[Insert name and address of relevant licensing authority and its reference number (optional)] MID SUSSEX DISTRICT COUNCIL

# Application for a Minor Variation to a Premises Licence or Club Premises Certificate 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, especially Note 1.

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 in black ink. Use additional sheets if necessary.

Once completed please send your application to the relevant licensing authority. You may wish to keep a copy of the completed form for your records.

ALLIANCE PROPERTY HOLDINGS LIMITED	(Insert name(s) of applicant
being the premises licence holder(s)/club holding a Club Prem premises licence under section 41A/club premises certificate u 2003 for the premises described in Part 1 below.	
Part 1 - Premises details	
Postal address of premises (or, if none, ordnance survey map MORRISONS DAILY 44 KEYMER ROAD	o reference or description)
Post town HASSOCKS	Postcode BN6 8AR
Telephone number at premises (if any)	
[Premises licence number][Club Premises Certificate	e number]
PWA0438	
Brief description of premises (Please see Guidance Note 2 CONVENIENCE STORE.	2)
Part 2 - Applicant Details [I am][We are] the [premises licence holder][Club Premises Ceappropriate)	ertificate holder]. (Please delete as
Contact phone number in working hours (if any)	

Applicant Postal address IF DIFFERENT FROM PREMISES ADDRESS	
Post town	Postcode
Please provide email address if you would prefer us to co	ntact you by email (optional)
Part 3 - Proposed variation(s)	Please tick
Do you want the proposed variation to have effect as soon	as possible?
If not, from what date do you want the variation to take effe	DDMMYYYY ct?
Do you want the proposed variation to have effect in relatevy? (Please see Guidance Note 3)	ation to the introduction of the late night  Yes  No
Please describe the proposed variation(s) in detail consider that they could not have an adverse effect objectives (See Guidance Note 1). This should includicensable activities will be taking place indoors or out	on the promotion of any of the licensing ade whether new or increased levels of
Details of proposed variation(s) (Please see Guidance	Note 4)
TO PERMIT MINOR ALTERATIONS TO THE LAYOUT (	OF THE PREMISES TO INCLUDE:-
<ul><li>8 bays removed from the gondolas</li><li>1 bay removed from wall side</li></ul>	
IN VIEW OF THE NATURE OF THE PROPOSED VARIA ADVERSE EFFECT ON THE PROMOTION OF THE LICE	

Details of proposed variation(s) (Continued)	
Part 4 - Operating Schedule	
Please tick those parts of the Operating Schedule which would be subject to change if the to vary was successful.	s application
Provision of regulated entertainment (please read Guidance Note 5)	
Please tick all the	nat apply
a. plays	
b. films	
c. indoor sporting events	
d. boxing or wrestling entertainment	
e. live music	
f. recorded music	
g. performances of dance	
h. anything of a similar description to that falling within (e), (f) or (g)	
Provision of late night refreshment	
Supply of alcohol  (Note that this can only relate to reducing licensed hours, or moving them without any over between 7am and 11pm)	] erall increase
Please tick to indicate you have enclosed the following:	
I have enclosed the premises licence/Club Premises Certificate	<b>✓</b>
I have enclosed the relevant part of the premises licence/ Club Premises Certificate	<b>✓</b>
I have included a copy of the plan (this is necessary if the proposed variation will affect the layout)	<b>✓</b>

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If you have not ticked one of the previous three boxes, please explain why in the box below.

Reasons why you have not enclosed the premises licence/Club Premises Certificate or relevant parts.	
Any further information to support your application. (See Guidance Note 6)	
CHECKLIST:	
Please tick to indicate agreement	
<ul> <li>I have made or enclosed payment of the fee; or</li> </ul>	]
<ul> <li>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.</li> </ul>	]
<ul> <li>I have enclosed the plan, if appropriate, of the premises in scale [1mm to 100mm], unless otherwise agreed with the licensing authority.</li> </ul>	]
I have enclosed the premises licence/Club Premises Certificate or relevant part of it or provide an explanation.	∍d ]
<ul> <li>I understand that if I do not comply with the above requirements my application will be rejected.</li> </ul>	]
• I understand that I must now advertise my application for a continuous period beginning on th 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.

