



Hackney Best Bar None Award Scheme



On Licence
Application Form

Applicant's Details

APPLICANT NAME	
PREMISES NAME	
PREMISES ADDRESS	
TELEPHONE NUMBER	
MOBILE NUMBER	
AREA MANAGER NAME (If applicable)	
AREA MANAGER ADDRESS (If applicable)	
DPS NAME	
DPS PERSONAL LICENCE NUMBER	
TELEPHONE NUMBER	
MOBILE NUMBER	
PREMISES LICENCE NUMBER	

Please tick one of the following boxes that you feel best describes your licensed premises:

<input type="checkbox"/> PUB/BAR
<input type="checkbox"/> CLUB
<input type="checkbox"/> RESTAURANT (where alcohol can be sold separately to table meals)

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If you require more space to answer the questions, please add additional sheets to the Application Form.
Please complete this Application Form as fully as possible.
Please use the tick boxes where applicable.

SECTION A

PREVENTION OF CRIME & DISORDER

CAPACITY

A1 What is your estimated or actual capacity?

Indoor _____

Outdoor _____

A2 How do you manage your capacity?

- Clickers Ticket sales Head Count Use of comfort factor
 Other (please specify)

A3 How do you monitor and react to any particular areas of your premises which may become overcrowded? (include details of planning for an unusual event eg a televised football match, New Year's Eve party)

SECURITY

A4 Do you hold regular meetings to review security following an incident, such as a theft, a burglary, a fight etc?

- Yes No

If yes, describe how often these meetings are held and their format.
For example:

- Fully staffed meeting with security staff where notes are taken
 Informal discussion with staff including security staff where notes are taken
 Review of security procedures is discussed
 Introduction of new policy and/or practices to address concerns are discussed
 Other (please specify) _____

If notes are taken, where are these stored?

A5 Do you employ door staff?

Yes No

If yes, please specify when:

At all times At all times when open
 During certain times* Sometimes*
 As and when necessary* Never

*Please give details

If used, how do you ensure door staff are registered with the Security Industry Authority (SIA)?

If you do not, how do you ensure that staff carrying out security duties are registered with the SIA?

A6 Do you have a written search policy?

Yes No

If yes, where is this documented and how are staff trained in relation to this?

A7 Do you use search equipment?

Yes No

If yes, what is used (eg metal detectors) and how is it maintained?

A8 Are any of the following incidents recorded by your staff?

- | | |
|---|--|
| <input type="checkbox"/> Accidents | <input type="checkbox"/> Lost property |
| <input type="checkbox"/> Found property | <input type="checkbox"/> Thefts |
| <input type="checkbox"/> Banned persons | <input type="checkbox"/> Ejected persons |
| <input type="checkbox"/> Other incidents | <input type="checkbox"/> Injuries |
| <input type="checkbox"/> Other (please specify) | <input type="checkbox"/> Allegations against staff |
-

If so, please indicate where these are recorded and by whom: _____

A9 Which of the following have you adopted to make your staff and other contractors (eg DJs, Artists) easily recognisable to customers, the Police or others who may be required to inspect your premises?

- | | |
|---|-----------------------------------|
| <input type="checkbox"/> Name Badge | <input type="checkbox"/> Photo ID |
| <input type="checkbox"/> Uniform | <input type="checkbox"/> None |
| <input type="checkbox"/> Other (please specify) | |
-

DRINKS / DRUNKENNESS

A10 How do you promote sensible drinking policies?

Give careful consideration to any use of happy hours, drinks with high strength alcohol and drinks promotions which may encourage binge drinking.

A11 On a day to day basis, what do you do to ensure your customers do not drink and drive?

A12 It is an offence for “the DPS, Premises Licence Holder or Worker to knowingly sell, attempt to sell or allow the sale of alcohol to a drunk on relevant premises” as well as “to allow disorderly conduct on licensed premises”. What measures do you take to ensure the safety of your customers in respect of drunkenness?

