PART 1

ITEM NO.

REPORT OF THE LEAD ME	MBER FOR ENVIRONMENT TO THE LICENSING SUB COMMITTEE.			
TO THE LICENSING SI	UB COMMITTEE ON THURSDAY 29 TH APRIL 2010			
TITLE:	Application for a variation of a casino premises licence under the Gambling Act 2005.			
RECOMMENDATIONS:	Members are asked to make a decision in accordance with the protocol served on the parties.			
EXECUTIVE SUMMARY	An application for a variation of a casino premises licence for the Mint Salford Casino, Cromwell Road, Salford M6 6DA.			
BACKGROUND DOCUMENTS (Available for public inspection)	Gambling Act 2005, G A Guidance to Local Authorities and Salford City Council Gambling Policy			
ASSESSMENT OF RISK	Not Applicable.			
SOURCE OF FUNDING	Licence Fee			
LEGAL ADVICE OBTAINED	Tracy Barr – Solicitor			
FINANCIAL ADVICE OBTAINED	Not Applicable			
CONTACT OFFICER	Veronica Farrelly Licensing Officer			
WARD (S) TO WHICH REPORT RELATES	Irwell Riverside			
KEY COUNCIL POLICIES	Salford City Council Gambling Policy.			

DETAILS (Continued Over)

BACKGROUND

This is an application for a variation of a casino premises licence for Mint Salford Casino, Cromwell Road, Salford M6 6DA

The application requests a variation of default hours. No representations were received.

Under the Gambling Act 2005 any application to vary default hours has to be presented to a Sub Committee of the Licensing Panel for approval.

When dealing with this application Members will also take into account the gambling policy of Salford City Council and the guidance issued to local authorities by the Gambling Commission.

Members are requested to consider the application on its own merits and make a decision on the matter.

Salford City Council

GAMBLING ACT 2005 PROTOCOL TO BE FOLLOWED IN HEARINGS

All hearings will be conducted in public by a Licensing Sub-Committee, unless it is necessary to sit in private.

Each application will be considered on its merits in accordance with the principles set out in s153 of the Act. This means that the sub-committee will aim to permit the use of premises for gambling in so far as it thinks it is:

- In accordance with any relevant code of practice issued by the Gambling Commission
- In accordance with any relevant guidance issued by the Gambling Commission
- Reasonably consistent with the licensing objectives which are
 - Preventing gambling from being a source of crime or disorder, being associated with crime or disorder or being used to support crime
 - Ensuring that gambling is conducted in a fair and open way
 - Protecting children and other vulnerable persons from being harmed or exploited by gambling, and
- In accordance with the Licensing Authority's statement of licensing policy

The proposed procedure will be as follows

- The Chair will introduce the members and officers present, identify the applicant and responsible authorities and interested parties who have submitted representations and explain the purpose of the hearing together with the procedure to be followed.
- The Chair will seek confirmation that the application is complete.
- The Chair will indicate, if appropriate, that the members of the sub-committee have read the papers and that the parties do not need to repeat their written submissions, unless to clarify specific points notified to them by the Authority.
- The Chair will invite the applicant to address the hearing and to call any witnesses.
- Members may ask questions of the applicant.
- Other parties may ask questions of the applicant if appropriate.

- The Chair will invite the responsible authorities to present their representations and to call any witnesses.
- Members may ask questions of the responsible authorities.
- Other parties may ask questions of the responsible authorities if appropriate.
- The Chair will invite the interested parties to present their representations and to call any witnesses. Where a number of similar written representations have been received, the Chair may request that the parties nominate a spokesperson on their behalf.
- Members may ask questions of the interested parties.
- Other parties may ask questions of the interested parties if appropriate.
- The Chair will invite the applicant and other parties to summarise their points if they wish to.
- The legal adviser to the sub-committee will advise on any points of law.
- The sub-committee will make a decision upon the application.
- Once the sub-committee has made its determination, the Chair will announce the decision, giving the reasons for the decision and notifying the parties of the timescale for confirming this in writing.

Please note

- Late representations and evidence will only be accepted with the agreement of all parties present.
- If the hearing is for a review, the premises licence holder will become a separate party entitled to present his/her case and question other parties as appropriate.
- Cross-examination of witnesses will not be permitted unless the subcommittee considers that it would be necessary in the circumstances of the case.
- The sub-committee may exclude any parties from the hearing who are behaving in a disruptive manner.
- The sub-committee may adjourn the hearing to a further specified date if it considers such action necessary, giving its reasons for doing so.

