

13/01527/SEL

OXFORD CITY COUNCIL
Local Government (Miscellaneous Provisions
Part II, Schedule 3

Darker Enterprises Limited
54 Cowley Road

Date rec'd: 17/06/2013

Application for renewal of sex establishment

Applications may be made by individuals, corporate bodies or unincorporated bodies.

1. Application is hereby made and the necessary fee enclosed for a

New Licence ()*

Transfer of Licence ()*

Renewal of Licence ()*

*Tick as appropriate

2. Name and address of premises to which this application relates.

PRIVATE SHOP

54 COWLEY ROAD

OXFORD, OX4 1HZ

If application relates to a vehicle / vessel / stall give description and state where it is to be used as a sex establishment.

N/A

3. Full Name of Applicant.

DARKER ENTERPRISES LIMITED

Date of Birth.

N/A

Occupation (during preceding six months).

N/A

4. Address for Correspondence (If different from permanent address)

UNIT 11B TRADE CITY,

ASHTON ROAD, HAROLD HILL,

ESSEX

RM3 8UJ

Telephone No.



The Licensing Authority
Oxford City Council

17 JUN

If application is made on behalf of a corporate or unincorporated body.

5. Name of applicant body: DARKER ENTERPRISES
LIMITED
State whether a corporate or BODY CORPORATE
unincorporated body.
6. Address of registered or principal office. UNIT 11B TRADE CITY,
ASHTON ROAD, HAROLD
HILL, ESSEX, RM3 8UJ
7. Full names of all directors and other persons responsible for the management of the body, including if applicable the names of managers, company secretary and similar officers and the manager of the establishment. (You will be required to complete a statutory declaration sheet for each person)
- COLIN CHARLES MASON
Director
DAVID MICHAEL BROWN
Director
LIMETIME SERVICES LTD
Company Secretary
KEITH LICKLEY
Regional Co-ordinator
DAVID BRUNT
Area Admin Supervisor
BARRY MALTBY
Relief Sales Assistant
WILLIAM CLARKE
Full-time Sales assistant
CARL BAIRD
Part-time Sales assistant
8. What hours and days to you require the licence to cover? 9:00 a.m. to 8:00 p.m.
MONDAY to SATURDAY
SUNDAY / PUBLIC HOLIDAYS
10.00am – 4.00pm
9. If the premises are not open between 9.00 am and 4.00 pm, state name, address and telephone number of person responsible for keys to the premises. N/A
10. If only part of the building is to be licensed, give details. GROUND FLOOR ONLY
11. Will any part of the premises be used for the exhibition of moving pictures? No

- 12 Does the applicant presently use the premises or the vehicle, vessel or stall as a sex establishment? Yes
- If not, what is the present use? N/A
-
13. If yes, give details of any person Other than the applicant(s) who has run the premises, vehicle, vessel or stall as a sex establishment since that date? CONEGATE LIMITED
2 FARADAY ROAD, STRATFORD,
LONDON E15
- 14 If the premises or the vehicle, vessel or stall are presently used as a sex establishment, when did the use commence? May 1981
- 15 Give full details of the type of business to be conducted at the establishment. RETAIL SEX SHOP SELLING
ADULT BOOKS, MAGAZINES,
DVDs, VIDEOS, MARITAL AIDS
AND ANCILLARY ITEMS
- 16 We declare we have checked the information given on this application and attached statutory declaration forms and to the best of our knowledge and belief it is correct.
- 17 We enclose a cheque for £8360.00 being the appropriate application fee.

Date: 18th June 2013

Signature: 

(Date of application)

Colin Charles Mason
(Director)

For and on behalf of DARKER ENTERPRISES
LIMITED (APPLICANT)

All applicants are required to send with this application (a) two plans showing the area to be licensed, (b) statutory declarations in the form shown in the attached document in respect of (i) the applicant, (ii) directors of any company applying for a licence and (iii) any other person who will be responsible for the management of the licensed premises.

Return to:

Licensing Authority
Oxford City Council
St Aldates Chambers
109 St Aldates
Oxford, OX1 1DS

OXFORD CITY COUNCIL

Statutory declaration sheet for application for renewal of sex establishment licence

To be completed by the applicant for (i) the applicant, (ii) directors of any company applying for a licence and (iii) any other person who will be responsible for the management of the licensed premises.

Full name. COLIN CHARLES MASON

Position held. DIRECTOR

Date of birth. [REDACTED]

Place of birth. [REDACTED]

Permanent address. [REDACTED]

Address(es) at which person has been resident during the five years preceding the date of this application. AS ABOVE

Details of any relevant previous convictions and/or cautions
Please give details of any "unspent" convictions or cautions (see overleaf)

THERE ARE NO UNSPENT CONVICTIONS OR CAUTIONS TO DECLARE

Date of conviction	Court of conviction	Nature of offence	Sentence
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

Please photocopy extra sheet for each declaration

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To be completed by the applicant for (i) the applicant, (ii) directors of any company applying for a licence and (iii) any other person who will be responsible for the management of the licensed premises.

Full name. DAVID MICHAEL BROWN

Position held. DIRECTOR

Date of birth. [REDACTED]

Place of birth. [REDACTED]

Permanent address. [REDACTED]
[REDACTED]
[REDACTED]

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Full name. LIMETIME SERVICES LIMITED

Position held. COMPANY SECRETARY

Date of birth. N/A

Place of birth. N/A

Permanent address. UNIT 11B, TRADE CITY, ASHTON ROAD,
HAROLD HILL, ESSEX, RM3 8UJ,

Address(es) at which person has been resident during the five years preceding the date of this application. AS ABOVE

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Full name. WILLIAM CLARKE

Position held. FULL-TIME SALES ASSISTANT

Date of birth. [REDACTED]

Place of birth. [REDACTED]

Permanent address. [REDACTED]
[REDACTED]
[REDACTED]

Address(es) at which person has been resident during the five years preceding the date of this application. PREVIOUS ADDRESS
[REDACTED]
[REDACTED]
[REDACTED]

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Full name. DAVID BRUNT

Position held. AREA ADMIN SUPERVISOR

Date of birth. [REDACTED]

Place of birth. [REDACTED]

Permanent address. [REDACTED]

Address(es) at which person has been resident during the five years preceding the date of this application [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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To be completed by the applicant for (i) the applicant, (ii) directors of any company applying for a licence and (iii) any other person who will be responsible for the management of the licensed premises.

Full name. KEITH LICKLEY

Position held. REGIONAL CO-ORDINATOR

Date of birth. [REDACTED]

Place of birth. [REDACTED]

Permanent address. [REDACTED]

Address(es) at which person has been resident during the five years preceding the date of this application. PREVIOUS ADDRESS
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

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To be completed by the applicant for (i) the applicant, (ii) directors of any company applying for a licence and (iii) any other person who will be responsible for the management of the licensed premises.

Full name. BARRY MALTBY

Position held. RELIEF SALES ASSISTANT

Date of birth. [REDACTED]

Place of birth. [REDACTED]

Permanent address. [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Address(es) at which person has been resident during the five years preceding the date of this application. [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

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To be completed by the applicant for (i) the applicant, (ii) directors of any company applying for a licence and (iii) any other person who will be responsible for the management of the licensed premises.

Full name. CARL BAIRD

Position held. PART TIME SALES ASSISTANT

Date of birth. [REDACTED]

Place of birth. [REDACTED]

Permanent address. [REDACTED]

Address(es) at which person has been resident during the five years preceding the date of this application. [REDACTED]

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