

WA/2021/0528 – Change of use of existing dwelling, garage, store and access (use class C3) to a mix of residential (use class C3) and commercial business and storage (use class B8) for a temporary period at 46 DIAL HOUSE, LONGDENE ROAD, HASLEMERE GU27 2PQ

Applicant:	Emily Saker
Parish:	Haslemere CP
Ward:	Haslemere East and Grayswood Ward
Grid Reference:	E: 489528 N: 132650
Case Officer:	Carl Housden
Neighbour Notification Expiry Date:	20/04/2021
Expiry Date:	22/04/2021
RECOMMENDATION	That, subject to conditions, permission be GRANTED

1. Site Description

- Property Type: Two storey detached dwelling with attached garage
- Character: Residential
- Site Levels: Declines south to north

2. Proposal

Change of use of existing C3 dwelling, garage, store and access to a mix of C3 and B8 use. It is proposed that the garage is the only area used for storage and deliveries will be collected from the main driveway through the existing dwelling. A temporary 5 year permission is sought.

The B8 use is for a subscription based “home delivery wine club”. The B8 use will entail receipt, storage and despatch of small goods which will be sealed at all times.

No members of the public will visit the facility with subscription clients receiving goods via a courier on a regular (e.g. monthly/bi-monthly) basis. Working hours will be limited to courier delivery/collection between the hours of 8am and 6pm Monday to Friday. It is anticipated that 1-2 deliveries/collections will be made per week by small courier vans.

3. Relevant Planning History

WA/2017/0402 - Construction of vehicle access and landscaping to raise garden levels (revision of wa/16/1971) as amended by email and plans received 24/05/2017 and amplified by additional information received 19/06/2017. Full Permission 21/06/2017.

4. Relevant Planning Constraints

Developed Area of Haslemere

5. Relevant Development Plan Policies and Guidance

- Waverley Borough Local Plan (Part 1): Strategic policies and sites (adopted February 2018): SP1, TD1, NE1, NE3, ST1, EE1
- Haslemere Neighbourhood Plan 2013-2032: H7, H9, H15
- Waverley Borough Local Plan 2002 (retained policies February 2018): D1, D4

Other guidance:

- The National Planning Policy Framework 2021 (NPPF)
- The National Planning Practice Guidance 2014 (NPPG)
- Council's Parking Guidelines (2013)
- Surrey Vehicular and Cycle Parking Guidance (2018)
- Haslemere Design Statement (2012)
- National Design Guide (2019)

6. Consultations and Town/Parish Council Comments

Haslemere Town Council	No objection.
Surrey County Council Highways	No objection.
Waverley Borough Council Environmental Health	No objection.

7. Representations

1 letter has been received raising objection on the following grounds:

- Concern over highway safety
- Concern over notification of neighbours

8. Planning Considerations:

9. Principle of development

Policy H15 of the Haslemere Neighbourhood plan is supportive of promoting new business by stating the following:

H15.1 Development proposals to provide new employment space, including through the conversion or division of existing employment space and the creation of new

premises will be supported, subject to considerations of traffic generation, parking, noise and other forms of pollution, and provided they respect the character of their surroundings by way of scale and design.

H15.2 All conversions or divisions of existing employment space or developments of new employment space should be designed to accommodate up to date information and communications infrastructure.

The criteria of Policy H15 will be assessed in the relevant sections of the report.

10. Compatibility of Uses and Impact on Retained Residential Use and Neighbouring Amenity

The activities relating to the proposed B8 use, except for moving the goods to the courier van, would be contained within the attached garage space. The proposed use is small scale and has infrequent deliveries which would not unduly burden the occupiers of the dwelling of 46 Dial House nor would they generate nuisance or disturbance detrimental to the amenity of neighbours. The Council's Environmental Health Department was consulted regarding noise and other nuisances and raised no objections due to the scale of the B8 use and as the hours of operation of the B8 use would be between 8:00 – 18:00. Subject to a condition limiting hours of use and limiting the storage to the garage space it is considered that the C3 and B8 use would be compatible at the site and the B8 use would not be detrimental to the amenity of neighbours.

11. Design and impact on visual amenity

There are no external changes and the low volume of activity would not result in any adverse impacts on the character of the area.

12. Highway Safety and Parking

The applicant has confirmed that deliveries/collections will be made via the main house, rather than by the garage door. The proposal will see 1-2 deliveries/collections per week by small courier vans. Confirmation has been provided that no non-resident staff are to be employed by the business. Due to the low levels of vehicle movements in association with proposed the change of use and all staff being residents of the existing dwelling, the Highway Authority was consulted and had no requirements. The Council is therefore satisfied that the proposed development would not have an adverse impact on highway safety or parking.

