

LICENSING  
 SEP 2003  
 25 NOV 2008  
 RECEIVED

Application for a premises licence to be granted  
 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.  
 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 WIGHTLINK LTD  
 (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 or, if none, ordnance survey map reference or description			
WRIGHT LIGHT CAR FERRY LYMINGTON HARBOUR LYMINGTON HANTS.			
Post town	LYMINGTON	Post code	SO41 5SB

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£ (A) 100

Part 2 - Applicant Details

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

- a) an individual or individuals \*  please complete section (A)
- b) a person other than an individual \*
  - i. as a limited company  please complete section (B)
  - ii. as a partnership  please complete section (B)
  - iii. as an unincorporated association or  please complete section (B)
  - iv. other (for example a statutory corporation)  please complete section (B)
- c) a recognised club  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  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:

Please tick yes

- 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)**

<b>Mr</b> <input type="checkbox"/>	<b>Mrs</b> <input type="checkbox"/>	<b>Miss</b> <input type="checkbox"/>	<b>Ms</b> <input type="checkbox"/>	<b>Other Title (for example, Rev)</b>	
<b>Surname</b>			<b>First names</b>		
<b>I am 18 years old or over</b>				<input type="checkbox"/> Please tick yes	
<b>Current postal address if different from premises address</b>					
<b>Post Town</b>				<b>Postcode</b>	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**SECOND INDIVIDUAL APPLICANT (if applicable)**

<b>Mr</b> <input type="checkbox"/>	<b>Mrs</b> <input type="checkbox"/>	<b>Miss</b> <input type="checkbox"/>	<b>Ms</b> <input type="checkbox"/>	<b>Other Title (for example, Rev)</b>	
<b>Surname</b>			<b>First names</b>		
<b>I am 18 years old or over</b>				<input type="checkbox"/> Please tick yes	

Current postal address if different from premises address			
Post Town		Postcode	
Daytime contact telephone number			
E-mail address (optional)			

**(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	WIGHTLINK LTD
Address	GUNWHARF TERMINAL GUNWHARF ROAD. PORTSMOUTH. PO1 2LA.
Registered number (where applicable)	1059267
Description of applicant (for example, partnership, company, unincorporated association etc.)	LIMITED COMPANY
Telephone number (if any)	
E-mail address (optional)	

**Part 3 Operating Schedule**

When do you want the premises licence to start?

Day	Month	Year
□	□	□

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

Day	Month	Year
□	□	□

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

The Retail/Buffer unit will be on the main passenger deck with its own entrance and exit doors, the wine and beer products will be sold out of the self serve exhibitor unit, and the spirits (miniatures only) will be sold from within the counter. There <sup>will</sup> be seating throughout the passenger deck and outside seating on the top deck.

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

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

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

**Provision of regulated entertainment**

Please tick yes

- 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 entertainment facilities:**

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

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

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

In all cases complete boxes N, O and P

**A**

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of a play take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Wed					
Thur			<b>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</b> (please read guidance note 5)		
Fri					
Sat					
Sun					

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
Wed					
Thur			<b>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</b> (please read guidance note 5)		
Fri					
Sat					
Sun					

**C**

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Tue			
Wed			
Thur			<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 5)
Fri			
Sat			
Sun			

**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Both	<input type="checkbox"/>				
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 4)		
Thur					
Fri			<b><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></b> (please read guidance note 5)		
Sat					
Sun					



**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of live music take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)		
Mon	00:00	24:00			
Tue	00:00	24:00	<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)		
Wed	00:00	24:00			
Thur	00:00	24:00			
Fri	00:00	24:00	<b>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</b> (please read guidance note 5)		
Sat	00:00	24:00			
Sun	00:00	24:00			

F

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b>Will the playing of recorded music take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)		
Mon	20:00	24:00			
Tue	20:00	24:00			
Wed	00:00	24:00	<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 4)		
Thur	00:00	24:00	<b>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</b> (please read guidance note 5)		
Fri	00:00	24:00			
Sat	00:00	24:00			
Sun	00:00	24:00			

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of dance take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue			<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 4)		
Wed					
Thur			<b><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></b> (please read guidance note 5)		
Fri					
Sat					
Sun					

**H**

<p><b>Anything of a similar description to that falling within (e), (f) or (g)</b>          Standard days and timings (please read guidance note 6)</p>			<p><b><u>Please give a description of the type of entertainment you will be providing</u></b></p>		
Day	Start	Finish	<p><b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><b><u>Please give further details here</u></b> (please read guidance note 3)</p>		
Wed					
Thur					
Fri			<p><b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 4)</p>		
Sat					
Sun					
			<p><b><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></b> (please read guidance note 5)</p>		

1

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the facilities for making music you will be providing</u></b>	
			<b><u>Will the facilities for making music be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	
Day	Start	Finish	Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)	
Tue				
Wed			<b><u>State any seasonal variations for the provision of facilities for making music</u></b> (please read guidance note 4)	
Thur				
Fri			<b><u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)	
Sat				
Sun				

J

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			<b>Will the facilities for dancing be indoors or outdoors or both – please tick</b> (see guidance note 2)	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input checked="" type="checkbox"/>
			<b>Please give a description of the facilities for dancing you will be providing</b>	
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)	
Mon	00:00	24:00		
Tue	00:00	24:00		
Wed	00:00	24:00		
Thur	00:00	24:00		
Fri	00:00	24:00		
Sat	00:00	24:00		
Sun	00:00	24:00		
			<b>State any seasonal variations for providing dancing facilities</b> (please read guidance note 4)	
			<b>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 5)	

**K**

<b>Provision of facilities for entertainment of a similar description to that falling within i or j</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the type of entertainment facility you will be providing</u></b>		
Day	Start	Finish	<b><u>Will the entertainment facility be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed					
Thur					
Fri			<b><u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u></b> (please read guidance note 4)		
Sat					
Sun					
			<b><u>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within i or j at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		

