

Chauvo Recd E1381

Chauvo no
104286

Application for a premises licence
under the Gambling Act 2005 (standard form)

APPENDIX A

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

If you are completing this form by hand, please write legibly in block capitals using ink. Use additional sheets if necessary (marked with the number of the relevant question). You may wish to keep a copy of the completed form for your records.

Where the application is—

- In respect of a vessel, or
- To convert an authorisation granted under the Betting, Gaming and Lotteries Act 1963 or the Gaming Act 1968,

the application should be made on the relevant form for that type of premises or authorisation.

Part 1 – Type of premises licence applied for

- Regional Casino Large Casino Small Casino
 Bingo Adult Gaming Centre Family Entertainment Centre
 Betting (Track) Betting (Other)

Do you hold a provisional statement in respect of the premises? Yes No

If the answer is "yes", please give the unique reference number for the provisional statement (as set out at the top of the first page of the statement):

Part 2 – Applicant Details

If you are an individual, please fill in Section A. If the application is being made on behalf of an organisation (such as a company or partnership), please fill in Section B.

COUNTY COUNCIL

11 DEC 2020

Section A

Individual applicant

PUBLIC PROTECTION
ABERGAVENTNY OFFICE

1. Title: Mr Mrs Miss Ms Dr Other (please specify)

2. Surname: DANTER Other name(s): HEAVY

[Use the names given in the applicant's operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence]

3. Applicant's address (home or business – [delete as appropriate]):

SYMONDS YAT LOWER PARK
NR Ross - ON - WYE
HERG FORD JURE

Postcode: HR9 6BY

4(a) The number of the applicant's operating licence (as set out in the operating licence):

~~000 000 000~~

4(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:

5. Tick the box if the application is being made by more than one person.

[Where there are further applicants, the information required in questions 1 to 4 should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants".]

Section B

Application on behalf of an organisation

6. Name of applicant business or organization:

[Use the names given in the applicant's operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence.]

7 The applicant's registered or principal address:

Postcode:

8(a) The number of the applicant's operating licence (as given in the operating licence):

8(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:

9. Tick the box if the application is being made by more than one organisation.

[Where there are further applicants, the information required in questions 6 to 8 should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants".]

Part 3 - Premises Details

10. Proposed trading name to be used at the premises (if known):

CAROUSEL

11. Address of the premises (or, if none, give a description of the premises and their location):

2-4 MANMOUTH STREET
MANMOUTH

Postcode: NP25 3EE

12. Telephone number at premises (if known): 01600 772770

Part 5 - Miscellaneous

17. Proposed commencement date for licence (leave blank if you want the licence to commence as soon as it is issued): ~~1st~~ (dd/mm/yyyy)

18(a). Does the application relate to premises which are part of a track or other sporting venue which already has a premises licence? Yes [delete as appropriate]

18(b). If the answer to question 18(a) is yes, please confirm by ticking the box that an application to vary the main track premises licence has been submitted with this application.

19(a). Do you hold any other premises licences that have been issued by this licensing authority? Yes [delete as appropriate]

19(b). If the answer to question 19(a) is yes, please provide full details:

20. Please set out any other matters which you consider to be relevant to your application:

Part 6 - Declaration and Checklist (Please tick)

I/ We confirm that, to the best of my/ our knowledge, the information contained in this application is true. I/ We understand that it is an offence under section 342 of the Gambling Act 2005 to give information which is false or misleading in, or in relation to, this application.

I/ We confirm that the applicant(s) have the right to occupy the premises.

Checklist:

- Payment of the appropriate fee has been made/is enclosed
- A plan of the premises is enclosed
- I/ we understand that if the above requirements are not complied with the application may be rejected
- I/ we understand that it is now necessary to advertise the application and give the appropriate notice to the responsible authorities

13. If the premises are in only a part of a building, please describe the nature of the building (for example, a shopping centre or office block). The description should include the number of floors within the building and the floor(s) on which the premises are located.

Just Ground Floor above is office and Storage.

14(a) Are the premises situated in more than one licensing authority area?

Yes/No [delete as appropriate]

14(b). If the answer to question 14(a) is yes, please give the names of all the licensing authorities within whose area the premises are partly located, other than the licensing authority to which this application is made:

Part 4 – Times of operation

15(a). Do you want the licensing authority to exclude a default condition so that the premises may be used for longer periods than would otherwise be the case? Yes/No [delete as appropriate] [Where the relevant kind of premises licence is not subject to any default conditions, the answer to this question will be no.]

15(b). If the answer to question 15(a) is yes, please complete the table below to indicate the times when you want the premises to be available for use under the premises licence.