13. Conclusion

The planning balance assessment concludes that the proposal is in accordance with the Development Plan, as such, planning permission is recommended for approval.

Recommendation

That permission be GRANTED subject to the following conditions:

1. Condition:

The plan numbers to which this permission relates are HA/1767/P: 1 2a, 2 2a, 3 2a, 4 2a and 4 2a. The development shall be carried out in accordance with the approved plans. No material variation from these plans shall take place unless otherwise first agreed in writing with the Local Planning Authority.

Reason:

In order that the development hereby permitted shall be fully implemented in complete accordance with the approved plans and to accord with Policy TD1 of the Local Plan 2018 (Part 1) and retained Policies D1 and D4 of the Local Plan 2002.

2. Condition:

The development hereby permitted is granted for a temporary period of five years only from the date of granting the permission, where by the B8 use shall cease and the site shall return to a sole C3 use.

Reason:

In order that the development hereby permitted shall be fully carried out as applied for and in the interests of the character of the area and neighbouring amenity, to accord with the objectives of Policy TD1 of the Local Plan Part 1 2018 and Policies D1 and D4 of the Local Plan.

3. Condition:

All storage in association with the approved B8 use shall only take place within the hatched store and garage area as shown on plan HA/1767/P/2 2a.

Reason:

In the interests of residential amenity of the occupiers of the host dwelling, in accordance with Policy TD1 of the Local Plan 2018 and retained Policies D1 and D4 of the Local Plan 2002.

4. Condition:

All deliveries associated with the B8 use shall take place between 08:00 and 18:00 Monday to Friday.

Reason:

In the interests of the amenity of neighbours, in accordance with Policy TD1 of the Local Plan 2018 and retained Policies D1 and D4 of the Local Plan 2002.

Informatives:

1. The granting of any permission does not in any way indemnify against statutory nuisance action being taken should substantiated complaints within the remit of the Environmental Protection Act 1990 be received. For further information please contact the Environmental Health Service on 01483 523393.

The Council confirms that in assessing this planning application it has worked with the applicant in a positive and proactive way, in line with the requirements of Paragraph 38 of the National Planning Policy Framework 2021.

Case Officer Chris Turner Signed: Date: 06 December 2021

Agreed by Team or DC Manager.....Kathryn Pearson.....Date: 7/12/2021.....

Time extension agreement in writing seen by signing off officer:

Yes **No** N/A

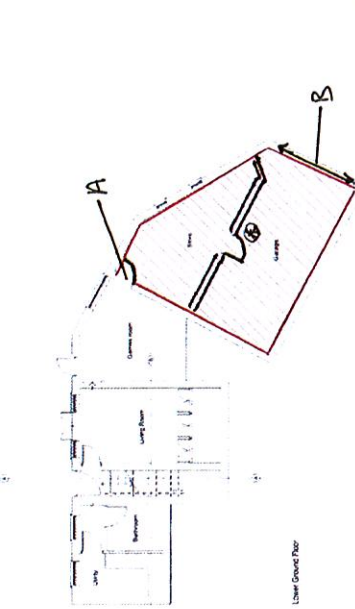
Agreed by Development Manager or Head of Planning Services

.....

This report has been agreed under the delegated authority by the Head of Planning Services.

Decision falls within(1a) of the Scheme of Delegation
.....KP..... (initialled by Authorising officer)

DIAL HOUSE, 46 LONGDENE ROAD, HASLEMERE, GU27 2PG

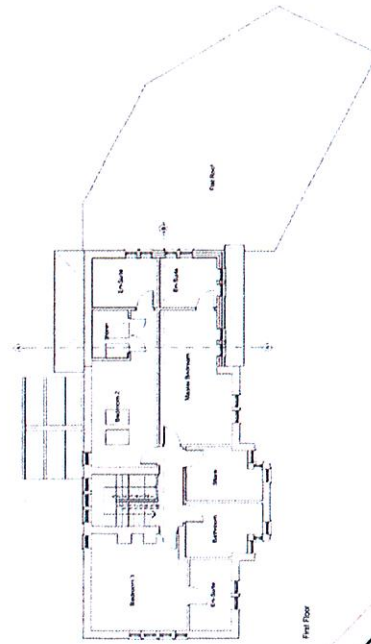


/// - DENOTES AREA TO BE LICENSED (STORE AND GARAGE)