**A13 Describe your staff training practices with regard to drunkenness.
If this is documented, explain where.**

DRUGS

A14 Describe what you do to prevent the use or supply of illegal drugs in your premises.

A15 If illegal drugs were used in your premises, what do you do/provide to minimise harm?

- Free drinking water available from the bar at all times
- Signs advertising free water are prominently displayed
- Defined seating areas away from the main area with air conditioning/ temperature management (please give details below)
- Drugs awareness/ basic first aid training for all staff
- Venues have a first aider trained to deal with basic drugs associated symptoms
- Health promotion/ harm reduction material available at the venue
- The management reserve the right to conduct searches of customers
- Other (please give details)

A16 What would you do if you found what you thought was an illegal drug?

A17 Are these procedures (as described in A16) documented anywhere?

- Yes No

If Yes, explain where

A18 If illegal drugs were used in your premises, how do you monitor the disposal or treatment of them?

- Keep a log book or incident book
- Store these safely and securely until they are ready to be disposed of safely
- Make arrangements with the Police to dispose of or collect these

A19 Describe your staff training package with regard to drugs. If this is documented, explain where.

THEFTS / BURGLARY

A20 Do you have any of the following which may assist you in crime prevention/ reduction on your premises?

- | | |
|--|---|
| <input type="checkbox"/> Staff Training | <input type="checkbox"/> Mirrors |
| <input type="checkbox"/> Advice notices for customers in relation to thefts | <input type="checkbox"/> CCTV |
| <input type="checkbox"/> Staff lockers | <input type="checkbox"/> Sufficient lighting in all areas |
| <input type="checkbox"/> Cloakroom | <input type="checkbox"/> Audible alarm |
| <input type="checkbox"/> DJ announcements | <input type="checkbox"/> Window locks |
| <input type="checkbox"/> Property patrols | <input type="checkbox"/> Staffed 24 hours |
| <input type="checkbox"/> Regular documented toilet checks | <input type="checkbox"/> 24 hour security |
| <input type="checkbox"/> Toilet attendants | <input type="checkbox"/> Bag hooks under tables |
| <input type="checkbox"/> Layout designed to ensure effective observations can be carried out by staff at all times | <input type="checkbox"/> Crime prevention survey |
| <input type="checkbox"/> Other (please specify) | <input type="checkbox"/> Roving security |

A21 Describe your staff training package with regard to crime prevention. If this is documented, explain where.

DISORDER

A22 What do you do to prevent or keep incidents of disorder to a minimum?

A23 What procedures are in place to ensure that any items, which may be classed as 'weapons', which may be found on your premises or customers are disposed of safely?

A24 Are these procedures (as described in A23) documented anywhere?

Yes No

If yes, explain where.

A25 If disorder or crime occurs what would you do to:

Preserve the crime scene

Care for the victim

A26 Describe your staff training package with regard to disorder/conflict management. If this is documented, explain where.

A27 Do you have CCTV in place?

Yes No

If yes, please explain the arrangements in place. For example:

Number of cameras on the premises

Camera specification/type

Area covered

Format CCTV footage is stored

Length of time CCTV footage is stored

Who is responsible for monitoring CCTV footage and cameras

Signage advising that CCTV cameras are in operation

Any other relevant information, please specify:

A28 Toilets can be hot spots for disorder, for example they may be used to examine stolen goods, for drug dealing or taking. How do you ensure that your toilets are safe and clean?

PREMISES SUPERVISOR

A29 Do you have a Premises Supervisor that has a valid personal licence?

Yes No

A30 If yes, have you notified the Licensing Authority of this?

Yes No

SECTION B

PUBLIC SAFETY

FIRST AID

B1 What First Aid facilities do you have in your venue?

- First aid box(es)*
- Separate first aid/ recovery room*
- Paramedic/ nurse on site*
- Other*

* Please give details

B2 Do you ensure at least one person present during opening hours is trained in basic first aid?