L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	23:00	05:00	<b>Please give further details here</b> (please read guidance note 3)	Both	<input checked="" type="checkbox"/>
Tue	23:00	05:00			
Wed	23:00	05:00	<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 4)		
Thur	23:00	05:00			
Fri	23:00	05:00	<b>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</b> (please read guidance note 5)		
Sat	23:00	05:00			
Sun	23:00	05:00			



**M**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption (Please tick box)</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Mon	00:00	24:00			
Tue	00:00	24:00			
Wed	00:00	24:00			
Thur	00:00	24:00			
Fri	00:00	24:00			
Sat	00:00	24:00			
Sun	00:00	24:00	<b>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</b> (please read guidance note 5)		

**State the name and details of the individual whom you wish to specify on the licence as premises supervisor**

<b>Name</b>	GRAEME COOPER
<b>Address</b>	19 EASTFIELD CLOSE SOUTHBOURNE WEST SUSSEX
<b>Postcode</b>	PO10 8NU
<b>Personal Licence number (if known)</b>	3815-05-01665-LAPERT
<b>Issuing licensing authority (if known)</b>	CHICHESTER

N

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 8)

O

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variations</b> (please read guidance note 4)
Day	Start	Finish	
Mon	00:00	<del>24:00</del>	
Tue	00:00	24:00	
Wed	00:00	24:00	
Thur	00:00	24:00	
Fri	00:00	24:00	
Sat	00:00	24:00	
Sun	00:00	24:00	
<b>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</b> (please read guidance note 5)			

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

**a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)**

Good STAFF TRAINING  
CCTV  
High level of SIGNAGE  
Good level of STAFF

**b) The prevention of crime and disorder**

A High level of STAFF in the RETAIL/Buffet unit  
A High level of STAFF ON THE PASSENGER DECKS.  
USE OF CCTV IN THE PASSENGER AREA'S  
STAFF TRAINING.

**c) Public safety**

Good SIGNAGE  
High STANDARD OF LIGHTING  
ALL EXITS AND PATHWAYS kept clear.  
STAFF TRAINING.

**d) The prevention of public nuisance**

STAFF AWARENESS TRAINING.  
Taking ACTION AGAINST ANY PERSON ACTING IN A WAY  
to cause CONCERN.

**e) The protection of children from harm**

STAFF TRAINING IN ALL THE ABOVE  
CHALLENGE 21

Please tick yes

- I have made or enclosed payment of the fee
- 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 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

**IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION**

**Part 4 – Signatures (please read guidance note 10)**

**Signature of applicant or applicant's solicitor or other duly authorised agent (See guidance note 11). If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	24/11/08
Capacity	RETAIL OPERATIONS MANAGER.

**For joint applications signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent. (please read guidance note 12). If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	
Capacity	

**Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)**

Post town		Post code	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail your e-mail address (optional)			

## Notes for Guidance

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

Consent of individual to being specified as premises supervisor

I Graeme Cooper  
[full name of prospective premises supervisor]

of 19 Eastfield Close  
Southbourne  
West Sussex  
[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

S.17 Grant of Premises licence [type of application]

by Wightlink Ltd. [name of applicant]

relating to a premises licence (x3) N/K [number of existing licence, if any]

for Lymington Car Terminal, Wight  
Light & Wight Sky Car Ferry's  
Lymington Harbour, Undershore Road  
[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 Wightlink Ltd. [name of applicant]

concerning the supply of alcohol at Lymington Car Terminal  
& Wight Light & Wight Sky Car Ferry's  
Lymington Harbour, Lymington SO41 5RS.  
[name and address of premises to which application relates].

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number 3815-05-01665-LAPLET  
[insert personal licence number, if any]

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

\* ..... signed

Graeme Cooper name (please print)

2008-11-25 dated

**Diane Sim**

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**From:** Liquor Licensing [liquor.licensing@hants.gov.uk]  
**Sent:** 23 December 2008 18:53  
**To:** Licensing e-mail address  
**Subject:** RE: Application for Grant of New Premises Licence - Wight Sky Car Ferry, Lymington Harbour, Lymington, SO41 5SB  
**Attachments:** 3 Licensing Applications for Wightlink

Dear Sirs

Please accept this email as notice of a representation from Trading Standards.

I have tried to contact the Applicant today (see attachment) but the appropriate person, Mr Graeme Cooper is not in the office until 10 am 24 December 2008.

We are hopeful of a resolution, but I will forward representation tomorrow if agreement cannot be reached.

Yours sincerely  
Steve Lawford

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**From:** Diane Sim [mailto:Diane.Sim@NFDC.gov.uk] **On Behalf Of** Licensing e-mail address  
**Sent:** 02 December 2008 09:49  
**To:** Env Prot; EnvHealth CommAdmin; HFRS TFS Admin West; planning@newforestnpa.gov.uk; Planning NFDC (Development Control); SSD Hythe; Liquor Licensing  
**Subject:** Application for Grant of New Premises Licence - Wight Sky Car Ferry, Lymington Harbour, Lymington, SO41 5SB

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[www.newforest.gov.uk/emaildisclaimer](http://www.newforest.gov.uk/emaildisclaimer)

\_\_\_\_ane Sim

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**From:** Lawford, Stephen [stephen.lawford@hants.gov.uk]  
**Sent:** 23 December 2008 15:01  
**To:** graemecooper  
**Subject:** 3 Licensing Applications for Wightlink

Dear Sirs

I have not received a reply to my letter of 3 December 2008.

Thank you for your application.