	Start	Finish	Details of any seasonal variation
Mon	11.00 h:mm	22.00 h:mm	
Tue	10.00	22.00	
Wed	10.00	22.00	
Thurs	12.00	22.00	
Fri	10.00	22.00	
Sat	10.00	22.00	
Sun	10.00	22.00	

16. If you wish to apply for a premises licence with a condition restricting gambling to specific periods in a year, please state the periods below using calendar dates:

Part 7 - Signatures

21. Signature of applicant or applicant's solicitor or other duly authorised agent. If signing on behalf of the applicant, please state in what capacity:

Signature:



Print Name: HENRY PANTER

Date: 1.12.20 (dd/mm/yyyy) Capacity:

22. For joint applications, signature of 2nd applicant, or 2nd applicant's solicitor or other authorised agent. If signing on behalf of the applicant, please state in what capacity:

Signature:

Print Name:

Date: (dd/mm/yyyy) Capacity:

[Where there are more than two applicants; please use an additional sheet clearly marked "Signature(s) of further applicant(s)". The sheet should include all the information requested in paragraphs 21 and 22.]

[Where the application is to be submitted in an electronic form, the signature should be generated electronically and should be a copy of the person's written signature.]

Part 8 - Contact Details

23(a) Please give the name of a person who can be contacted about the application:

Henry Panter

23(b) Please give one or more telephone numbers at which the person identified in question 23(a) can be contacted:

0397641330

24. Postal address for correspondence associated with this application:

Symonds Yat Leisure Park
Nr Ross-on-Wee
Herefordshire

Postcode: HR9 6BY

25. If you are happy for correspondence in relation to your application to be sent via e-mail, please give the e-mail address to which you would like correspondence to be sent:

Henry.Panter@bt.com

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Part 2 of application

The persons or organisations making the application are as follows:

Name of 1st Applicant: **Henry Denton**

[Give the full name of the applicant as set out in Part 2 of the application for a premises licence is more than one applicant]

Address of 1st Applicant:

Signons got Leisure park

**Nr. Russ-on - ~~Wye~~ Wye
Herefordshire**

Postcode: **HR9 6BY**

[Give the full address of the applicant as set out in Part 2 of the application for a premises licence]

The number of the operating licence held by 1st Applicant is:

The 1st Applicant applied for an operating licence on

[Delete as appropriate. Insert the reference number of the applicant's operating licence (as set out in the operating licence). Where an application for an operating licence is in the process of being made, indicate the date on which the application was made.]

Name of 2nd Applicant:

[Give the full name of the applicant as set out in Part 2 of the application for a premises licence is more than one applicant]

Address of 2nd Applicant:

Postcode:

