

**Application for a premises licence to be granted
under the Licensing Act 2003**

Before completing this form please read the guidance notes at the end of the form. 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 written in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

I/We Sarah WEBB trading as Steam Coniston
(Insert name(s) of applicant)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

Part 1 – Premises details

Postal address of premises:			
3B Lake Road			
Post town	Coniston	Postcode	LA21 8EW

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£4,450

Part 2 - Applicant details

Please state whether you are applying for a premises licence as:
Please tick as appropriate

- | | | | |
|----|--|-------------------------------------|-----------------------------|
| a) | an individual or individuals * | <input checked="" type="checkbox"/> | please complete section (A) |
| b) | a person other than an individual * | | |
| | i as a limited company/limited liability partnership | <input type="checkbox"/> | please complete section (B) |
| | ii as a partnership (other than limited liability) | <input type="checkbox"/> | please complete section (B) |
| | iii as an unincorporated association or | <input type="checkbox"/> | please complete section (B) |
| | iv other (for example a statutory corporation) | <input type="checkbox"/> | please complete section (B) |
| c) | a recognised club | <input type="checkbox"/> | please complete section (B) |

- d) a charity ☐ please complete section (B)
- e) the proprietor of an educational establishment ☐ please complete section (B)
- f) a health service body ☐ please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales ☐ please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England ☐ please complete section (B)
- h) the chief officer of police of a police force in England and Wales ☐ please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm (by ticking yes to one box below):

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or ☒

I am making the application pursuant to a

- statutory function or ☐
- a function discharged by virtue of Her Majesty's prerogative ☐

(A) individual applicants (fill in as applicable)

Mr	Mrs <input checked="" type="checkbox"/>	Miss	Ms	Other Title (for example, Rev)	
Surname: WEBB			First names: Sarah Mary		
Date of birth		I am 18 years old or over		Please tick <input checked="" type="checkbox"/>	
Nationality: British Citizen					
Current residential address if different from premises address		[REDACTED]			
Post town	[REDACTED]	Postcode	[REDACTED]		
Daytime contact telephone number		[REDACTED]			
E-mail address (optional)	info@steamconiston.co.uk				

Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 'share code' provided to the applicant by that service (please see note 15 for information)

British Citizen - birth certificate and proof of NI no provided with application.

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name:

Address:

Registered number:

Description of applicant (for example, partnership, company, unincorporated association etc.)

Telephone number:

E-mail address:

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
1	8	062025

If you wish the licence to be valid only for a limited period, when do you want it to end?

DD	MM	YYYY

Please give a general description of the premises (please read guidance note 1)

Steam has been operating in Coniston as a Bistro in the safe, successful, and experienced hands of Sarah and [REDACTED] since 2015 when they first introduced their culinary concept to the Coniston dining scene.

Having been voted Cumbria Life Magazines Reader's Restaurant of the Year, Steam boasts a cherished reputation for quality and excellence enjoying strong support from both the local community and tourist trade.

At the end of the previous premises' lease Steam was operated from a temporary location with their popular 'supper club' while awaiting a new, permanent location and is soon to open 3b Lake Road, Coniston.

Steam will continue to offer a combination of catering styles offering a daytime brunch/street food menu at peak times to complement the traditional evening Bistro.

In addition Steam intends to offer weekend Bistro evenings, private dining/small celebrations, and small plate/tapas style menus and this modest application is to enable the business to offer a full drinks menu featuring local craft and artisan beers, fine wines and quality spirits.

Perfectly located on the Lake Road along popular road and pedestrian routes, Steam Coniston will be a valuable and high-quality addition to the Coniston casual dining scene and provide an exciting option for locals and visitors to this popular visitor destination.

In writing the application we have had regard to the Licensing Act 2003, the current Government Guidance issued by the Secretary of State under Section 182 of the Licensing Act 2004, and the Westmorland and Furness Statement of Licensing Policy.

The Operating Schedule sets out measures and safeguards appropriate to this type of business premises within the Operating Schedule to ensure the Licensing Objectives are robustly promoted.

Through the Licensing Guys Ltd, the applicant wishes to engage fully with all responsible authorities and other interested parties.

Should any person wish to discuss any aspect of the application or proposed activities, early contact and dialogue would be welcomed.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

Not applicable

What licensable activities do you intend to carry on from the premises?