## Part 5 - Signatures and Contact Details

(See Guidance Note 7)

<u>Premises Licence:</u> Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (see Guidance Note 8). If signing on behalf of the applicant, please state your name and in what capacity you are authorised to sign:

Signature	GOSSCHALKS LLP	
Date	10/09/2025	
Capacity	SOLICITORS ON BEHALF OF APPLICANT	

Where the premises licence is jointly held, signature of 2nd applicant (the current premises licence holder) or 2nd applicant's solicitor or other authorised agent (see Guidance Note 9). If signing on behalf of the applicant, please state in what capacity.

Signature	
Date	
Capacity	

### Where the premises are a club

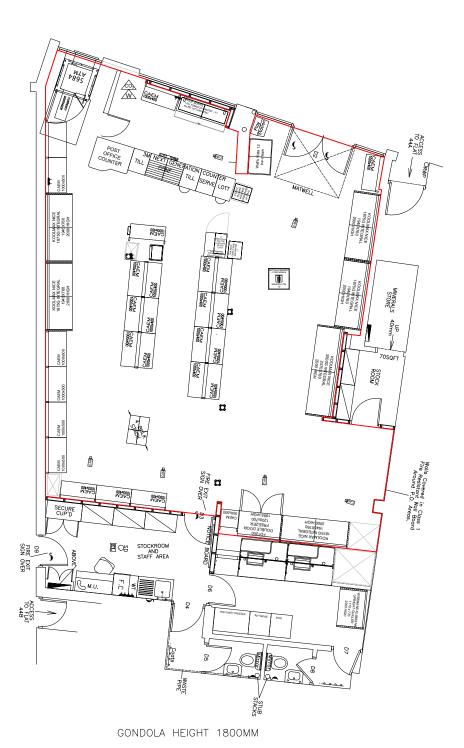
I (insert full name) authority to bind the club.

make this application on behalf of the club and have

Signature	
Date	
Capacity	

Contact name (where not previously given) and address for correspondence associated with this application (see Guidance Note 10)

Post town	Postcode
Telephone number (if any)	If you would prefer us to correspond with you by email your email address (optional)



#### FIRE SIGNAGE:

FIRE SIGNAGE:

CIENT SIGNAGE:

FIRE EXIT SIGN WITH DIRECTIONAL ARROW

FIRE EXIT SIGN WITH RUNNING MAN

FIRE EXTINGUISHER - WATER

FIRE EXTINGUISHER - CO2

FIRE EXTINGUISHER - COA

FIRE EXTINGUISHER - FOAM

FIRE EXTINGUISHER - FOAM

FIRE BELISOUNDER

SMOKE DETECTOR

BREAK GLASS POINT

F. P. FIRE ALARM PANEL

F. P. FIRE ALARM PANEL

F. D. FIRE DOOR

F.A. FIRE ACTION SIGNAGE

F.A. F

FIRE FIGHTING EQUIPMENT & ALL OF THE REQUIREMENTS OF THE FIRE SERVICE WILL BE INCORPORATED & WILL BE PROVIDED TO COMPLY WITHE THE EUROPEAN STANDARDS

#### No. BSEN3 & BS7863.

2. ALL WALL/PERIMETER FIXTURES TO A HEIGHT OF 2.1M

# 4. COUNTER HEIGHT 965MM

FIRE STANDARDS:

LLUMINATED "EXIT" SIGNS ARE TO CONFORM TO BS2560
 FIRE FIGHTING EQUIPMENT IS TO COMPLY WITH EUROPEAN STANDARDS BS EN3 AND BS 7863

# HASSOCKS 44 KEYMER ROAD

44 Keymer Road, Hassocks, West Sussex BN6 8AB

893-SK3-BWSL-002

RETAIL SALES AREA

1138 Sq. Ft

Scale: **1:100** 





Wm MORRISON SUPERMARKETS LTD Property & Development Division Hilmore House, Gain Lane, Bradford, BD3 7DL Tel: 0845 611 6000