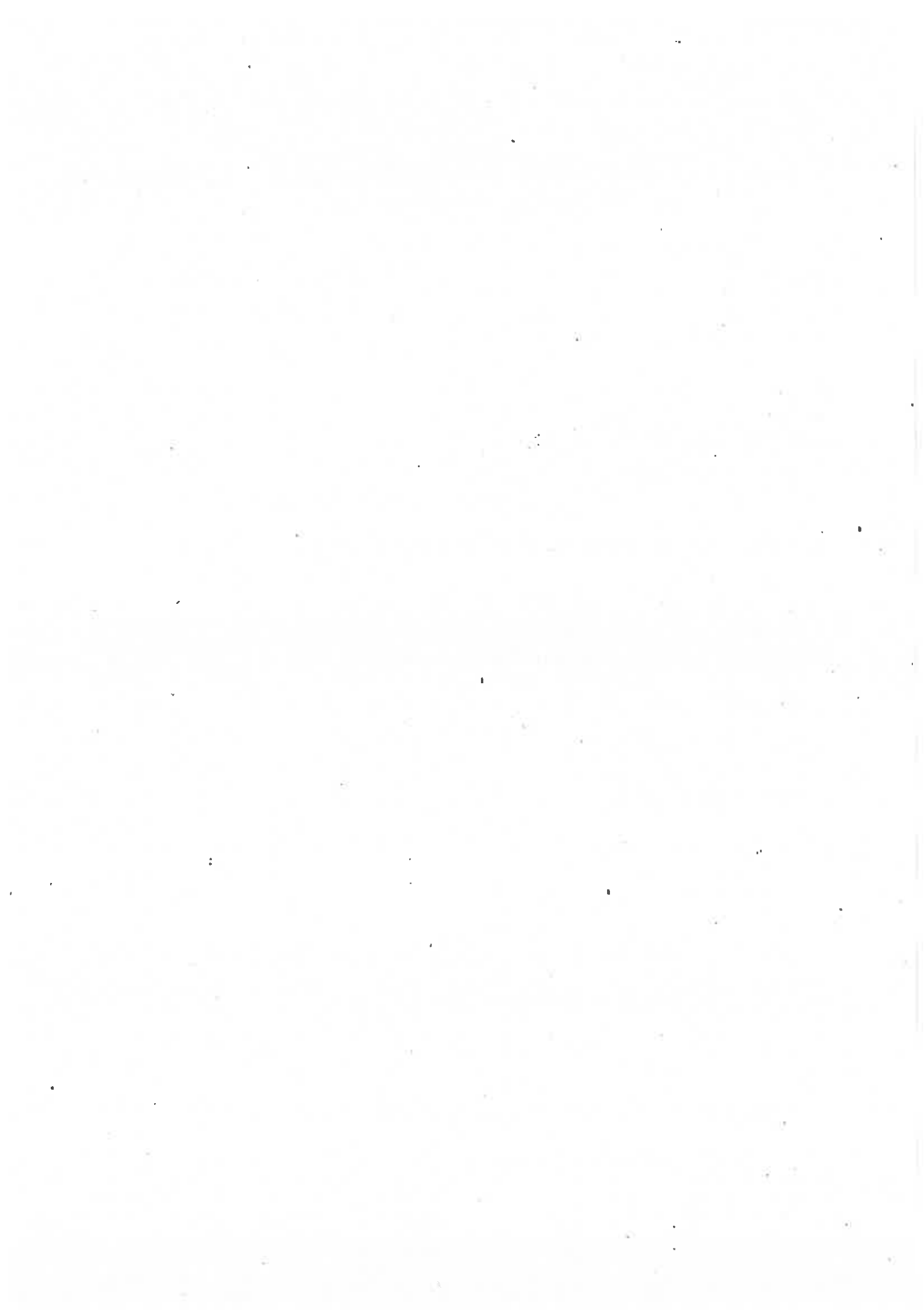
[Give the full address of the applicant as set out in Part 2 of the application for a premises licence]

The number of the operating licence held by 2nd Applicant is:

The 2nd Applicant applied for an operating licence on

[Delete as appropriate. Insert the reference number of the applicant's operating licence (as set out in the operating licence). Where an application for an operating licence is in the process of being made, indicate the date on which the application was made.]

[Where there are more than two applicants, also give the same information for the other applicants.]