NOTICE OF APPLICATION TO VARY A PREMISES LICENCE - FORM A

This notice is issued in accordance with regulations made under section 160 of the Gambling Act 2005

Notice is hereby given that

Genting Casinos UK Limited

[Give the full name of the applicant. The name should be the same as that given in Part 1 of the application to vary the premises licence]

of the following address:

Circus Casino Star City

Watson Road Birmingham

Postcode B7 5SA

[Give the full address of the applicant. the address should be the same as that set out in Part 1 of the application to vary the premises licence.]

the number of whose operating licence is

005-000537-N-103203-07

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

has made an application to vary a premises licence of the following type:

Converted Casino Premises licence

[Specify the type of premises licence to which the application relates]

The application relates to the following licensed premises:

Mint Salford Casino Cromwell Road Salford M6 6DA

[Give the trading name used at the premises, and the address of the premises (or, if none, give a description of the premises and their location).]

Details of the variation sought:

This application is to vary the hours to permit gambling on the premises from 00:00 am until 23:59 pm Monday to Sunday.

The application has been made to the licensing authority:

Licensing Section Environment Directorate Salford City Council Turnpike House 631 Eccles New Road Salford

Postcode M50 1SW

Website: www.salford.gov.uk

[Insert name of the licensing authority and the address of its principal office, followed by the address of its website].

The current licence holder(s) is/are:

Genting Casinos UK Limited

[Give the full name of the licence holder(s) as set out in the premises licence (if known). Where the applicant is the licence holder, it is sufficient to state "the applicant".

Information about the application is available for inspection from the licensing authority between the hours of 9.00am - 4.00pm Monday to Friday (excluding Bank Holidays).

The following person connected with the applicant is able to give further information about the application.

David Roberts of Eversheds LLP, Eversheds House, 70 Great Bridgwater Street, Manchester, M1 5ES

Tel No. 0845 497 9797

E-mail: davidnroberts@eversheds.com

[This entry is optional and is to be included if the applicant wishes to provide the name, telephone number and (if available) e-mail address of a person connected with the applicant who is able to answer questions and provide further information about the application.]

Any representations under section 161 of the Gambling Act 2005 must be made no later then the following date:

22nd April 2010

[Please insert last day on which representations may be made in relation to the application. The period for making representations is 28 days (inclusive) starting with the day on which the application was made to the licensing authority.]

NOTICE OF APPLICATION TO VARY A PREMISES LICENCE UNDER THE GAMBLING ACT 2005

Notice is hereby given that:

Genting Casinos UK Limited

of the following address:

Circus Casino Star City

Watson Road

Birmingham B7 5SA

is applying under section 187 of the Gambling Act 2005 to vary a Converted Casino premises licence issued under that Act.

The application relates to the following premises:

Mint Salford Casino Cromwell Road Salford M6 6DA

The application is to vary the hours authorised by the licence to permit gambling on the premises from 00:00 am to 23:59 pm Monday to Sunday.

This application has been made to:

Licensing Section Environment Directorate Salford City Council Turnpike House 631 Eccles New Road Salford M50 1SW

Information about the application is available for inspection from the licensing authority between the hours of 9:00am - 4.00pm Monday to Friday (excluding Bank Holidays).

Any of the following persons may make representations in writing to the licensing authority about the application:

- A person who lives sufficiently close to the premises to be likely to be affected by the authorised activities
- A person who has business interests that might be affected by the authorised activities
- A person who represents someone in any of the above two categories.

Any representation must be made by the following date: 22nd April 2010

It is an offence under section 342 of the Gambling Act 2005 if a person, without reasonable excuse, gives to a licensing authority for a purpose connected with that Act information which is false or misleading.

Application to vary a premises licence under the Gambling Act 2005

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

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

Part 1 – Applicant Details
If you are an individual, please fill in Section A. If the application is being made on behalf of an organisation (such as a company or partnership), please fill in Section B.
Section A
Individual applicant
1. Title: Mr Mrs Miss Ms Or Other (please specify)
2. Surname: Other name(s):
[Use the names given in the applicant's operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence]
3. Applicant's address (home or business – [delete as appropriate]):
Postcode:
4(a) The number of the applicant's operating licence (as set out in the operating licence):
4(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:
5. Tick the box if the application is being made by more than one person.
[Where there are further applicants, the information required in questions 1 to 4 should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants".]
Section B
Application on behalf of an organisation
6. Name of applicant business or organisation: Genting Casinos UK Limited
[Use the names given in the applicant's operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence.]