Although you include details of how you will promote the licensing objectives, we would like the following conditions to be applied, thereby avoiding a representation being made. Therefore, please can you agree the following :-

**I hereby agree to amend my operating schedule as follows:-**

**A written log shall be kept of all refusals including refusals to serve alcohol.**

**The holder of the premises licence shall ensure that the refusals log is properly maintained and this shall involve, but is not limited to, nominating in writing a responsible person to check and sign it on a weekly basis.**

**I will adopt a 'Challenge 21' policy, where anybody who looks under 21 attempts to buy alcohol will be asked to produce acceptable photo ID proving that they are 18 – Passport, photo driving licence and PASS accredited photo ID only.**

**I will have regular training for staff on Challenge 21 (at least every six months) and keep written records of the training and any refresher training.**

**I will display Challenge 21 and other deterrent signage.**

Kind regards  
 Steve Lawford

Steve Lawford  
 Trading Standards Officer  
 Hampshire County Council  
 Trading Standards Service  
 Montgomery House  
 Monarch Way, Winchester  
 Hants, SO22 5PW

☎ 01962 833658 (desk)  
 ☎ 07738 312872 (mobile)  
 ☎ 01962 833620 (general)  
 ☎ 01962 833699 (fax)  
 ✉ <mailto:steve.lawford@hants.gov.uk>  
 🌐 <http://www.hants.gov.uk/regulatory/>

For information on underage sales, or to report them, please contact us:

by email: <mailto:underage.sales@hants.gov.uk>

or mobile phone: *Send text to 60003 starting your message HANTS UNDERAGE*

or visit: <http://www.hants.gov.uk/regulatory/busadvice.html#underage>

29/12/2008

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For information on liquor licensing please contact us:

by email: ✉ <mailto:liquor.licensing@hants.gov.uk>

***We Help, Protect and Correct, to help make Hampshire safer and more secure for all.***

T.S. CONDITIONS AGREED

Graeme Sim

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**From:** Lawford, Stephen [stephen.lawford@hants.gov.uk]  
**Sent:** 24 December 2008 10:12  
**To:** Licensing e-mail address  
**Cc:** graemecooper  
**Subject:** FW: 3 Licensing Applications for Wightlink

Dear Sirs

Please accept this email as agreed conditions between the Applicant and Trading Standards.

I wish to formally withdraw our representations.

Yours sincerely

Steve Lawford

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**From:** Graeme Cooper  
**Sent:** 24 December 2008 10:09  
**To:** Lawford, Stephen  
**Subject:** RE: 3 Licensing Applications for Wightlink

Dear Steve

Thank you for the Email detailing the Licensing objectives and conditions you would like applied to our application,

I hereby agree to amend my operation schedule as detail in your Email of the 23 December

Regards

*Graeme Cooper*  
*Retail Operations Manager*  
*Wightlink Ltd*  
*Gunwharf Terminal*  
*Gunwharf Road*  
*Portsmouth PO1 2LA*

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**From:** Lawford, Stephen [mailto:stephen.lawford@hants.gov.uk]  
**Sent:** 23 December 2008 15:01  
**To:** Graeme Cooper  
**Subject:** 3 Licensing Applications for Wightlink

Dear Sirs

I have not received a reply to my letter of 3 December 2008.

Thank you for your application.

Although you include details of how you will promote the licensing objectives, we would like the following conditions to be applied, thereby avoiding a representation being made. Therefore, please can you agree the following :-

**I hereby agree to amend my operating schedule as follows:-**

**A written log shall be kept of all refusals including refusals to serve alcohol.**

**The holder of the premises licence shall ensure that the refusals log is properly maintained and this shall involve, but is not limited to, nominating in writing a responsible person to check and**

29/12/2008

26

s: it on a weekly basis.

I will adopt a 'Challenge 21' policy, where anybody who looks under 21 attempts to buy alcohol will be asked to produce acceptable photo ID proving that they are 18 – Passport, photo driving licence and PASS accredited photo ID only.

I will have regular training for staff on Challenge 21 (at least every six months) and keep written records of the training and any refresher training.

I will display Challenge 21 and other deterrent signage.

Kind regards  
Steve Lawford

Steve Lawford  
Trading Standards Officer  
Hampshire County Council  
Trading Standards Service  
Montgomery House  
Monarch Way, Winchester  
Hants, SO22 5PW

- ☎ 01962 833658 (desk)
- ☎ 07738 312872 (mobile)
- ☎ 01962 833620 (general)
- ☎ 01962 833699 (fax)
- ✉ <mailto:steve.lawford@hants.gov.uk>
- 🌐 <http://www.hants.gov.uk/regulatory/>

For information on underage sales, or to report them, please contact us:

by email: ✉ <mailto:underage.sales@hants.gov.uk>

or mobile phone: *Send text to 60003 starting your message HANTS UNDERAGE*

or visit: 🌐 <http://www.hants.gov.uk/regulatory/busadvice.html#underage>

For information on liquor licensing please contact us:

by email: ✉ <mailto:liquor.licensing@hants.gov.uk>

**We Help, Protect and Correct, to help make Hampshire safer and more secure for all.**

\*\*\*\*\*

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All carriage subject to Wightlink Limited Conditions of Carriage by Sea, and subject to Wightlink Limited Standard Terms of Business, copies of which are available on request.

Wightlink Ltd  
Gunwharf Road  
Portsmouth  
PO1 2LA

Registered in England No. 1059267  
Certified to the ISM Code by the Maritime and Coastguard Agency

# \* Objection \*

**Diane Sim**

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**From:** Tom and Barbie McEwen  
**Sent:** 10 December 2008 09:23  
**To:** Licensing e-mail address  
**Subject:** Wightlink license (for alcohol) application

OBJECTION: Re Wight Sky and Wight Light and Shore Terminal license application.

Dear Sir,

I wish to register my objection to this application on the grounds of (1) Public safety and (2) Prevention of Public Nuisance, as set out below.