Yes No

If yes, explain who.

B3 If you run a Pub or a Bar, is there a person appointed to take charge of the situation (eg. calling an ambulance following an accident etc)?

Yes No

If yes, what is the name of appointed person?

PUBLIC SECURITY

B4 How do you ensure that all doors are locked when not in use?

B5 Describe your staff training package regarding unattended/ suspect packages.

B6 Do you have a separate plan for building evacuation in the event of discovering a suspect package? If you do, please give details.

B7 If your venue operates a search policy, does this address suspect packages?

Yes No

If yes, please give details.

B8 How do you ensure that your premises are thoroughly checked prior to opening?

EVENT CONTROL

- B9** If you have any events which may be different from your 'normal' trading, do you give prior notice to the Police, other authorities and/or neighbours? (for example for live music events, national celebrations or televised live football)
- Yes No

If yes, give details of these events, what information is passed, notice given and to whom:

- B10** Do you keep a record of this?
- Yes No

If yes, please give details.

- B11** Do you undertake any crime risk assessments (eg CIMOS assessments, available from the Police Licensing Unit) or health and safety risk assessments when planning to hold any unusual or large events? If you do, please specify.

- B12** Has the Council approved the location of any outside drinking area you have situated on the public highway?
- Yes No

If yes, please supply your street trading licence number:

GLASS

- B13** How do you ensure the safe use and disposal of glass is maintained at all times including the events mentioned at B9 (Please include details of procedures regarding any glasses which may leave your venue at closing time):

Inside your premises?

In any outside drinking areas?

- B14** What do you do to ensure efficient glass collection at all times:

Inside your premises?

In any outside drinking areas?

B15 What measures do you take to ensure the premises is a safe environment for your staff to work in (eg. exposure to noise/smoke/violence)?

FIRE

B16 Describe your fire detection/ warning systems.

B17 When were these last checked?

B18 Have you carried out a fire safety risk assessment?

Yes No

If yes, what were the findings and how were there addressed?

B19 Where is this kept?

B20 Who is responsible for carrying out the fire safety risk assessment?

B21 Briefly describe your emergency evacuation procedure and how staff are trained for this?

B22 Describe your staff training package in fire safety training. If this is documented explain where.

B23 Outline the means of escape from your premises in an emergency situation.

B24 Detail any equipment you have in your premises for fighting fire.

B25 List any other fire related equipment within your premises.

- | | |
|---|---|
| <input type="checkbox"/> Fire Extinguishers | <input type="checkbox"/> Emergency lighting |
| <input type="checkbox"/> Other (Please Specify) | <input type="checkbox"/> Exit signage |

BUILDING SAFETY

B26 How are spillages which can be hazardous, identified and managed to prevent injury to customers?

B27 How do you ensure that your building is in good order and does not cause injury to any customer or staff member (Including from heat and burns from lighting) at all times?

TRANSPORT

B28 With regard to late night transport, do you make any of the following available to your customers?

- | | |
|--|--|
| <input type="checkbox"/> Public transport timetables/routes | <input type="checkbox"/> Safe waiting area |
| <input type="checkbox"/> Information regarding reputable taxi services | <input type="checkbox"/> Booking service for taxis |
| <input type="checkbox"/> Other (Please specify) | |

B29 If so, how do you make this information available to your customers?

B30 How many scores on the doors stars do you have?

B31 Have you carried out a suitable and sufficient health and safety risk assessment?

SECTION C

PUBLIC NUISANCE

NOISE

C1 Do you provide any of the following to ensure noise from your premises is kept to a minimum?

For ease of marking, please first describe your surrounding area in the space below.

- Soundproofing
- Sound limiter (locked in tamper proof cabinet)
- Use lollipops or similar to reduce customer noise
- Close all doors & windows whilst music is being played
- Display notices asking customers to leave quietly
- Create space for customers to wait for taxis
- Have deliveries/services carried out between 07.00 - 23.00 with consideration given to neighbouring residents and businesses
- Consult with local residents/businesses
- Music policy adjusted to play 'chilled' music at the end of the evening to affect the mood of customers
- No music / regulated entertainment in external areas
- Use of external lighting
- Other (Please specify)

C2 Do you have any policy regarding the times you will have live or recorded music?