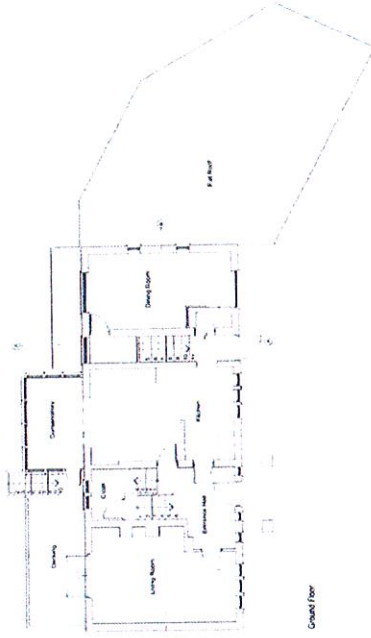
A - ACCESS VIA GAMES ROOM

B - ROLL SHUTTER DOOR ACCESS FROM GARAGE TO LONGDENE ROAD

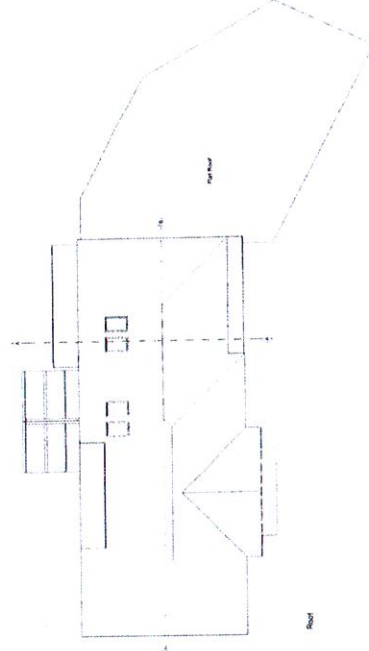
⊗ - FIRE SAFETY EQUIPMENT (CO2 ANDRY POWDER EXTINGUISHERS; FIRST AID KIT AND BURNS KIT)



First Floor



Ground Floor



Roof

Room	Area	Volume
Living Room	18.5	18.5
Kitchen	10.5	10.5
Dining Room	10.5	10.5
Games Room	10.5	10.5
Bedroom 1	10.5	10.5
Bedroom 2	10.5	10.5
Bedroom 3	10.5	10.5
Bathroom	10.5	10.5
En-suite	10.5	10.5

Client: Mr & Mrs J. Smith
Project: New extension to existing house
Address: 46 Longdene Road, Haslemere, GU27 2PG
Date: 10th February 2021
Scale: 1:100

Scale Bar
1:100
0 1 2 3 4 5 6 7 8 9 10

Scale Bar
1:100
0 1 2 3 4 5 6 7 8 9 10

Scale Bar
1:100
0 1 2 3 4 5 6 7 8 9 10

Scale Bar
1:100
0 1 2 3 4 5 6 7 8 9 10

Scale Bar
1:100
0 1 2 3 4 5 6 7 8 9 10

Heritage
Architecture

Heritage Architecture
Unit 10, The Old Mill, Mill Lane, Haslemere, GU27 2PG
Tel: 01424 831246
Email: info@heritage-arch.co.uk
Website: www.heritage-arch.co.uk

Client: Mr & Mrs J. Smith
Project: New extension to existing house
Address: 46 Longdene Road, Haslemere, GU27 2PG
Date: 10th February 2021
Scale: 1:100
Revision: 2
Drawn: J. Smith
Checked: J. Smith
Scale: 1:100 @ A1
Plans
Proposed