(1) Because the sale of alcohol on an entertainment trip on a seagoing ferry is likely to lead to reduction in passenger safety as the crew are engaged in managing the ship, not running a nightclub, and these ferries are not designed or crewed as pleasure vessels, so there is an increased risk to passengers. Off sales in the terminal may lead to risk, as witnessed previously when a trespasser on the railway line died by electrocution.

(2) As the ships ply the length of the Lymington River, it is unacceptable that those who live within earshot, and those visitors sleeping in small boats on overnight moorings, should be subjected to the noise of live and recorded music for the profit of the Wightlink Company. Such entertainment trips would also be in addition to the regular schedule, increasing hazard to other river users, particularly at night.

Yours faithfully,

T McEwen, 43 South St, Pennington, SO41 8DY.

CLIFFORD D. JAKES, FCA

Deeracres  
Lisle Court Road  
Lymington  
Hampshire, SO41 5SH

Objection  
**COPY**

19 December 2009

CCTV & Licensing Manager

Licensing Services, New Forest District Council

Appletree Court, Lyndhurst, Hampshire

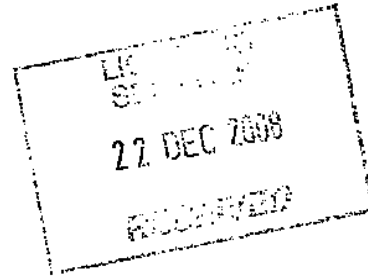
SO43 7PA

Dear Sir

**Applications for Premises Licence – The Car Terminal Building,**

**The White Sky car ferry &**

**The White Light car ferry, all of SO41 5SB.**



I live on the east bank of the Lymington River in Lisle Court Road, which is within one third of a mile of the Wightlink Car Ferry Terminal. This road, which lies in a conservation area of the New Forest National Park, is surrounded by protected areas of SAC, SPA, SSSI and RAMSAR sites. It is a tranquil, peaceful, rural and marine environment. Because it is by the water any noise is magnified and is transmitted over a large area. My garden meets the foreshore at the position in the River where the ferries pass each other. The proposed Applications will impinge on my enjoyment of my property and will create a nuisance under Section 79 of the Environmental Protection Act 1990.

Taking the Applications in order, I comment as follows:-

The Car Terminal Building should not be allowed to develop off license sales between 6am and mid-night. This applications fails on the grounds of THE PREVENTION OF CRIME AND DISORDER,, PUBLIC SAFETY, THE PREVENTION OF PUBLIC NUISANCE, and the PREVENTION OF CHILDREN FROM HARM, with the potential dangerous assembly of undesirable elements outside the Terminal Building. There is limited car parking at the moment for the car ferries and the additional requirement for visitors wishing to purchase alcohol should not be accommodated.

In respect of the Applications for the ferries I have no objection to their request, as long as they are not allowed to perform live music, play recorded music or permit dancing until the ferries are beyond the starting platform at the mouth of the Lymington River. The grounds for applying this restriction is THE PREVENTION OF PUBLIC NUISANCE.

I trust that you will take these issues into account when you are considering these Applications.

Yours faithfully

Clifford D Jakes

cc Environmental Health Department - NFDC

\* Objection \*

Fair Vista  
Broadmead  
Sway  
LYMINGTON  
SO41 6DH

COPY

CCTV and Licensing Manager  
Licensing Services  
New Forest District Council  
Appletree Court  
LYNDHURST  
Hants SO43 7PA



Dear Sir,

**Application for Premises Licences: Wightlink Terminal, Wight Light, Wight Sky**

I would like to Object to the granting of the above licences for the following reasons.

- 1) **PUBLIC SAFETY.** Wightlink are already set on bringing vastly increased traffic flows through Lymington and the small New Forest roads by introducing these new bigger ferries, increasing their carrying capacity by 340%\*. Their application to sell alcohol aboard or in their terminal will encourage drunken driving causing many accidents to both themselves, pedestrians and the New Forest ponies that wander free on the unfenced roads..
- 2) **PUBLIC NUISANCE.** The ferry terminal and the river are in or adjacent to the New Forest National Park, dedicated to quiet recreation. The introduction of party boats with music, drinking and all night restaurants will cause great public disturbance.
- 3) **PROTECTION OF CHILDREN.** The ferry operation, designed to carry people including families with children to the Isle-of-Wight, should not be used to promote alcohol drinking in front of children. Or will the Licensing Authority licence Wightlink to carry only 'over 18 years of age' on these ferries?
- 4) **PREVENTION OF CRIME.** The sale of alcohol either 'on the premises' or 'off the premises' makes no sense on a ferry, where the maximum travel time is 30 minutes and the majority of passengers leave by car. This is an absolute enticement to drunken driving and should not be permitted.

Yours faithfully,

M.C.Beggs

\* Wightlink Booklet "The New Generation". Current ferry 746 tons, Wight Light/Sky 2,546 tons

Licensing Manager  
Licensing Services  
New Forest District Council  
Appletree Court  
LYNDHURST  
Hants SO43 7PA



COPY

10<sup>th</sup> Dec 2008

Dear Sir,

**Application for Premises Licences: Wightlink Terminal, Wight Light, Wight Sky**

I wish to **Object** to the granting of the above licences for the following reasons.

1. PUBLIC SAFETY.

a) In 1979 there was an incident in Yarmouth in which a child was killed by one of the ferries.

The Coroner's report established that the Master had consumed some alcohol previous to the incident. However, no causal relationship could be established as the Master had then consumed several drinks on the return trip to Lymington "to steady his nerves".

This is all in the public domain; please see the IOW Coroners Report for full details, the Lymington Harbour Commissioners can supply a copy on request.

