

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 Clokken Limited

(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 KFC 47 Upper Brook Street			
Post town	Winchester	Postcode	SO23 8DG
Telephone number at premises (if any)			
Non-domestic rateable value of premises		£ 38000	

Part 2 - Applicant details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- | | | | |
|----|--|-------------------------------------|-----------------------------|
| a) | an individual or individuals * | ☐ | please complete section (A) |
| b) | a person other than an individual * | | |
| | i as a limited company/limited liability partnership | ☒ | please complete section (B) |
| | ii as a partnership (other than limited liability) | ☐ | please complete section (B) |
| | iii as an unincorporated association or | ☐ | please complete section (B) |
| | iv other (for example a statutory corporation) | ☐ | please complete section (B) |
| c) | a recognised club | ☐ | please complete section (B) |
| d) | a charity | ☐ | please complete section (B) |
| e) | the proprietor of an educational establishment | ☐ | please complete section (B) |
| f) | a health service body | ☐ | please complete section (B) |

- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales ☐ please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England ☐ please complete section (B)
- h) the chief officer of police of a police force in England and Wales ☐ please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm (by ticking yes to one box below):

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or ☒

I am making the application pursuant to a

statutory function or ☐

a function discharged by virtue of Her Majesty's prerogative ☐

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr ☐	Mrs ☐	Miss ☐	Ms ☐	Other Title (for example, Rev)	
Surname			First names		
Date of birth			I am 18 years old or over ☐ Please tick ☒ yes		
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					
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 ☐	Mrs ☐	Miss ☐	Ms ☐	Other Title (for example, Rev)	
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Surname		First names	
Date of birth		I am 18 years old or over ☐	Please tick ☒ yes
Nationality			
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service: (please see note 15 for information)			
Current residential address if different from premises address			
Post town		Postcode	
Daytime contact telephone number			
E-mail address (optional)			

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name Clokken Limited
Address Orion Gate Guildford Road Woking GU22 7NJ
Registered number (where applicable) 15217100
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company
Telephone number (if any)
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			
D	D	M	M	Y	Y	Y	Y

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

Restaurant and 'takeaway'

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

What licensable activities do you intend to carry on from the premises?

(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all that apply

- a) plays (if ticking yes, fill in box A) ☐
- 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	☐
				Outdoors	☐
				Both	☐
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon					
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)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 3)		Indoors	☐
					Outdoors	☐
					Both	☐
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 exhibition of films</u> (please read guidance note 5)			
Thur						
Fri			<u>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</u> (please read guidance note 6)			
Sat						
Sun						

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			
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	☐
				Outdoors	☐
				Both	☐
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)		
Wed					
Thur					
			<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)		
Fri					
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)		Indoors	☐
					Outdoors	☐
Day	Start	Finish			Both	☐
Mon			<u>Please give further details here</u> (please read guidance note 4)			
Tue						
Wed			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)			
Thur						
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)			
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)		Indoors	☐
					Outdoors	☐
					Both	☐
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)			
Mon						
Tue			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)			
Wed			<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)			
Thur						
Fri						
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	☐
				Outdoors	☐
				Both	☐
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 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		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	☐
Mon				Outdoors	☐
				Both	☐
Tue			<u>Please give further details here</u> (please read guidance note 4)		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	☐
				Outdoors	☐
				Both	☒
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon		0500			
	2300				
Tue		0500			
	2300		<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
Wed		0500			
	2300				
Thur		0500			
	2300		<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) 23:00 to 01:00 – Sunday through Saturday for customers collecting or dining in (restaurant) 23:00 to 05:00 – Sunday through Saturday (the morning following) for delivery collection. (No customer access into the restaurant after 1am).		
Fri		0500			
	2300				
Sat		0500			
	2300				
Sun		0500			
	2300				

J

Supply of alcohol Standard days and timings (please read guidance note 7)			<u>Will the supply of alcohol be for consumption – please tick</u> (please read guidance note 8)		On the premises	☐
					Off the premises	☐
					Both	☐
Day	Start	Finish	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5)			
Mon						
Tue						
Wed						
Thur						
Fri						
Sat						
Sun						
<u>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</u> (please read guidance note 6)						

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name NO ALCOHOL TO BE SOLD	
Date of birth	
Address	
Postcode	
Personal licence number (if known)	
Issuing licensing authority (if known)	

K

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 9).