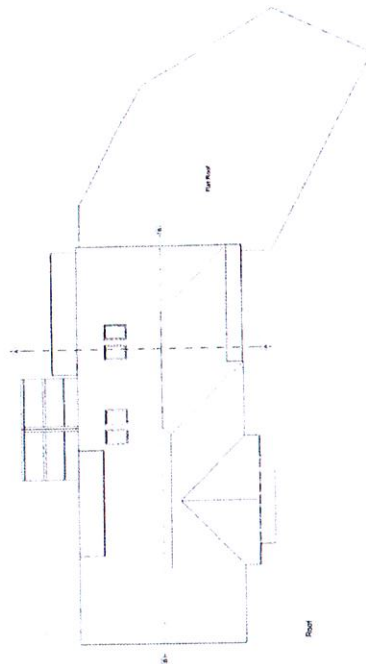
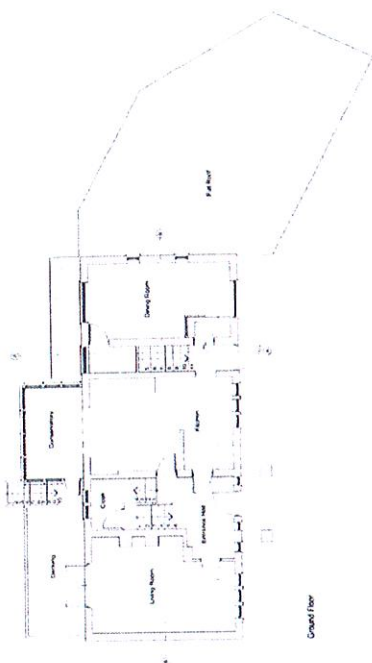
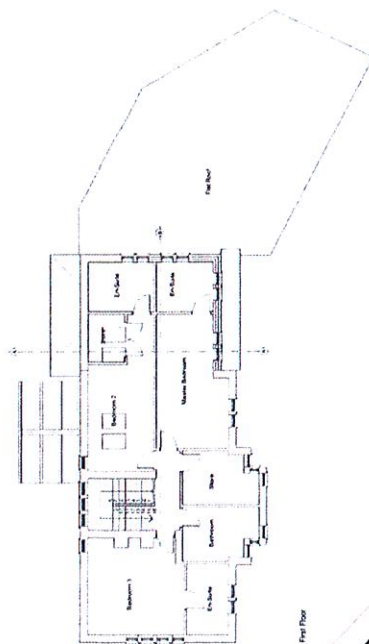
PRELIMINARY DRAWINGS
Awaiting approval

The diagram shows a hand-drawn architectural floor plan of the lower ground floor. The plan includes several labeled areas: a Kitchen at the top left, a Dining Room below it, a Living Room to the right of the Dining Room, a Reception area at the bottom left, and a large central hall containing a staircase. A red boundary line outlines a specific section of the building, which contains a room labeled 'Office' and another labeled 'B'. Handwritten letters 'A' and 'B' are placed near the top corners of this red-outlined section. Various doors and windows are indicated by simple symbols.

A - ACCESS VIA GAMES ROOM

Access via grassy

- 3 - ROLL SHUTTER DOOR (ACCESS FROM GARAGE TO CONDUIT ROOMS)
- ④ - FIRE SAFETY EQUIPMENT (CO₂ AND DRY POWDER EXTINGUISHERS; FIRST AID KIT AND BURN'S KIT)



PRELIMINARY DRAWINGS
Awaiting approval

Plus Nothing Left!
 Every week we give away \$1000 in cash prizes. And you can win it all!
 All you have to do is play the game every week. It's that easy!

Plus Nothing Left!
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Cryptosporidium parvum (Jorgensen, 1982)

[illegible]

Scale Bar



Abstract The purpose of this study was to determine the effect of a 12-week training program on the physical fitness of 10-year-old children. The children were divided into two groups: a control group and an experimental group. The experimental group performed a 12-week training program consisting of aerobic, strength, and flexibility exercises. The control group did not participate in any training program. Physical fitness was measured using a series of tests including a 1000m run, a 10m sprint, a 10m shuttle run, a 10m sit and reach, and a 10m push-up test. The results of the study showed that the experimental group had significantly higher scores than the control group in all five tests. The 12-week training program had a positive effect on the physical fitness of 10-year-old children.

Heritage
Architecture

Heritage Architecture
Langate House, Oakcroft Road, West Ryde
Sydney NSW 1513
Telephone 01 463 821046
E-mail info@heritage-architecture.com.au
Web Site www.heritage-architecture.com.au

Client	Mrs E. Salter
Project	Plant change of use at 45 Longfords Road Hastings, Surrey GU27 2PQ
Date	10th February 2021
Dwg No	HA/1162/P/2
Status	Planning
Revision	2
Drawn	MT
Checked	MT
Scale(s)	1:100 & A1
Plans	
Proposed	



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 EMILY JANE ROBERTA SAKER

(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 DIAL HOUSE 46 LONGDENE ROAD			
Post town	HASLEMERE	Postcode	GU27 2PQ

Telephone number at premises (if any)	01428 482 026
Non-domestic rateable value of premises	£ 0-4,300 (STORE AND GARAGE ONLY).