I accept this was many years ago, and the Ferries are now under different ownership, never the less, like alcohol and driving, alcohol and seamanship are a dangerous combination.

b) Which leads me to my second point: the primary purpose of the ferries is to transport vehicles. Please note that the new ferries are designed to carry **more** vehicles and **less** passengers than the old ferries. Should Wightlink really be encouraging drivers to drink?

c) Last year a passenger was lost on a trip to Yarmouth, I did not read the Coroners Report, but I do recall speculation in the newspapers that it might have been a suicide. We do not know if alcohol played a part, but again I would question how wise it is to provide alcohol to passengers on board a short ferry trip. Is it really necessary, or just a nice little earner for Wightlink at the possible expense of public safety?

2. PUBLIC NUISANCE.

The thought of a floating "nightclub/disco" on the Lymington river is totally unacceptable.

Visitors and residents alike moor their boats in the river to appreciate the beauty and birdlife on what remains of the saltmarshes. The current Public Announcements as the ferry departs the terminals are already intrusive to local residents and moored boats, we do not need more noise pollution on the river.

Yours faithfully,

C. Baldwick

Whitemoor,  
Sandy Down  
Boldre  
SO41 8PN





LICENSING SERVICES  
25 NOV 2008  
RECEIVED

Application for a premises licence to be granted 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. 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 WIGHTLINK LTD  
(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 or, if none, ordnance survey map reference or description			
WIGHT SKY CARTER./ LYMINGTON HARBOUR LYMINGTON HANTS			
Post town	LYMINGTON	Post code	SO41 5SB
Telephone number at premises (if any)			
Non-domestic rateable value of premises		£ 100 (A)	

Part 2 - Applicant Details

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

- a) an individual or individuals \*  please complete section (A)
- b) a person other than an individual \*
  - i. as a limited company  please complete section (B)
  - ii. as a partnership  please complete section (B)
  - iii. as an unincorporated association or  please complete section (B)
  - iv. other (for example a statutory corporation)  please complete section (B)
- c) a recognised club  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  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:

Please tick yes

- 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)

<b>Mr</b> <input type="checkbox"/>	<b>Mrs</b> <input type="checkbox"/>	<b>Miss</b> <input type="checkbox"/>	<b>Ms</b> <input type="checkbox"/>	<b>Other Title</b> (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
<b>I am 18 years old or over</b>				<input type="checkbox"/> Please tick yes	
<b>Current postal address if different from premises address</b>					
<b>Post Town</b>				<b>Postcode</b>	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**SECOND INDIVIDUAL APPLICANT** (if applicable)

<b>Mr</b> <input type="checkbox"/>	<b>Mrs</b> <input type="checkbox"/>	<b>Miss</b> <input type="checkbox"/>	<b>Ms</b> <input type="checkbox"/>	<b>Other Title</b> (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
<b>I am 18 years old or over</b>				<input type="checkbox"/> Please tick yes	

Current postal address if different from premises address			
Post Town		Postcode	
Daytime contact telephone number			
E-mail address (optional)			

**(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	WIGHTLINK LTD
Address	QUANTHART TERMINAL QUANTHART ROAD POITSMOUTH PO1 2LA.
Registered number (where applicable)	1059267
Description of applicant (for example, partnership, company, unincorporated association etc.)	LIMITED COMPANY
Telephone number (if any)	
E-mail address (optional)	

**Part 3 Operating Schedule**

When do you want the premises licence to start?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

The Retail/Buffer unit will be on the main passenger deck with its own entrance and exit doors. The wine and beer products will be sold out of the self serve chilled unit and the spirits (miniatures only) will be sold from behind the counter. There will be seating throughout the passenger deck and outside seating on the top deck.

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

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

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

**Provision of regulated entertainment**

Please tick yes

- 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 entertainment facilities:**

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

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

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

In all cases complete boxes N, O and P

**A**

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of a play take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Wed					
Thur			<b>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</b> (please read guidance note 5)		
Fri					
Sat					
Sun					

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)					
Mon								
Tue								
Wed						<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
Thur								
Fri						<b>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</b> (please read guidance note 5)		
Sat								
Sun								

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<b>Please give further details</b> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<b>State any seasonal variations for indoor sporting events</b> (please read guidance note 4)
Wed			
Thur			<b>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</b> (please read guidance note 5)
Fri			
Sat			
Sun			



**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</b> (please read guidance note 2)		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
Day	Start	Finish				
Mon			<b>Please give further details here</b> (please read guidance note 3)			
Tue						
Wed			<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 4)			
Thur						
Fri			<b>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</b> (please read guidance note 5)			
Sat						
Sun						

**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of live music take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish	Both <input checked="" type="checkbox"/>		
Mon	00:00	24:00	<b>Please give further details here</b> (please read guidance note 3)		
Tue	00:00	24:00			
Wed	00:00	24:00	<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)		
Thur	00:00	24:00			
Fri	00:00	24:00	<b>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</b> (please read guidance note 5)		
Sat	00:00	24:00			
Sun	00:00	24:00			

**F**

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place <b>indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	00:00	24:00	<b>Please give further details here</b> (please read guidance note 3)	Both	<input checked="" type="checkbox"/>
Tue	00:00	24:00			
Wed	00:00	24:00	<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 4)		
Thur	00:00	24:00			
Fri	00:00	24:00	<b>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</b> (please read guidance note 5)		
Sat	00:00	24:00			
Sun	00:00	24:00			

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of dance take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue			<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 4)		
Wed					
Thur			<b><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></b> (please read guidance note 5)		
Fri					
Sat					
Sun					

**H**

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the type of entertainment you will be providing</u></b>		
Day	Start	Finish	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed					
Thur					
Fri			<b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 4)		
Sat					
Sun			<b><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></b> (please read guidance note 5)		