(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all
that apply

- a) plays (if ticking yes, fill in box A) ☐
- b) films (if ticking yes, fill in box B) ☐
- c) indoor sporting events (if ticking yes, fill in box C) ☐
- d) boxing or wrestling entertainment (if ticking yes, fill in box D) ☐
- e) live music (if ticking yes, fill in box E) ☐
- f) recorded music (if ticking yes, fill in box F) ☐
- g) performances of dance (if ticking yes, fill in box G) ☐
- h) anything of a similar description to that falling within (e), (f) or (g)
(if ticking yes, fill in box H) ☐

Provision of late night refreshment (if ticking yes, fill in box I)

☐

Supply of alcohol (if ticking yes, fill in box J)



In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 7)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 7)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)		
Wed					
Thur					
			<u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Fri					
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Wed			
Thur			
Fri			<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 6)
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
Wed					
			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)		
Thur					
Fri					
Sat					
			<u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun					

E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
Day Start Finish				Both	
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

F

Recorded music Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
Wed					
			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
Thur					
Fri					
Sat					
			<u>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun					

G

Performances of dance Standard days and timings (please read guidance note 7)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
Wed					
			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)		
Thur					
Fri					
Sat					
			<u>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	
Mon				Outdoors	
				Both	
Tue			<u>Please give further details here</u> (please read guidance note 4)		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 7)			<u>Will the supply of alcohol be for consumption – please tick</u> (please read guidance note 8)		On the premises	
					Off the premises	
					Both	✓
Day	Start	Finish	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5)			
Mon	10:00	23:00				
Tue	10:00	23:00				
Wed	10:00	23:00				
Thur	10:00	23:00				
Fri	10:00	23:00				
Sat	10:00	23:00				
Sun	10:00	23:00				
			<u>Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list</u> (please read guidance note 6)			

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

Name:		Sarah Mary WEBB	
Date of birth:		[REDACTED]	
Address:		[REDACTED]	
Postcode	[REDACTED]		
Personal licence number:		Being applied for	
Issuing licensing authority:		Westmorland & Furness Council	

K

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 9).

None

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variations</u> (please read guidance note 5)
Day	Start	Finish	
Mon	07:00	23:00	
Tue	07:00	23:00	<u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 6)
Wed	07:00	23:00	
Thur	07:00	23:00	
Fri	07:00	23:00	
Sat	07:00	23:00	
Sun	07:00	23:00	

M Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives

CCTV

A suitable closed-circuit television (CCTV) system shall be in operation whilst members of the public are in attendance.

The CCTV system will provide clear images in all levels of lighting, enabling facial-recognition, of all areas of the licensed site to which the public have access (save for toilets/showers/changing areas).

CCTV time/date will be correct to GMT or BST.

The CCTV system camera coverage shall include external areas used by customers. At least one member of staff shall be on duty at the premises who can operate the system and download recorded images.

These images will be downloaded and provided immediately, or where this is not possible as soon as practicable, on request to an officer of a Responsible Authority.

The CCTV system shall be capable of retaining images for a minimum of 31 days, will be of good quality and will contain the correct time and date stamp information.

The CCTV system and images will be kept in a secure environment to which members of the public will not be permitted access.

Staff Training

All staff responsible for selling alcohol shall receive induction and/or refresher training (at least annually) commensurate with their role and responsibilities in relation to the sale of alcohol and the times and conditions of the premises licence.

Training shall include Challenge 25, the requirement and process for completing both the incident log and refusal log (detailed below).

Training will be documented, kept at the premises for at least 12 months from the last entry, and made available to the Police and/or Local Authority upon request.

Written Delegated Authority

Where alcohol sales are made under a Personal Licence Holder's delegated authority, a written record of the delegation of authority must be maintained on the premises and available for inspection.

The record must include:

- a. The name of the personal licence holder delegating their authority.
- b. The personal licence number and issuing authority
- c. The name(s) of the person duly authorised
- d. The date the delegated person received training on their responsibilities under the Licensing Act 2003
- e. The signatures of both persons

b) The prevention of crime and disorder

Refusal Log

There shall be a register for the recording of all alcohol sale refusals, including attempted under-age sales, proxy sales and refusals to those who appear intoxicated.

Details to be recorded shall include the date, time, name (if known), physical description of the person, the reason for the refusal, names of staff involved, and whether the refusal was captured on CCTV.

Any identification document coming into the possession of a member of staff, including security staff, shall be recorded in the register, including the name of the person/name on the identification document.