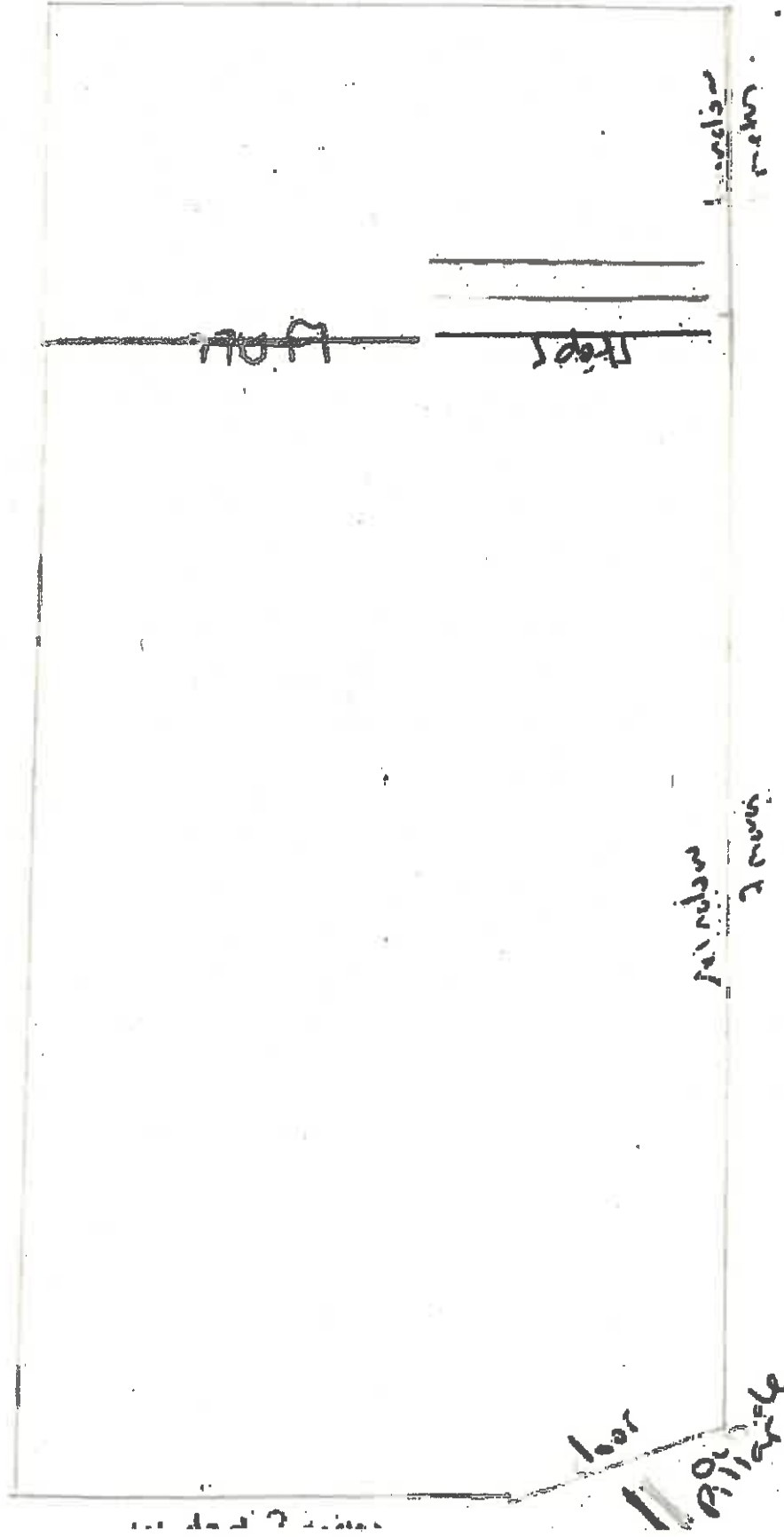


Shoe Floor Plans

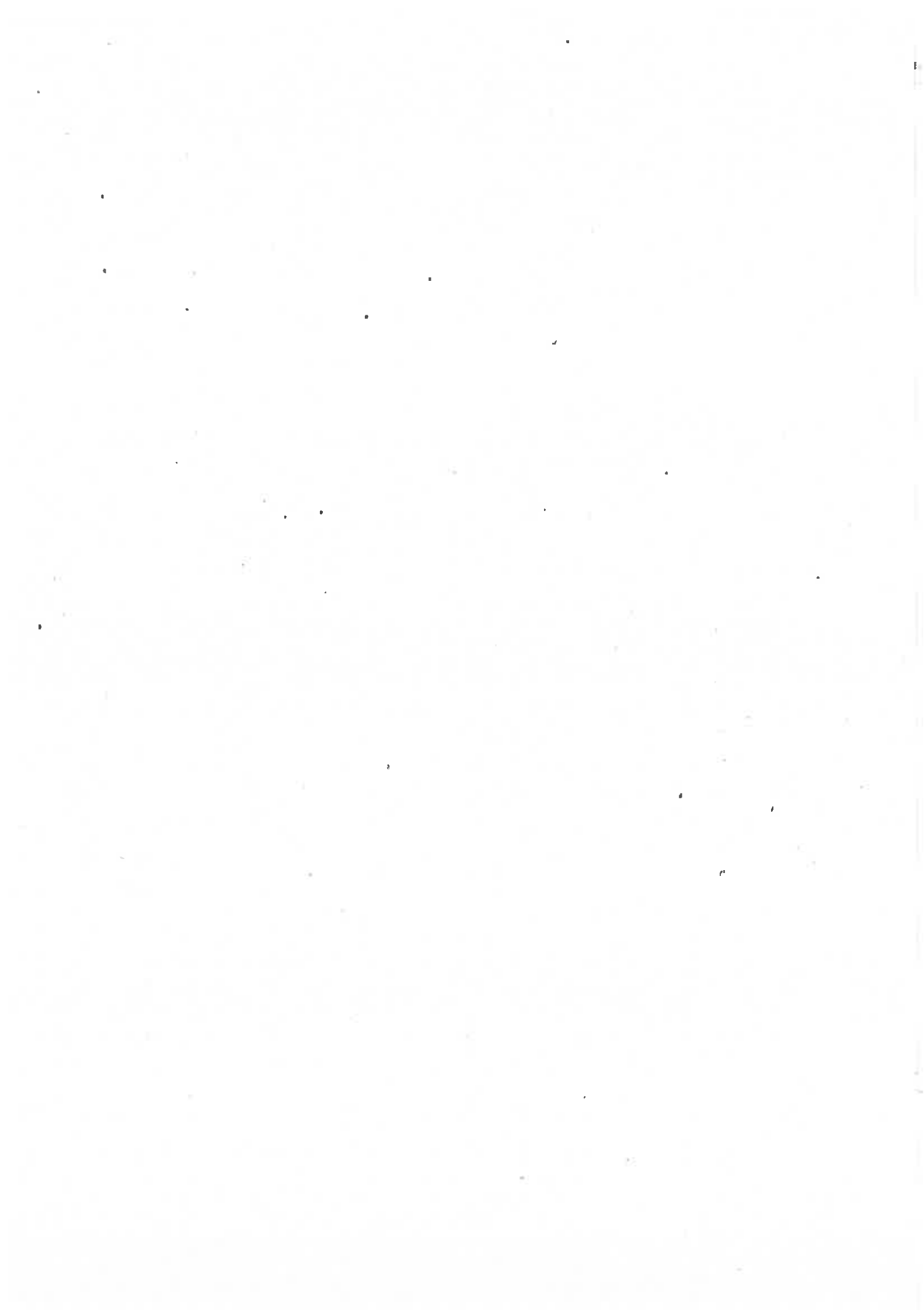
2-4 Narrow Stairs

• 1 Door for entry & exit

Narrow



High Stairs



LOCAL GAMBLING RISK ASSESSMENT
CAROUSEL AMUSEMENTS
MONNMOW STREET
MONMOUTH

Category of Premises AGC

Operating Company Blasemere Limited

Operating Licence Number 000-001183-N-103720-001

Prepared by Christine Collins on 10th January 2021 as authorised by Henry Danter Managing Director Blasemere Limited.

This risk assessment is undertaken as part of our licensing responsibility to provide such assessment at each of our gambling premises, to mitigate and control the risks associated with the premises as identified in the licensing authorities policy.

This is the latest review and takes into account any changes in local circumstances.

Local area profile

Carousel Amusements is an adult gaming centre situated in the town centre of Monmouth on Agincourt Square. There are schools in the area but entry is strictly monitored to prevent anyone under the age of 18 from accessing the gambling facilities. There is one licensed betting shop in the town but no adult gaming centres. There does not appear to be a risk to vulnerable people and no nearby rehabilitation centres.

There are no specific problems with crime and anti-social behaviour and no one under the age of 18 will be allowed access. Entry is strictly monitored with age verification for all who look under the age of 21.

We believe that the access to the gaming centre is sufficient to police and prevent access by under aged customers. We have CCTV surveillance with a pay booth located with good visibility of the entrance. There is only the one entrance and exit.

**The following risk assessment is based on the three main licensing objectives.
That is;**

- A. To prevent gambling from being a source of crime.**
- B. To ensure that gambling is conducted in a fair and open way.**
- C. To protect children and other vulnerable people from being harmed by gambling.**

Risk Assessment	Category	level of risk	Impact	Control System	Risk Management