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the facilities for making music you will be providing</u></b>	
			<b><u>Will the facilities for making music be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	
Day	Start	Finish	Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)	
Tue			<b><u>State any seasonal variations for the provision of facilities for making music</u></b> (please read guidance note 4)	
Wed			<b><u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)	
Thur				
Fri				
Sat				
Sun				

J

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			<b>Will the facilities for dancing be indoors or outdoors or both – please tick</b> (see guidance note 2)	Indoors <input type="checkbox"/>
				Outdoors <input type="checkbox"/>
				Both <input checked="" type="checkbox"/>
			<b>Please give a description of the facilities for dancing you will be providing</b>	
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)	
Mon	00:00	24:00		
Tue	00:00	24:00		
Wed	00:00	24:00	<b>State any seasonal variations for providing dancing facilities</b> (please read guidance note 4)	
Thur	00:00	24:00		
Fri	00:00	24:00	<b>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 5)	
Sat	00:00	24:00		
Sun	00:00	24:00		

**K**

<b>Provision of facilities for entertainment of a similar description to that falling within i or j</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the type of entertainment facility you will be providing</u></b>		
Day	Start	Finish	<b><u>Will the entertainment facility be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed					
Thur					
			<b><u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u></b> (please read guidance note 4)		
Fri					
Sat			<b><u>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within i or j at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sun					



L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Day	Start	Finish	Both		
Mon	23:00	05:00	<b>Please give further details here</b> (please read guidance note 3)		
Tue	23:00	05:00			
Wed	23:00	05:00	<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 4)		
Thur	23:00	05:00			
Fri	23:00	05:00	<b>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</b> (please read guidance note 5)		
Sat	23:00	05:00			
Sun	23:00	05:00			

**M**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption (Please tick box)</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
Day	Start	Finish		Both	<input checked="" type="checkbox"/>
Mon	00:00	24:00	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Tue	00:00	24:00			
Wed	00:00	24:00			
Thur	00:00	24:00	<b>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</b> (please read guidance note 5)		
Fri	00:00	24:00			
Sat	00:00	24:00			
Sun	00:00	24:00			

**State the name and details of the individual whom you wish to specify on the licence as premises supervisor**

<b>Name</b>	GRAEME COOPER
<b>Address</b>	19 EASTFIELD CLOSE SOUTHBOURNE WEST SUSSEX
<b>Postcode</b>	PO10 8NJ
<b>Personal Licence number (if known)</b>	3815-05-01665-LAPERT
<b>Issuing licensing authority (if known)</b>	CHICHESTER

**N**

**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 8)**

**O**

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variations</b> (please read guidance note 4)
Day	Start	Finish	
Mon	00:00	24:00	<b>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</b> (please read guidance note 5)
Tue	00:00	24:00	
Wed	00:00	24:00	
Thur	00:00	24:00	
Fri	00:00	24:00	
Sat	00:00	24:00	
Sun	00:00	24:00	

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

**a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)**

Good STAFF TRAINING.  
CCTV  
High Level OF SIGNAGE  
Good level OF STAFF

**b) The prevention of crime and disorder**

A High level OF STAFF IN THE RETAIL/BUFFET UNIT  
A High level OF STAFF ON THE PASSENGER DECKS  
USE OF CCTV IN THE PASSENGER AREA'S  
STAFF TRAINING

**c) Public safety**

Good SIGNAGE  
High STANDARD OF LIGHTING  
ALL EXITS AND PATHWAYS kept clear  
STAFF TRAINING

**d) The prevention of public nuisance**

STAFF AWARENESS TRAINING  
TAKING ACTION AGAINST ANY PERSON ACTING IN A WAY  
TO CAUSE CONCERN.

**e) The protection of children from harm**

STAFF TRAINING IN ALL THE ABOVE  
CHALLENGE 21.

Please tick yes

- I have made or enclosed payment of the fee
- 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 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

**IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 168 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION**

**Part 4 – Signatures** (please read guidance note 10)

**Signature of applicant or applicant's solicitor or other duly authorised agent** (See guidance note 11). If signing on behalf of the applicant please state in what capacity.

Signature	
Date	24/11/08
Capacity	RETAIL OPERATIONS MANAGER.

**For joint applications signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent.** (please read guidance note 12). If signing on behalf of the applicant please state in what capacity.

Signature	
Date	
Capacity	

**Contact name (where not previously given) and postal address for correspondence associated with this application** (please read guidance note 13)

Post town		Post code	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail your e-mail address (optional)			

## Notes for Guidance

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

Consent of individual to being specified as premises supervisor

I Graeme Cooper  
[full name of prospective premises supervisor]

of 19 Eastfield Close  
Southbourne  
West Sussex  
[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

S.17 Grant of Premises licence [type of application]

by Wightlink Ltd. [name of applicant]

relating to a premises licence (x3) N/K [number of existing licence, if any]

for Lymington Car Terminal, Wight Light & Wight Sky Car Ferry's  
Lymington Harbour, Undershore Road  
[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 Wightlink Ltd. [name of applicant]

concerning the supply of alcohol at Lymington Car Terminal  
Wight Light & Wight Sky Car Ferry's  
Lymington Harbour, Lymington SO41 5SB  
[name and address of premises to which application relates].

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number 3815-05-01665-LAPFET  
[insert personal licence number, if any]

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

\* .....signed

Graeme Cooper name (please print)

2008-11-25 dated

**Diane Sim**

**From:** Liquor Licensing [liquor.licensing@hants.gov.uk]  
**Sent:** 23 December 2008 18:53  
**To:** Licensing e-mail address  
**Subject:** RE: Application for Grant of New Premises Licence - Wight Light Car Ferry, Undershore Road, Lymington

**Attachments:** 3 Licensing Applications for Wightlink

Dear Sirs

Please accept this email as notice of a representation from Trading Standards.