The register shall be available for immediate inspection by any authorised officer of the responsible authorities and shall be securely retained by the licence holder for a period of 12 months from the date of the last entry.

Incident Log

An incident log shall be maintained on the premises to record all incidents and accidents.

Records should include occurrences of: anti-social behaviour, admission refusals, ejections, seizure of prohibited items, welfare and safeguarding matters, accidents, and safety incidents.

The records shall include the date, time, and location of the incident; nature of the incident; personal details and contact information for all people involved including any witnesses and any crime number and details of police officers attending.

The entry must also include a note of the action taken and, where relevant, a note of the actions to prevent any reoccurrence should also be included.

Incident and accident records may be kept in a bound register with consecutively numbered pages or electronically on a secure digital system. In each case, the information recorded must be processed, stored, and handled in compliance with The General Data Protection Regulation.

The records shall be available for inspection by any authorised officer of the responsible authorities and shall be securely retained by the licence holder for a period of 12 months after the last entry.

c) Public safety

A current Fire Risk Assessment will be completed, kept on the premises, and made available for inspection by any officer of a Responsible Authority on request.

d) The prevention of public nuisance

The premises licence holder will operate the business with general consideration in respect of the neighbouring properties.

Clear and prominent notices will be displayed in any outdoor public area, and at the exit, requesting patrons be quiet and have consideration for neighbours in the vicinity.

The licence holder shall ensure no noise or vibration emanates from the premises so as to cause a nuisance.

e) The protection of children from harm

Age Verification Scheme – Challenge 25

A challenge 25 age verification scheme will operate at the premises whereby any person who appears to be under 25 years of age, and unknown to the staff member serving as a person over 18 years of age, shall not be served alcohol unless they provide identification to prove they are over 18 years of age.

Staff must require individuals who appear to the responsible person to be under 25 years of age to produce on request, before being served alcohol, identification bearing their photograph, date of birth and either:-

- a. a holographic mark or
- b. an ultraviolet feature.

Acceptable Proof of age/ID documents shall only comprise a passport, photo card driving licence, an EU/EEA national ID card or similar document, an HM Forces Military ID card, a card bearing the PASS hologram, or any electronic or biometric age verification technology approved by the licensing authority.

Appropriate signage advertising the operation of the Challenge 25 scheme must be displayed in the vicinity of all points of sale for alcohol.

Checklist:

Please tick to indicate agreement

•	I have made payment of the fee.	Please call to take payment.	
•	I have enclosed the plan of the premises.		✓
•	I have sent copies of this application and the plan to responsible authorities and others where applicable.		
•	I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.		✓
•	I understand that I must now advertise my application.		✓
•	I understand that if I do not comply with the above requirements my application will be rejected.		✓
•	[Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15).		

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.

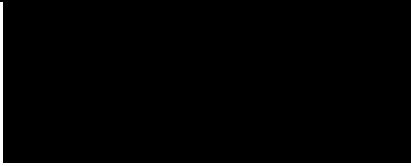
IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

Part 4 – Signatures (please read guidance note 11)

Privacy Notice

The Licensing Service will store your personal data and share it with other agencies in accordance with Stroud District Council's privacy policy Please see the Council's website www.stroud.gov.uk/privacynotice . Section 1 to 10 is the Council's general privacy notice and section 15 gives details for the Licensing Service.

Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Declaration	<ul style="list-style-type: none">• [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15).• The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15)
Signature	
Date	20 May 2025

Capacity	Reba Danson, Licensing Consultant, TL Guys Ltd t/a The Licensing Guys
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Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)

The Licensing Guys
PO Box 303

Post town	LLANYMYNECH	Postcode	SY10 1GZ
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Telephone number (if any)	07983 922180
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If you would prefer us to correspond with you by e-mail, your e-mail address:

reba@thelicensingguys.com



THE
LICENSING GUYS
KEEPING YOU LEGAL AND TRADING

Consent of Individual to being specified as Premises Supervisor

I, Sarah WEBB

[full name of prospective premises supervisor]

Of

[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for:

Grant of Premises Licence

[type of application]

by Sarah WEBB trading as Steam Coniston

[name of applicant]

relating to a premises licence _____
[number of existing licence, if any]

Steam Coniston, 3B Lake Road, Coniston, Cumbria, LA21 8EW

[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by:

Sarah WEBB trading as Steam Coniston

[name of applicant]

concerning the supply of alcohol at

Steam Coniston, 3B Lake Road, Coniston, Cumbria, LA21 8EW

[name and address of premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for/hold a personal licence, details of which I set out below.

