## Fenland District Council - PREMLI

Fenland Hall, County Road, March, Cambs, PE15 8NQ

**T**: 01354 654321

E: licensing@fenland.gov.uk

## Vary a Premises Licence

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 Premises address	5 Lynn Road Wisbech Cambridgeshire PE13 3DB	
Premises Details		
Premises Licence Number *	25/0751/LAPRE1	
Premises Address *	5 Lynn Road Wisbech Cambridgeshire PE13 3DB	
Telephone Number at Premises (if any)		
Non-domestic rateable value of premises. *	£ 4950	
Variation		
Do you want the proposed variation to take effect as soon as possible? *	Yes	
Variation		
Do you want the proposed variation to have effect in relation to the introduction of the late night levy? (Please see Guidance Note 1)*	No	
Briefly describe the nature of the proposed variation. (Please see Guidance Note 2) *	"Vary the opening hours of the Premises Licence for the sale of alcohol for consumption off the premises as Monday to Sunday: 06.00 – 00.00"	

Variation		
If your proposed variation would mean that 5,000 or more people are expected to attend the premises at any one time, please state the number.		
Operating Schedule		
Complete those parts of the Operating Schedule below which would be subject to change if this application to vary is successful.		
Provision of regulated entertainment (please read guidance note 3) *		
Plays		
Films		
Indoor Sporting Events		
Boxing or Wrestling		
Live Music		
Recorded Music		
Performances of Dance		
Anything of a similar description falling under Music or Dance		
Provision of late night refreshment		
✓ Supply of Alcohol		
Type of Variation - Supply of Alcohol		
Please select the type of variation that applies to this activity.  * Add a new Activity		

Supply of Alcohol Standard Times		
Standard days and timings, where you intend to use the premises for the supply of alcohol. (please read guidance note 8) * Please enter times in 24hr format (HH:MM)		
Day *	Every Day	
	06:00	
	00:00	
Supply of Alcohol		
Will the supply of alcohol be for consumption on premises or off premises or both? (please read guidance note 9) *	Off the premises	
State any seasonal variations for the supply of alcohol. (please read guidance note 6)		
Please state any non-standard timings, where you intend to use the premises for the supply of alcohol at different times from the Standard days and times listed? (please read guidance note 7)		
Adult Entertainment		
Adult Entertainment		
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 10)	N/A	
Opening Hours Standard Times		
Standard days and timings, where the premises are open to the public. (please read guidance note 8) * Please enter times in 24hr format (HH:MM)		
Day *	Every Day	
	06:00	
	00:00	
Variation		

Variation		
Please identify those conditions currently imposed on the licence which you believe could be removed as a consequence of the proposed variation you are seeking.		
I agree to return the original premises licence or the relevant part of the original premises licence: *	Yes	
Note: This application cannot be processed until the original licence is received or a statement as to why it cannot be returne has been accepted.		
Licensing Objectives		
Describe any additional steps you intend to take to promote the	e four licensing objectives as a result of the proposed variation:	
a) General - all four licensing objectives (b, c, d and e) (please read guidance note 11)		
b) The prevention of crime and disorder	CCTV system in place. Recordings kept for a minimum 31 days and made available to police upon request. All staff will receive regular training on preventing crime and disorder. refusals log will be maintained. The register will be checked regularly by management. An incident log will be maintained Alcohol will not be sold to anyone who appears to be drunk or behaving aggressively. Challenge 25 policy will be implemented.	
c) Public safety	Notices warning customers not to leave bag unattended. Signs placed stating restrictions on sale of liquor under 18. Challenge 25 Policy to be maintained. Inform the use of CCTV Cameras. Fire Extinguisher to be maintained An accident book will be maintained Serious incidents will be reported to the relevant authorities where required. Floors will be kept clean, dry, and free of obstacles to reduce the risk of slips and falls	
d) The prevention of public nuisance	Discourage and report to police any groups of youths hanging outside the premises. Last admission is between 23.50-23.55 (Monday to Sunday). There will be no disturbances by staff leaving the premises after closing hours. Deliveries and waste collections will take place during reasonable daytime hours to minimise disturbance	
e) The protection of children from harm	request of age of proof cards for children. Trained staff for prevention of any kinds of incidents of violence and disorder. A refusals log will be maintained and reviewed regularly by management. Providing training for staff to recognize false identification. A Challenge 25 age verification policy in place. Anyone who appears to be under 25 will be asked to produce valid photo ID. Staff will receive training on how to verify ID and handle refusals appropriately.	

**Declarations** 

	<b>Ref:</b> DSFX1763501180460	
Declarations		
Declaration Type *	Sole Applicant - Individual or Other	
Declarations		
I have made or enclosed payment of the fee or. I have not made or enclosed payment of the fee because this application has been made in relation to the introduction of the late night levy. I have sent copies of this application and the plan to responsible authorities and others where applicable. I understand I must now advertise my application. I understand I must now return the original premises licence, 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.		
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		
Signature/Declaration of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (see Guidance Note 13). 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 *		
Date *	18/11/2025	
Capacity *	Applicant	
✓ Declaration made		
Do you wish to provide alternative correspondence details? *	Yes	
Alternative Correspondence Address		
This is the address which we shall use to correspond with you about this application.		
Please provide Contact Name (where not previously given) and postal address for correspondence associated with this application (See guidance note 15).		
Title *		
First name *		
Surname *		
Street address *		

Address line 2

Alternative Correspondence Address		
Address line 3		
Town/City *		
County		
Postcode *		
Telephone Number		
Email Address *		
Email confirmation		
On submission an email confirmation will be sent using the details below		
Forename		
Surname /Company Name		
Email *		
Telephone		