I have tried to contact the Applicant today (see attachment) but the appropriate person, Mr Graeme Cooper is not in the office until 10 am 24 December 2008.

We are hopeful of a resolution, but I will forward representation tomorrow if agreement cannot be reached.

Yours sincerely  
Steve Lawford

---

**From:** Diane Sim [mailto:Diane.Sim@NFDC.gov.uk] **On Behalf Of** Licensing e-mail address  
**Sent:** 01 December 2008 16:52  
**To:** Rashmi Groom; alison.maiden; charlene.isles; Env Prot; EnvHealth CommAdmin; HFRS TFS Admin West; planning@newforestnpa.gov.uk; Planning NFDC (Development Control); SSD Hythe; Liquor Licensing  
**Subject:** Application for Grant of New Premises Licence - Wight Light Car Ferry, Undershore Road, Lymington

\*\*\*\*\*

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[www.newforest.gov.uk/email/disclaimer](http://www.newforest.gov.uk/email/disclaimer)



**...ane Sim**

---

**From:** Lawford, Stephen [stephen.lawford@hants.gov.uk]  
**Sent:** 23 December 2008 15:01  
**To:** graemecooper  
**Subject:** 3 Licensing Applications for Wightlink

Dear Sirs

I have not received a reply to my letter of 3 December 2008.

Thank you for your application.

Although you include details of how you will promote the licensing objectives, we would like the following conditions to be applied, thereby avoiding a representation being made. Therefore, please can you agree the following :-

**I hereby agree to amend my operating schedule as follows:-**

**A written log shall be kept of all refusals including refusals to serve alcohol.**

**The holder of the premises licence shall ensure that the refusals log is properly maintained and this shall involve, but is not limited to, nominating in writing a responsible person to check and sign it on a weekly basis.**

**I will adopt a 'Challenge 21' policy, where anybody who looks under 21 attempts to buy alcohol will be asked to produce acceptable photo ID proving that they are 18 – Passport, photo driving licence and PASS accredited photo ID only.**

**I will have regular training for staff on Challenge 21 (at least every six months) and keep written records of the training and any refresher training.**

**I will display Challenge 21 and other deterrent signage.**

Kind regards  
 Steve Lawford

Steve Lawford  
 Trading Standards Officer  
 Hampshire County Council  
 Trading Standards Service  
 Montgomery House  
 Monarch Way, Winchester  
 Hants, SO22 5PW

☎ 01962 833658 (desk)  
 ☎ 07738 312872 (mobile)  
 ☎ 01962 833620 (general)  
 ☎ 01962 833699 (fax)  
 ✉ <mailto:steve.lawford@hants.gov.uk>  
 🌐 <http://www.hants.gov.uk/regulatory/>

For information on underage sales, or to report them, please contact us:

by email: <<mailto:underage.sales@hants.gov.uk>>

or mobile phone: *Send text to 60003 starting your message HANTS UNDERAGE*

or visit: 🌐 <http://www.hants.gov.uk/regulatory/busadvice.html#underage>

29/12/2008

56

For information on liquor licensing please contact us:

by email: <mailto:liquor.licensing@hants.gov.uk>

***We Help, Protect and Correct, to help make Hampshire safer and more secure for all.***

T.S. CONDITIONS AGREED

ane Sim

---

**From:** Lawford, Stephen [stephen.lawford@hants.gov.uk]  
**Sent:** 24 December 2008 10:12  
**To:** Licensing e-mail address  
**Cc:** graemecooper  
**Subject:** FW: 3 Licensing Applications for Wightlink

Dear Sirs

Please accept this email as agreed conditions between the Applicant and Trading Standards.

I wish to formally withdraw our representations.

Yours sincerely

Steve Lawford

---

**From:** Graeme Cooper  
**Sent:** 24 December 2008 10:09  
**To:** Lawford, Stephen  
**Subject:** RE: 3 Licensing Applications for Wightlink

Dear Steve

Thank you for the Email detailing the Licensing objectives and conditions you would like applied to our application,

I hereby agree to amend my operation schedule as detail in your Email of the 23 December

Regards

*Graeme Cooper*  
*Retail Operations Manager*  
*Wightlink Ltd*  
*Gunwharf Terminal*  
*Gunwharf Road*  
*Portsmouth PO1 2LA*

---

**From:** Lawford, Stephen [mailto:stephen.lawford@hants.gov.uk]  
**Sent:** 23 December 2008 15:01  
**To:** Graeme Cooper  
**Subject:** 3 Licensing Applications for Wightlink

Dear Sirs

I have not received a reply to my letter of 3 December 2008.

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Although you include details of how you will promote the licensing objectives, we would like the following conditions to be applied, thereby avoiding a representation being made. Therefore, please can you agree the following :-

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**I will display Challenge 21 and other deterrent signage.**

Kind regards  
Steve Lawford

Steve Lawford  
Trading Standards Officer  
Hampshire County Council  
Trading Standards Service  
Montgomery House  
Monarch Way, Winchester  
Hants, SO22 5PW

- ☎ 01962 833658 (desk)
- ☎ 07738 312872 (mobile)
- ☎ 01962 833620 (general)
- ☎ 01962 833699 (fax)
- < <mailto:steve.lawford@hants.gov.uk>
- 🌐 <http://www.hants.gov.uk/regulatory/>

For information on underage sales, or to report them, please contact us:

by email: <mailto:underage.sales@hants.gov.uk>

or mobile phone: *Send text to 60003 starting your message HANTS UNDERAGE*

or visit: <http://www.hants.gov.uk/regulatory/busadvice.html#underage>

For information on liquor licensing please contact us:

by email: <mailto:liquor.licensing@hants.gov.uk>

***We Help, Protect and Correct, to help make Hampshire safer and more secure for all.***

\*\*\*\*\*  
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Wightlink Ltd  
Gunwharf Road  
Portsmouth  
PO1 2LA

Registered in England No. 1059267  
Certified to the ISM Code by the Maritime and Coastguard Agency

# \* Objection \*

**Diane Sim**

---

**From:** Tom and Barbie McEwen  
**Sent:** 10 December 2008 09:23  
**To:** Licensing e-mail address  
**Subject:** Wightlink license (for alcohol) application

OBJECTION: Re Wight Sky and Wight Light and Shore Terminal license application.