Personal licence number

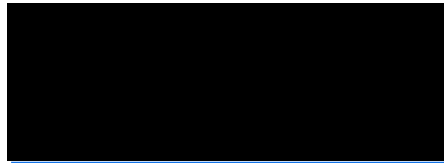
Application in process

[insert personal licence number, if any]

Personal Licence Issuing Authority

Westmorland and Furness Council

[insert name and address and telephone number of personal licence issuing authority, if any]



Signed

Sarah WEBB (May 16, 2025 06:31 GMT+1)

Name (please print)

Sarah WEBB

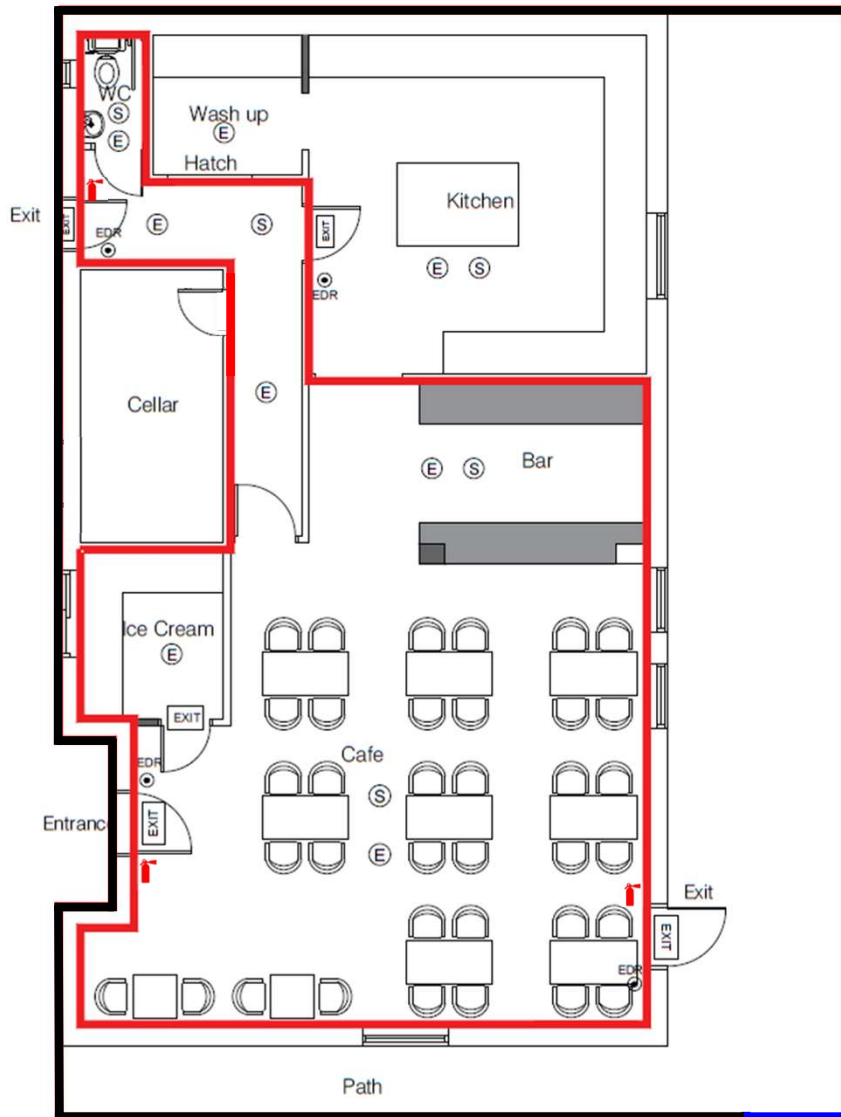
Date

15 May 2025

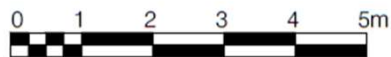


THE
LICENSING GUYS
KEEPING YOU LEGAL AND TRADING

3 B Lake Road
Coniston
Cumbria
LA21 8EW



Ground Floor Licensing Layout



- KEY**
- Ⓢ Smoke Detection
 - ⓔ Emergency Lighting
 - ⓔⓓⓇ Emergency Door Release
 - EXIT Exit Sign
 - Licensed Area
 - Consumption Area
 - 🔥 Fire Extinguisher - Water