Children entering premises	C	medium	Severe to child	Design of access	Cash desk opposite entrance . CCTV monitoring and staff training programme. Clear signage. Staff to challenge any person suspected to be under the age of 21 and to ask for photograph identification.
Vulnerable people gambling beyond their means and out of control	C	low	Moderate to business Severe to gambler	Systems	staff training and customer interaction policy
Customer complaints and manner dealt with.	C	low	Moderate to business Severe to gambler	Systems	machine looked at by trained staff and problem rectified. Machine turned off if immediate fix not possible. Complaints forms available on request. Machines purchased from companies of repute.
Failure to supply customers with information about responsible gambling	C	low	Severe to business Severe to customers	Physical Systems	notices advising to stay in control and leaflets available for customers. Helpline numbers available. Management to ensure availability of leaflets.
Failure to properly administer the self exclusion process and it's effectiveness.	C	low	Severe to business Severe to customers	Physical Systems	arcade monitored by staff and cctv at all times to identify excluded customers. Self exclusion forms available at all times and records kept of those excluded.

Self exclusion forms to be circulated with other own premises and with local gambling businesses so that they may take appropriate action.

Poor security increasing risk of crime.	A	low	Severe to business Severe to customers	Physical Systems	Intruder alarms installed and CCTV systems. staff checks on floor levels.
Awareness of residential facilities for the vulnerable	C			Systems	no care homes or facilities for the vulnerable in the area.
Awareness of gambling care agencies in the local area	C			Systems	no facilities in the local area.
Problem gambling	C	medium	Severe to business Severe to customers	Physical Systems	Ensuring at least one fully trained member of staff on duty to interact with any customer suspected of gambling beyond their means. That member of staff being aware of the need to log such interaction and the means open to them for taking action to prevent such gambling. Ensuring that all other staff are aware of the procedure and authorized member of staff.