Dear Sir,

I wish to register my objection to this application on the grounds of (1) Public safety and (2) Prevention of Public Nuisance, as set out below.

(1) Because the sale of alcohol on an entertainment trip on a seagoing ferry is likely to lead to reduction in passenger safety as the crew are engaged in managing the ship, not running a nightclub, and these ferries are not designed or crewed as pleasure vessels, so there is an increased risk to passengers. Off sales in the terminal may lead to risk, as witnessed previously when a trespasser on the railway line died by electrocution.

(2) As the ships ply the length of the Lymington River, it is unacceptable that those who live within earshot, and those visitors sleeping in small boats on overnight moorings, should be subjected to the noise of live and recorded music for the profit of the Wightlink Company. Such entertainment trips would also be in addition to the regular schedule, increasing hazard to other river users, particularly at night.

Yours faithfully,

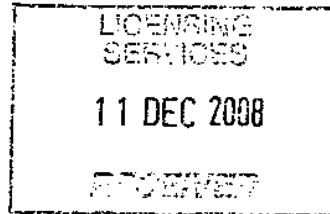
T McEwen, 43 South St, Pennington, SO41 8DY.

\* objection \*

Fair Vista  
Broadmead  
Sway  
LYMINGTON  
SO41 6DH

COPY

CCTV and Licensing Manager  
Licensing Services  
New Forest District Council  
Appletree Court  
LYNDHURST  
Hants SO43 7PA



Dear Sir,

**Application for Premises Licences: Wightlink Terminal, Wight Light, Wight Sky**

I would like to Object to the granting of the above licences for the following reasons.

- 1) **PUBLIC SAFETY.** Wightlink are already set on bringing vastly increased traffic flows through Lymington and the small New Forest roads by introducing these new bigger ferries, increasing their carrying capacity by 340%\*. Their application to sell alcohol aboard or in their terminal will encourage drunken driving causing many accidents to both themselves, pedestrians and the New Forest ponies that wander free on the unfenced roads..
- 2) **PUBLIC NUISANCE.** The ferry terminal and the river are in or adjacent to the New Forest National Park, dedicated to quiet recreation. The introduction of party boats with music, drinking and all night restaurants will cause great public disturbance.
- 3) **PROTECTION OF CHILDREN.** The ferry operation, designed to carry people including families with children to the Isle-of-Wight, should not be used to promote alcohol drinking in front of children. Or will the Licensing Authority licence Wightlink to carry only 'over 18 years of age' on these ferries?
- 4) **PREVENTION OF CRIME.** The sale of alcohol either 'on the premises' or 'off the premises' makes no sense on a ferry, where the maximum travel time is 30 minutes and the majority of passengers leave by car. This is an absolute enticement to drunken driving and should not be permitted.

Yours faithfully,

M.C.Beggs

\* Wightlink Booklet "The New Generation". Current ferry 746 tons, Wight Light/Sky 2,546 tons

CLIFFORD D. JAKES, FCA

Deeracres  
Lisle Court Road  
Lymington  
Hampshire, SO41 5SH

01693 47131  
**COPY**

19 December 2009

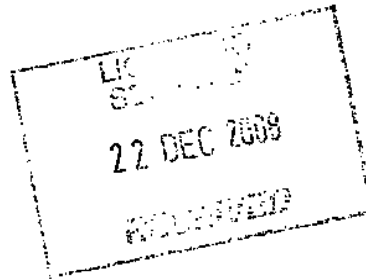
CCTV & Licensing Manager

Licensing Services, New Forest District Council

Appletree Court, Lyndhurst, Hampshire

SO43 7PA

Dear Sir



**Applications for Premises Licence – The Car Terminal Building,**

**The White Sky car ferry &**

**The White Light car ferry, all of SO41 5SB.**

I live on the east bank of the Lymington River in Lisle Court Road, which is within one third of a mile of the Wightlink Car Ferry Terminal. This road, which lies in a conservation area of the New Forest National Park, is surrounded by protected areas of SAC, SPA, SSSI and RAMSAR sites. It is a tranquil, peaceful, rural and marine environment. Because it is by the water any noise is magnified and is transmitted over a large area. My garden meets the foreshore at the position in the River where the ferries pass each other. The proposed Applications will impinge on my enjoyment of my property and will create a nuisance under Section 79 of the Environmental Protection Act 1990.

Taking the Applications in order, I comment as follows:-

The Car Terminal Building should not be allowed to develop off license sales between 6am and mid-night. This applications fails on the grounds of THE PREVENTION OF CRIME AND DISORDER,, PUBLIC SAFETY, THE PREVENTION OF PUBLIC NUISANCE, and the PREVENTION OF CHILDREN FROM HARM, with the potential dangerous assembly of undesirable elements outside the Terminal Building. There is limited car parking at the moment for the car ferries and the additional requirement for visitors wishing to purchase alcohol should not be accommodated.

In respect of the Applications for the ferries I have no objection to their request, as long as they are not allowed to perform live music, play recorded music or permit dancing until the ferries are beyond the starting platform at the mouth of the Lymington River. The grounds for applying this restriction is THE PREVENTION OF PUBLIC NUISANCE.

I trust that you will take these issues into account when you are considering these Applications.

Yours faithfully

Clifford D. Jakes.

cc Environmental Health Department - NFDC