

Minor Variation

Review

Please review the details to below to ensure they are correct before proceeding. If the details shown are not correct, click previous to enter the correct licence number.

Current Licence number	23/0271/LADPS1
Current Premises address	290 Eastrea Road Whittlesey Peterborough Cambridgeshire PE7 2AE

Premises/Club Premises Details

I, being the premises licence holder(s)/club holding a club premises certificate, apply to vary a premises licence under section 41A/club premises certificate under section 86A of the Licensing Act 2003.

Please select the relevant licence type. *	Premises Licence
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Premises/Club Premises Details

Address *	290 Eastrea Road Whittlesey Peterborough Cambridgeshire PE7 2AE
Telephone Number at premises (if any)	01827 710800
Premises Licence/Club Certificate Number *	23/0271/LADPS1
Brief Description of Premises *	Supermarket

Proposed Variation

Do you want the variation to have effect as soon as possible? *	Yes
If not, from what date do you want the variation to take effect?	

Proposed Variation

Do you want the proposed variation to have effect in relation to the introduction of the late night levy? (Please see Guidance Note 3) *

No

Proposed Variation

Please describe the proposed variation(s) in detail in the box below and explain why you consider that they could not have an adverse effect on the promotion of any of the licensing objectives (See Guidance Note 1). This should include whether new or increased levels of licensable activities will be taking place indoors or outdoors (indoors may include a tent).

Details of proposed variation(s) (Please see Guidance Note 4) *

Amendment to the current approved plan to show a reconfiguration to the tills.

Operating Schedule

Provision of regulated entertainment. Please tick those parts of the Operating Schedule which would be subject to change if this application to vary was successful. (please read guidance note 5) *

☐

Plays

☐

Films

☐

Indoor sporting events

☐

Boxing or wrestling entertainment

☐

Live music

☐

Recorded music

☐

Performances of dance

☐

Anything of a similar description to that falling within (e), (f) or (g)

☐

Late night refreshment provided

Operating Schedule



Alcohol to be provided

Operating Schedule

Please select an option to indicate if you will return the following:

I agree to return the original premises licence / club premises certificate or the relevant part of the original premises licence / club premises certificate: *

Yes

Note: This application cannot be processed until the original licence is received or a statement as to why it cannot be returned has been accepted.

Operating Schedule

I will upload/return a copy of the plan. (This is necessary if the proposed variation will affect the layout). *

Yes

You may upload a copy of the plan as a later step within this form

Any further information to support your application. (See Guidance Note 6)

No change in licensable activities or hours of operation.

Declaration

Declaration Type *

Sole Applicant/Premises Licence Holder

Declaration - Premises Licence Holder

I have enclosed the plan, if appropriate, of the premises in scale [1mm to 100mm], unless otherwise agreed with the licensing authority. I understand I must now return the original premises licence/club premises certificate, or relevant part of it or have provided an explanation why I will not be able to do this. I understand that if I do not comply with the above requirements my application will be rejected. I understand that I must now advertise my application for a continuous period beginning on the first working day after the day on which the application was given to the relevant licensing authority and ending at the expiry of the ninth consecutive working day after that day. 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. Declaration to be completed by the applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (see Guidance Notes 7 & 8). If signing/applying on behalf of the applicant, please state your name and in what capacity you are authorised to sign/apply. When submitting an on-line application form the 'Declaration made' checkbox must be selected.

Full Name *

01/09/2025

Date *

Declaration - Premises Licence Holder

Capacity *

Applicant's Solicitor



Declaration Made

Do you wish to provide alternative correspondence details? *

Yes

Correspondence Address

This is the address which we shall use to correspond with you about this application. This might not be the same as the address of the premises or applicant, but these addresses must also be provided. Contact Name (where not previously given) and address for correspondence associated with this application (See Guidance Note 10).

Title

Mrs

First Name

[REDACTED]

Surname

[REDACTED]

Street Address *

First Floor

Address line 2

Two Colton Square

Address line 3

Town/City *

Leicester

Postcode *

LE1 1QH

Telephone number

[REDACTED]

Email address *

[REDACTED]

Email confirmation

On submission an email confirmation will be sent using the details below

Forename

[REDACTED]

Email confirmation

Surname /Company Name

Email *

Telephone