7. The applicant's registered or principal address: Circus Casino Star City Watson Road Birmingham Postcode: B7 5SA 8(a) The number of the applicant's operating licence (as given in the operating licence): 005-000537-N-103203-07 8(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made: 9. Tick the box if the application is being made by more than one organisation. [Where there are further applicants, the information required in questions 6 to 8 should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants".] Part 2 - Premises Details 10. Trading name used at licensed premises: Mint Salford Casino 11. Give the address of the premises or, if none, give a description of the premises and its location.	applying for one,					
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11. Give the address of the premises of, in hole, give a description of the premises and he lesses	ses and its location					
Where the premises are a vessel, give the place indicated in the premises licence as the place i	ce as the place in					
the licensing authority's area where the vessel is wholly or partly situated. Where possible this	re possible this					
should include an address with a postcode:						
Mint Salford Casino						
Cromwell Road						
Salford						
	-					
Postcode: M6 6DA						
12 Telephone number at premises (if known): 0161 792 3794						
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12. Telephone number at premises (if known): 0161 792 3794						
13. Type of premises licence to be varied:	o □					
13. Type of premises licence to be varied: Regional Casino Large Casino Small Casino ———————————————————————————————————						
13. Type of premises licence to be varied: Regional Casino ☐ Large Casino ☐ Small Casino ☐ Converted Casino ☐ Bingo ☐ Adult Gaming Centre ☐	g Centre 🗌					
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Part 3 - Details of variations applied for

16(a) Please give details of any variation which is being applied for. Where the application includes an application to exclude or vary a condition of the premises licence, identify the relevant condition here (unless it relates to hours of operation which are dealt with in questions 16(b) and 16(c)):

The application is made to vary the hours to permit gambling on the premises from 00.00am until 23.59pm Monday to Sunday as below.

16(b) Do you want the licensing authority to exclude or vary a condition of the licence so that the premises may be used for longer periods than would otherwise be the case?

Yes [delete as appropriate]

16(c) If the answer to question 16(b) is yes, please complete the table below to indicate the times when you want the premises to be available for use under the premises licence.

	Start	Finish	Details of any seasonal variation	
Mon	00:00 hh:mm	23:59 hh:mm	N/A	
Tue	00:00	23:59	N/A	
Wed	00:00	23:59	N/A	
Thurs	00:00	23:59	N/A	
Fri	00:00	23:59	N/A	
Sat	00:00	23:59	N/A	
Sun	00:00	23:59	N/A	

- 17. Please indicate any particular date on which you want the variation to take effect if approved: on grant (dd/mm/yyyy)
- 18. Please set out any other matters which you consider to be relevant to your application: N/A

Delay Charling (Places fick as appropriate)	(2) (3) (3) (3) (3) (3) (3) (3) (3) (3) (3				
Part 4 – Declarations and Checklist (Please tick as appropriate) I/ We confirm that, to the best of my/ our knowledge, the information contained in this application is true. I/ We understand that it is an offence under section 342 of the Gambling Act 2005 to give information which is false or misleading in, or in relation to, this application.					
I/ We confirm that the applicant(s) have the right to occupy the premises.					
Checklist:					
Payment of the appropriate fee has been made/is enclosed	\boxtimes				
A plan of the premises is enclosed	\boxtimes				
The existing premises licence is enclosed	\boxtimes				
 The existing premises licence is not enclosed, but the application is accompanied by – 					
 A statement explaining why it is not reasonably practicable to produthe licence and, 	ice				
 An application under the Section 190 of the Gambling Act 2005 for tissue of a copy of the licence 	the				
 I/we understand that if the above requirements are not complied with the application may be rejected 					
 I/ we understand that it is now necessary to advertise the application and g the appropriate notice to the responsible authorities 	ive				
the appropriate notice to the responsible detailers.	The state of the s				
of the applicant, please state in what capacity: Signature: Solicitor for Guosladure					
Print Name: David Roberts					
Date: Cofo has (dd/mm/yyyy) Capacity: duly authorised So	olicitor				
20. For joint applications, signature of 2nd applicant, or 2nd applicant's solicitor or other authorised agent. If signing on behalf of the applicant, please state in what capacity: Signature:					
Print Name:					
Date: (dd/mm/yyyy) Capacity:					
[Where there are more than two applicants, please use an additional sheet clearly marked "Signature(s) of further applicant(s)". The sheet should include all the information requested in paragraphs 19 and 20.]					
[Where the application is to be submitted in an electronic form, the signature should electronically and should be a copy of the person's written signature.]	d be generated				

Part 6 - Contact Details

21(a) Please give the name of a person who can be contacted about the application: David Roberts/Ed Farrelly

21(b) Please give one or more telephone numbers at which the person identified in question 21(a) can be contacted:

0845 497 8146

22. Postal address for correspondence associated with this application:

Eversheds LLP

Eversheds House

70 Great Bridgewater Street

Manchester

(Ref : #2080878) Postcode:M1 5ES

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

davidnroberts@eversheds.com