

Application for a premises licence to be granted under the Licensing Act 2003

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 Erica De Fatima DIAS CARDOSO

(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				
Coffee Shop Aroma de Portugal 52 St Owen Street				
Post town	HEREFORD	Postcode	HR1 2PU	

Telephone number at premises (if	
any)	
Non-domestic rateable value of premises	£6,300

Part 2 - Applicant details

corporation)

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

a)	an individual or individuals *	\checkmark	please complete section (A)
b)	a person other than an individual *		
	i as a limited company/limited liabi partnership	lity 🗌	please complete section (B)
	ii as a partnership (other than limite liability)	ed 🗌	please complete section (B)
	iii as an unincorporated association	or 🗌	please complete section (B)
	iv other (for example a statutory		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)
	ou are applying as a person described in (a) or e box below):	(b) ple	ease confirm (by ticking yes
the p	carrying on or proposing to carry on a business remises for licensable activities; or	s whicl	n involves the use of \checkmark
iami	 making the application pursuant to a statutory function or 		
	 a function discharged by virtue of Her 	Maia	stu's prerogative
	• a function discharged by virtue of Her	waje	

(A) individual applicants (fill in as applicable)

Mr	Mrs	Miss	ľ	∕∕ls	-	er Title example, /)	
Surname:	DIAS CAR	DOSO		First na	ames	s: Erica De Fa	atima
Date of bi	rth	la	m 18 years	old or o	ver	Please ticl	<√
Nationalit	y Portugese	_		_	_		
address if	Current residential address if different from premises address						
Post town						Postcode	
Daytime c number	ontact telep	hone					
E-mail address (optional)							
work chec	Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service (please see note 15 for information)						

Part 3 Operating Schedule

When do you want the premises licence to start?

DD MM			1		YΥ	YΥ	
2	1	0	5	2	0	2	4

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

DD		MM		YYYY		

Please give a general description of the premises (please read guidance note 1)
The Coffee Shop Aroma De Portugal will be a stylish, family-owned business serving an exciting range of coffees, hot and cold beverages, pastries, baked goods, cakes, fresh wraps, snacks and a light lunch menu.
To complete the offering, the applicant wishes to provide a range of alcoholic beverages for sale to customers dining in or as a takeaway option for consumption away from the premises.
Many businesses were lost during Covid, and the new normal has led to increased numbers of people working flexibly.
Being within easy reach of transport connections the café is perfectly placed to provide a warm, friendly, and welcoming environment to socialise, meet, or use as a work base.
The comprehensive operating schedule reflects the highest standards of compliance and will enable the business to robustly promote the licensing objectives, while meeting customer expectations.
Through its consultant, The Licensing Guys, the applicant wishes to engage fully with all responsible authorities and other interested parties.
Should any person wish to discuss any aspect of the application or proposed activities, early contact and dialogue would be welcomed.

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

Not applicable

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)

Prov 2)	<i>v</i> ision of regulated entertainment (please read guidance note	Please tick all that apply	
a)	plays (if ticking yes, fill in box A)	Γ	
b)	films (if ticking yes, fill in box B)	Γ	
c)	indoor sporting events (if ticking yes, fill in box C)	Γ	
d)	boxing or wrestling entertainment (if ticking yes, fill in box D)	Γ	
e)	live music (if ticking yes, fill in box E)	[

h)	(if ticking yes, fill in box H)	
<u>Pro</u>	vvision of late night refreshment (if ticking yes, fill in box I)	
Sur	oply of alcohol (if ticking yes, fill in box J)	\checkmark

In all cases complete boxes K, L and M

Α

	Standard days and place indoors or outdoors o		Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note	Indoors
	nce note 7		3)	Outdoors
Day	Start	Finish		Both
Mon			Please give further details here (please note 4)	read guidance
Tue				
Wed			State any seasonal variations for perfor (please read guidance note 5)	rming plays
Thur				
Fri			Non standard timings. Where you inter premises for the performance of plays a times to those listed in the column on t	at different
Sat			list (please read guidance note 6)	
Sun				

		Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)		Indoors	
	nce note 7		<u></u> (preserve gammer et e)	Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please note 4)	read guidanc	e
Tue					
Wed			State any seasonal variations for the ex (please read guidance note 5)	chibition of fi	<u>lms</u>
Thur					
Fri			Non standard timings. Where you inter premises for the exhibition of films at d those listed in the column on the left, p	ifferent time	
Sat			(please read guidance note 6)		
Sun					