- Yes No

If yes, please give details.

C3 Do you have any policy regarding the times that your outdoor areas may be used?

Yes No

If yes, please give details.

C4 Do you have a crowd control policy for customers entering your premises (eg. patrons queuing) and /or dispersing from your premises to ensure they do not cause noise or annoyance to your neighbours?

Yes No

If yes, please give details.

C5 Have you read the Council / Police policy document on outside drinking?

Yes No

If yes, what procedures have you in place to support this policy?

LITTER / WASTE

C6 Do you do any of the following to prevent or discourage customers from polluting the environment with waste/litter which may come from your venue?

- Litter bins at exits / outside
- Advice notices to customers
- Report offences to appropriate authorities
- Clear surrounding area of litter/flyers
- Other

If you do any of above, please give details.

C7 Do you have a commercial waste agreement with an authorised waste carrier, to dispose of your business waste?

Yes No

Please give name of waste carrier.

C8 Do you have a designated area for the storage of waste?

Yes No

If yes, give details.

RECYCLING

C9 Do you do any of the following to encourage more sustainable waste activities?

- Participate in the Council's trade glass recycling scheme
- Participate in any other business recycling service
- Actively promote waste prevention
- Other (Please give details below)

FLYPOSTING

C10 Do you have any policy for dealing with fly posting by those who have hired your venue?

Yes No

If this is documented, explain where.

C11 How do you allow your premises and the events it hosts to be advertised?

COMMUNITY ENGAGEMENT

C12 Are you involved in any local community activity or initiative which underlines your commitment to being a “good neighbour” and responsible business?

Yes No

If yes, please give details.

C13 Do you attend meetings of community partnership or crime prevention groups such as Pub and Club Watch or SNOW?

Yes No

If yes, please give details.

C14 Are you a member of any trade representative organisation?

Yes No

If yes, please give details.

SECTION D

PROTECTION OF CHILDREN FROM HARM

D1 What forms of identification do you accept?

Passport Driving Licence
 Pass Card Connect Card
 Other (Please Specify)

D2 If you allow under 18s to enter your premises, how do you ensure they are protected from harm?

D3 How do you ensure under 18s do not consume intoxicants from your premises? (eg. use of signage)

D4 How do you ensure under 18s do not purchase or consume alcohol from your premises?

- Use of signage
- Use of '21' refusal criteria
- Refusals book is kept
- Random checks carried out for underaged sales
- Mystery shopping exercise
- Other

D5 How do you ensure that alcohol is not purchased on behalf of a person under 18?

D6 If you ever have any adult entertainment in the venue, how do you ensure that children are protected?

D7 How do you ensure that under 18s do not have access to category C adult gaming machines?

D8 How do you effectively monitor any family areas that you may have.

Inside your premises?

In any outside areas?

D9 Do you undertake a Health and Safety risk assessment specific to the protection of children?

D10 Describe your staff training package with regard to age/alcohol related offences (eg. documented training manual, checking procedures in place, staff sign to confirm they have received training).

D11 If English is not the first language of you or your staff, have you had the legal requirements translated (for you and the staff)?

SECTION E

PLANNING

E1 How long have you been operating as a bar, club or pub?

E2 Do you have planning permission for the existing use of the premises?

Yes No

SECTION F

HACKNEY'S STATEMENT OF LICENSING POLICY

F1 Have you read Hackney's Statement of Licensing Policy? Yes No

F2 Have you asked your employees to read this document? Yes No
If so, explain how this has been monitored.

F3 Explain how you have utilised this document in the operation of your premises.



**Hackney Best Bar None
Award Scheme**

www.hackneybestbarnone.com

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