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variations</u> (please read guidance note 5)
Day	Start	Finish	
Mon		0500	
	0930		
Tue		0500	
	0930		
Wed		0500	
	0930		
Thur		0500	
	0930		
Fri		0500	
	0930		
Sat		0500	
	0930		
Sun		0500	
	0930		

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)

09:30 to 05:00 the following morning every day of the week.

After 01:00 on any day of the week the premises will operate a delivery collection service only.

(No customer access into the restaurant after 1am).

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)

After 01:00 on any day of the week the premises will operate a delivery collection service only. No customers will be permitted in the premises after 1am.

The premises licence holder shall train all staff for their job and function on the premises in a suitable manner. This training shall be written into a programme of ongoing review and will be made available to relevant responsible authority upon request. In addition to this, training shall be provided to all staff engaged, or to be engaged, related to:

- a. General safety
- b. Fire and other emergencies
- c. Allergens policy

The premises licence holder shall ensure that deliveries are made to bona fide residents of bona fide residential and commercial delivery addresses only. No delivery shall be made to open air locations in the immediate vicinity of the licensed premises.

b) The prevention of crime and disorder

CCTV will be in operation at the premises:

- a. The CCTV system shall be fully operational at the commencement of the licence.
- b. The CCTV equipment shall be maintained in good working order and continually record when licensable activity takes place.
- c. The premises licence holder shall ensure images from the CCTV are retained for a period of 31 days.
- d. The premises licence holder shall ensure that there are trained members of staff available during licensable hours to be able to disclose CCTV images to officers upon request.
- e. The premises licence holder shall provide, subject to GDPR, such images at the request of an authorised officer of the licensing authority or the local constabulary.
- f. There shall be clear signage indicating that CCTV equipment is in use and recording at the premises during all licensable hours.

An incident log shall be maintained at the premises and made available on request to an authorised officer, the Local Authority or Police. The register shall record the following:

- a. All crimes reported to the venue.
- b. All ejections of patrons.
- c. Any complaints received concerning crime and disorder.
- d. Any incidents of disorder.
- e. All seizures of drugs or offensive weapons.
- f. Any visit by a relevant authority or emergency service

c) Public safety

No accumulation of combustible rubbish, dirt, surplus material or stored goods shall be permitted to remain in any part of the premises except in an appropriate place and of such quantities so as not to cause a nuisance, obstruction or other safety hazard.

Notices detailing the action to be taken by staff in the event of fire or other emergencies including how the fire service can be summoned shall be prominently displayed and shall be protected from damage or deterioration

d) The prevention of public nuisance

All extract and ventilation ducting will be maintained and serviced regularly. All such ducting to be suitably attenuated.

Delivery collectors will be obliged to adhere to a code of conduct to as to control and limit sound generation. This will include

- a. Lawful and legitimate parking of vehicles, including bicycles
- b. Not congregating in proximity to residential property
- c. Utilising litter facilities outside premises

The premises licence holder shall ensure that vehicles used for the purpose of delivering products to customers do not sound vehicle horns or leave engines running unnecessarily.

The premises licence holder shall ensure that prominent, clear and legible notices are displayed at all exits, requesting customers to respect the needs of nearby residents and to leave the premises and area quietly.

The premises licence holder shall ensure that adequate waste receptacles are provided for use by customers in the vicinity of the premises.

e) The protection of children from harm

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee. ☒
- I have enclosed the plan of the premises. ☒
- I have sent copies of this application and the plan to responsible authorities and others where applicable. ☒
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable. ☒
- I understand that I must now advertise my application. ☒
- I understand that if I do not comply with the above requirements my application will be rejected.
- [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15). ☐

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Declaration

- [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)

Signature

Date 26 May 2026

Capacity Solicitor to 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)

Matthew Phipps
TLT Solicitors
One Redcliff Street

Post town

Bristol

Postcode

BS1 6TP

Telephone number (if any)

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)