В

Indoor sporting events Standard days and timings (please read guidance note 7)			Please give further details (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			State any seasonal variations for indoor sporting events (please read guidance note 5)
Wed			
Thur			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
Fri			(please read guidance note 6)
Sat			
Sun			

С

Boxing or wrestling entertainments Standard days and timings (please read			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
	ice note 7			Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please note 4)	read guidance	
Tue					
Wed			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 5)		
Thur					
Fri			Non standard timings. Where you inter premises for boxing or wrestling entert different times to those listed in the col	ainment at	
Sat			please list (please read guidance note 6)		
Sun					

D

Live music Standard days and timings (please read			Will the performance of live music take place indoors or outdoors or both – please tick (please read	Indoors
	nce note 7		guidance note 3)	Outdoors
Day	Start	Finish		Both
Mon			Please give further details here (please note 4)	read guidance
Tue				
Wed			State any seasonal variations for the period of the period seasonal variations for the	erformance of
Thur				
Fri			Non standard timings. Where you inter premises for the performance of live me times to those listed in the column on t	usic at different
Sat			list (please read guidance note 6)	
Sun				

Е

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

F

dance	rmances e ard days a		Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note	Indoors
timing	s (please nce note 7	read	3)	Outdoors
Day	Start	Finish		Both
Mon			Please give further details here (please note 4)	read guidance
Tue				
Wed			State any seasonal variations for the pe dance (please read guidance note 5)	erformance of
Thur				
Fri			Non standard timings. Where you inter premises for the performance of dance times to those listed in the column on t	at different
Sat			list (please read guidance note 6)	
Sun				

G

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 en will be providing	tertainment you	
Day	Start	Finish	<u>Will this entertainment take place</u> indoors or outdoors or both – please	Indoors	
Mon			<u>tick</u> (please read guidance note 3)	Outdoors	
				Both	
Tue Wed			Please give further details here (please note 4)	read guidance	
Thur Fri			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)		
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		
Sun			<u>those listed in the column on the left, p</u> (please read guidance note 6)	lease list	

Η

I

Late night refreshment Standard days and timings (please read		and	Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please	Indoors	
	nce note		read guidance note 3)	Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please note 4)	read guidanc	e
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 inter premises for the provision of late night different times, to those listed in the co	refreshment lumn on the	
Sat			left, please list (please read guidance not	te 6)	
Sun					

Supply of alcohol Standard days and timings (please read			Will the supply of alcohol be for <u>consumption – please tick</u> (please read guidance note 8)	On the premises	
guidar	nce note 7)		Off the premises	
Day	Start	Finish		Both	\checkmark
Mon	08:00	23:00	State any seasonal variations for the su (please read guidance note 5)	ipply of alco	<u>hol</u>
Tue	08:00	23:00			
Wed	08:00	23:00			
Thur	08:00	23:00	Non standard timings. Where you inter premises for the supply of alcohol at di those listed in the column on the left, p	fferent times	
Fri	08:00	23:00	(please read guidance note 6)		
Sat	08:00	23:00			
Sun	08:00	23:00			

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	
Erica De Fatima DIAS CARDOSO	
Date of birth	
Address	
Postcode	
Personal licence number (if known)	To be applied for
Issuing licensing authority (if known)	Herefordshire Council

J

Κ

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

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon	08:00	23:00	
Tue	08:00	23:00	
Wed	08:00	23:00	Non standard timings. Where you intend the premises
Thur	08:00	23:00	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)
Fri	08:00	23:00	
Sat	08:00	23:00	
Sun	08:00	23:00	

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

a) General – all four licensing objectives

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CCTV shall be installed and cover all internal areas, including all public entry and exit points, and the unit shall be positioned in a secure part of the licensed premises. The CCTV system must be maintained and fully operational and recording continually whilst the premises are open to the public.

Access to the system must be allowed immediately to the Police, Trading Standards or an authorised officer of the Licensing Authority in accordance with the Data Protection Act where it is necessary to do so for the prevention of crime and disorder, prosecution or apprehension of offenders or where disclosure is required by law.

All images must be kept for a minimum period of 31 days.

There must be at all times, when the premises is open, a member of staff on duty with access to the CCTV system who is trained in the use of the equipment.

The CCTV system clock must be set correctly and maintained taking account of GMT and BST.

Staff Training

All staff responsible for selling alcohol shall receive induction and/or refresher training (at least annually) commensurate with their role and responsibilities in relation to the sale of alcohol and the times and conditions of the premises licence.

