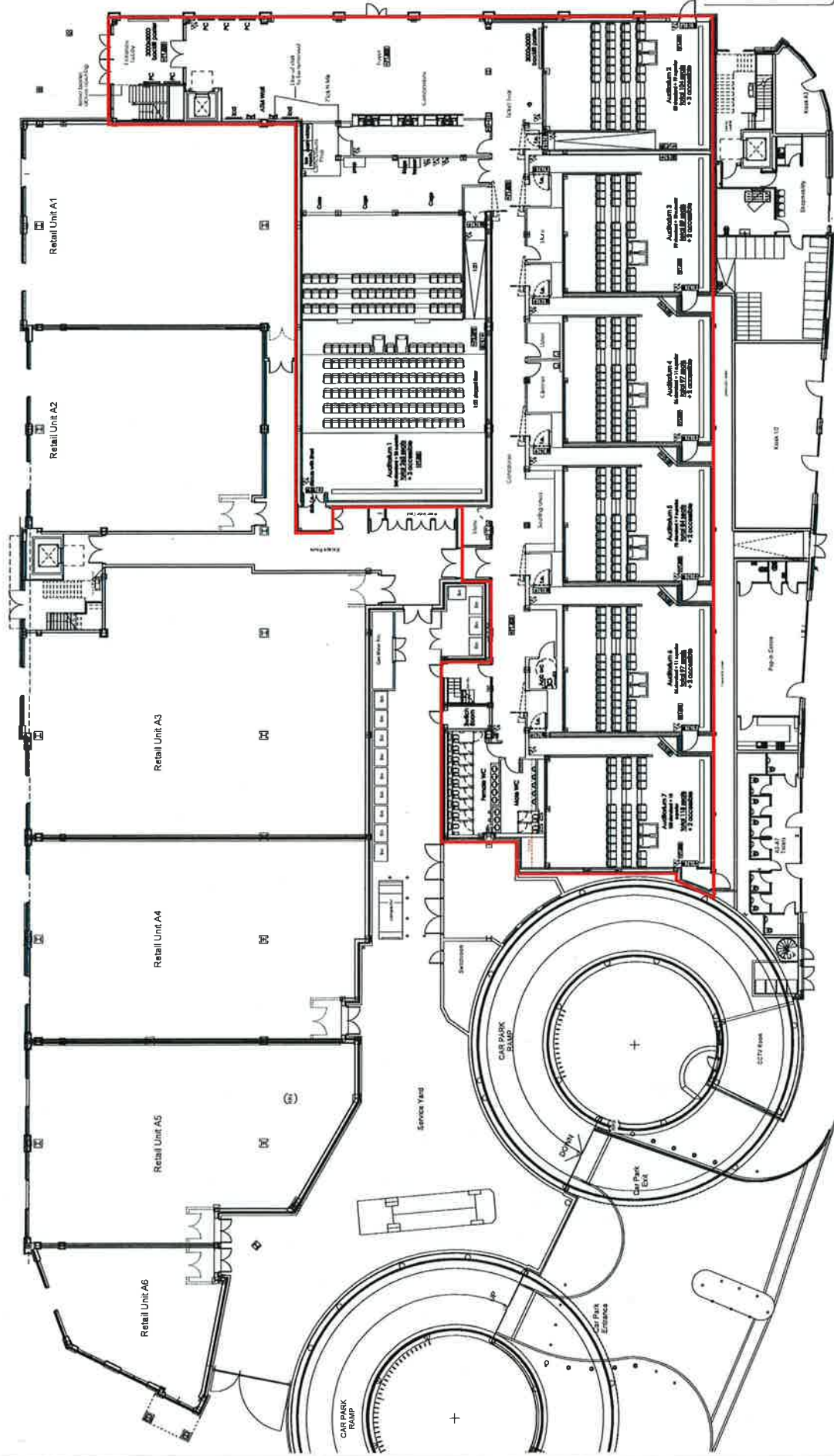
NO.	DATE	DESCRIPTION	BY	CHKD
1	10/11/2011	ISSUED FOR PERMITS	...	...
2	10/11/2011	...	...	...
3	10/11/2011	...	...	...
4	10/11/2011	...	...	...
5	10/11/2011	...	...	...

LEGEND

SYMBOL	DESCRIPTION
[Red Line]	AREA FOR PROVISION OF LICENSABLE ACTIVITY
[Symbol]	...
[Symbol]	...
[Symbol]	...
[Symbol]	...
[Symbol]	...
[Symbol]	...

LICENCE

WE ONSHA
 REGISTERED
 PROFESSIONAL
 4220 - LIC02



REVISIONS

NO.	DATE	DESCRIPTION

LICENCE

USE ONLY FOR
 CLUSTER
 LICENSE LAYOUT
 FLOOR LEVEL

4220 : LCD1

DATE: 10/10/2023
 TIME: 10:00:00
 USER: ADMIN

UNIK

UNIK
 UNIVERSITI KUALA LUMPUR
 43600 MATANG, SELANGOR
 MALAYSIA

LEGEND

AREA FOR PROVISION OF PORTABLE EQUIPMENT

1. Area for provision of portable equipment

2. Area for provision of portable equipment

3. Area for provision of portable equipment

4. Area for provision of portable equipment

5. Area for provision of portable equipment

6. Area for provision of portable equipment

7. Area for provision of portable equipment

8. Area for provision of portable equipment

9. Area for provision of portable equipment

10. Area for provision of portable equipment