Part 2 - Applicant details

Please state whether you are applying for a premises licence as appropriate

Please tick as

- | | |
|--|---|
| a) an individual or 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) ☐ 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 type="checkbox"/>	Mrs <input checked="" type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname SAKER			First names EMILY JANE ROBERTA		
Date of birth over 15/10/1980		I am 18 years old or		<input checked="" type="checkbox"/> Please tick yes	
Nationality BRITISH					
Current residential address if different from premises address		N/A - SAME			
Post town				Postcode	
Daytime contact telephone number			07919 348301		
E-mail address (optional)		ejrsaker@gmail.com			

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 over			I am 18 years old or <input type="checkbox"/> Please tick yes		
Nationality					
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
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
14 02 2022

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

DD MM YYYY
09 12 2026

Please give a general description of the premises (please read guidance note 1)
 RELEVANT TO THIS APPLICATION ARE THE STORE AND GARAGE OF DIAL HOUSE (SEE HATCHED AREA ON PLAN) WHICH HAS BEEN GRANTED CLASS B8 FOR STORAGE AND DISTRIBUTION FOR A TEMPORARY PERIOD (START-UP) OF 5 YEARS FROM 09/12/21. THEREFORE THE LICENCE IS REQUIRED UNTIL 09/12/26. THE GARAGE IS CONNECTED TO THE MAIN HOUSE VIA THE STORE AND IS SECURED BY AN ELECTRIC ROLL-UP SHUTTER DOOR.

PLANNING DECISION REFERS.

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

N/A

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) ☐
- 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 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"/>
			N/A		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 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 to 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"/>
			N/A		Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish				
Mon			Please give further details here (please read guidance note 4)			
Tue			State any seasonal variations for the exhibition of films (please read guidance note 5)			
Wed			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)			
Thur						
Fri						
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) <div style="text-align: center; font-size: 2em;">N/A</div>
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Wed			
Thur			
Fri			<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)
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)		Indoors <input type="checkbox"/>
			N/A		Outdoors <input type="checkbox"/>
					Both <input type="checkbox"/>
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)		
Thur					
Fri			<u>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</u> (please read guidance note 6)		
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"/>
			N/A		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 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 to 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)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3) N/A		Indoors	<input 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)			
Mon						
Tue						
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)			
Thur						
Fri			<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)			
Sat						
Sun						

G

Performances of dance Standard days and timings (please read guidance note 7)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 3)		Indoors	<input type="checkbox"/>
			N/A		Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish				
Mon			<u>Please give further details here</u> (please read guidance note 4)			
Tue						
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)			
Thur						
Fri			<u>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</u> (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 <div style="text-align: center;">NIA</div>		
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					

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"/>
			N/A		Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
Day	Start	Finish				
Mon			<u>Please give further details here</u> (please read guidance note 4)			
Tue						
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)			
Thur						
Fri			<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 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 checked="" type="checkbox"/>
Day	Start	Finish	Both <input type="checkbox"/>		
Mon	0800	1800	State any seasonal variations for the supply of alcohol (please read guidance note 5) NONE. PICK UP WILL BE FOR DELIVERY TO PRIVATE CLIENTS WHO ARE MEMBERS OF A SUBSCRIPTION - BASED WINE CLUB.		
Tue	0800	1800			
Wed	0800	1800			
Thur	0800	1800	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)		
Fri	0800	1800	NO - THE STATED TIMES FOR COURIER PICK UP / DELIVERY WILL STAY WITHIN THE TIMES LISTED HERE TO ADHERE TO PLANNING STIPULATIONS (PLANNING DECISION REFERS).		
Sat	N/A	—			
Sun	N/A	—			

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	MRS EMILY JANE ROBERTA SAKER
Date of birth	15/10/1980
Address	DIAL HOUSE 46 LONGDENE ROAD HASLEMERE SURREY
Postcode	GU27 2PQ
Personal licence number (if known)	LN 1000007108
Issuing licensing authority (if known)	WAVERLEY BOROUGH 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).

NONE - NOT APPLICABLE

L

Hours premises are open to the public
Standard days and timings (please read guidance note 7)

Day	Start	Finish
Mon	0800	1800
Tue	0800	1800
Wed	0800	1800
Thur	0800	1800
Fri	0800	1800
Sat	—	—
Sun	—	—

State any seasonal variations (please read guidance note 5)

THESE HOURS ARE THE SAME AS SECTION 3 AND DENOTE THE TIMES WHEN COURIERS WILL ATTEND THE PREMISES. PLEASE NOTE THAT NO MEMBERS OF THE PUBLIC WILL ATTEND THE PREMISES BUT THE BUSINESS WILL BE ONLINE DAILY (24hrs) VIA THE WEBSITE CONTACT FORM AND EMAIL.