Training shall include the requirement and process for completing both the incident log and refusal log (detailed below), will be documented, and training records will be kept at the premises.

Training records shall be made available to the Police and/or Local Authority upon request and shall be kept for at least one year.

Alcohol Off Sales

Alcohol for consumption off the premises may only be provided in sealed containers.

Patrons are not permitted to remove alcoholic drinks in open bottles/glasses or other open vessel from the licensed premises at any time.

Drinking Up Time

Alcohol sales for consumption on the premises will end 30 mins before closing to provide drinking up time for alcohol already purchased.

b) The prevention of crime and disorder

Refusal Log

There shall be a register for the recording of all alcohol sale refusals, including attempted under-age sales, proxy sales and refusals to those who appear intoxicated.

Details to be recorded shall include the date, time, name (if known), physical description of the person, the reason for the refusal, names of staff involved, and whether the refusal was captured on CCTV.

The register shall be available for immediate inspection by any authorised officer of the responsible authorities and shall be securely retained by the licence holder for a for a period of 12 months from the date of the last entry.

Incident Log

An incident log shall be maintained on the premises to record all incidents and accidents.

Records should include occurrences of: anti-social behaviour, admission refusals, ejections, welfare and safeguarding matters.

The records shall include the date, time, and location of the incident; nature of the incident; personal details and contact information for all people involved including any witnesses, any crime number and details of police officers attending.

Incident and accident records must be kept in a bound register with consecutively numbered pages or electronically on a secure digital system.

The records shall be available for inspection by any authorised officer of the responsible authorities and shall be securely retained by the licence holder for a period of 12 months after the last entry.

c) Public safety

No additional measures than compliance with the statutory requirements of all primary legislation.

d) The prevention of public nuisance

General

The premises licence holder will operate the business with general consideration in respect of the neighbouring properties.

Clear and prominent notices will be displayed in any outdoor public area, and at the exit, requesting patrons be quiet and have consideration for neighbours in the vicinity.

The licence holder shall ensure no noise or vibration emanates from the premises so as to cause a nuisance.

e) The protection of children from harm

Age Verification Scheme – Challenge 25

A challenge 25 age verification scheme will operate at the premises whereby any person who appears to be under 25 years of age, and unknown to the staff member serving as a person over 18 years of age, shall not be served alcohol unless they provide identification to prove they are over 18 years of age.

Acceptable forms of identification will be a valid passport, a valid photo ID driving license or a valid proof of age scheme card with the PASS approved hologram.

Appropriate signage advertising the operation of the Challenge 25 scheme must be displayed in the vicinity of all points of sale for alcohol.

Checklist:

Please tick to indicate agreement

•	I have made or enclosed payment of the fee.	\checkmark
•	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.	\checkmark
•	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)

Privacy Notice

The Licensing Service will store your personal data and share it with other agencies in accordance with Stroud District Council's privacy policy Please see the Council's website www.stroud.gov.uk/privacynotice . Section 1 to 10 is the Council's general privacy notice and section 15 gives details for the Licensing Service.

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.

I	
Declaration	 [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15). The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licesable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15)
Signature	Reba Danson for The Licensing Guys Ltd
Date	22 April 2024
Capacity	Licensing Consultant

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)					
The Licensing Guys, Rural Enterprise Centre Vincent Carey Road Rotherwas Business Park					
Post town	HEREFORD		Postcode	HR2 6FE	
Telephone number (if any)		07890 105387			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) licensing@thelicensingguys.com					



Consent of Individual to being specified as Premises Supervisor

I, Erica De Fatima DIAS CARDOSO

[full name of prospective premises supervisor]

Of

[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for:

Grant of new premises licence

[type of application]

by Erica De Fatima DIAS CARDOSO

name of applicant]

relating to a premises licence <u>Applied for</u> [number of existing licence, if any]

52 St Owen Street, HEREFORD, HR1 2PU

[name and address of premises to which the application relates]

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

Erica De Fatima DIAS CARDOSO

[name of applicant]

concerning the supply of alcohol at

52 St Owen Street, HEREFORD, HR1 2PU

[name and address of premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for/hold a personal licence, details of which I set out below.

Personal licence number

To be applied for

[insert personal licence number, if any]

Personal Licence Issuing Authority

Herefordshire Council

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed	
Name (please print)	Erica De Fatima DIAS CARDOSO
Date	01 April 2024