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)

N/A - PLEASE REFERENCE ABOVE.

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)

TO PROMOTE ALL FOUR OBJECTIVES, THE BUSINESS WILL UPHOLD A STRICT OVER 18 POLICY AND FULLY VET POTENTIAL MEMBERS. ALL MEMBERS WILL BE MADE FULLY AWARE OF 'CHALLENGE 25' AND COURIER POLICY AND ALL POLICIES WILL BE CLEARLY VISIBLE ON THE BUSINESS' WEBSITE. BY THE BUSINESS BEING STRICTLY ADULT (18+) MEMBERS' ONLY, WITH CONSUMPTION OFF-SITE AND DELIVERING SEALED GOODS ONLY, ALL FOUR OBJECTIVES b) The prevention of crime and disorder will be upheld.

STRICTLY PUBLIC CONSUMPTION OFF-SITE BY MEMBERS' ONLY - NO MEMBERS OF THE PUBLIC WILL VISIT THE SITE. ALL MEMBERS MUST CONFIRM THEY ARE ADULT (18+) AND WILL BE ADVISED OF THE 'CHALLENGE 25' AND COURIER POLICY TO ENSURE MEMBERS, AND NO-ONE UNDER 18 - CAN RECEIVE GOODS OR CONSUME THEM. COURIER REFUSAL IF ID CANNOT BE PROVIDED UPON REQUEST AND IF RECIPIENT APPEARS INTOXICATED OR ABUSIVE. THE LICENSED AREA

c) Public safety IS FULLY SECURE WITH CCTV IN PLACE AND CCTV SIGNS CLEARLY VISIBLE. MINIMAL SIGNAGE.

PUBLIC CONSUMPTION BY PRIVATE MEMBERS ONLY (ADULT, 18+). CONSUMPTION OFF-SITE TO VERIFIED DELIVERY ADDRESSES. STRICT 18+ AND 'CHALLENGE 25' POLICY; STRICT COURIER POLICY TO ENSURE RECEIPT BY MEMBERS (ADULT (18+) ONLY. HIGHWAY SAFETY (AND THEREFORE PUBLIC SAFETY) UPHOLD BY LOW-VOLUME DELIVERIES IN STANDARD COURIER VANS 8AM-6PM MONDAY-FRIDAY ONLY (PLANNING DECISION REFERS).

d) The prevention of public nuisance

REFERENCE PLANNING DECISION, MINIMAL DELIVERIES/ DESPATCH 8AM-6PM MONDAY TO FRIDAY MINIMISES NOISE AND DISRUPTION TO NEIGHBOURS AND SATISFIES ENVIRONMENTAL HEALTH. CONSUMPTION OFF SITE BY VETTED MEMBERS (ADULT, 18+) PREVENTS PUBLIC NUISANCE AS CONSUMPTION IS CONTAINED AND STRICTLY LIMITED/CONTROLLED. 'CHALLENGE 25' AND COURIER POLICY ENSURING RECIPIENT AND CLIENT ARE ADULT FURTHER

e) The protection of children from harm

UPHOLDS THIS. STRICTLY DESPATCH AND RECEIPT OF SEALED GOODS ONLY VIA AUTHORIZED COURIER ON BUSINESS ACCOUNT (DID PROPOSED). SALE OF ALCOHOL (WINE) TO PRIVATE MEMBERS' ONLY HAVING CONFIRMED THEY ARE OVER 18 YEARS OF AGE. COURIER WILL BE 18+, ONLY DELIVERING TO THOSE OVER 18. ID WILL BE REQUESTED IF THE RECIPIENT LOOKS UNDER 25.

THE BUSINESS' WEBSITE WILL CLEARLY DISPLAY A 'CHALLENGE 25' POLICY AND ADULT (18+) POLICY. THE COURIER WILL RECORD THE DRIVER'S NAME EACH TIME. NO MINORS (UNDER 18) WILL BE PERMITTED IN THE LICENSED AREA - IT WILL BE STRICTLY AUTHORIZED PERSONNEL (18+) ONLY. CLIENTS ADVISED COURIER CAN REFUSE DELIVERY IF NO ID SUPPLIED UPON REQUEST; RECIPIENT APPEARS INTOXICATED OR

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. *n/a* ☐
- 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 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)
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Signature	E. M. Saher
Date	13/01/2022
Capacity	APPLICANT

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)			