



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 Robert Rea

(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			
Bistro on the Bay Unit 4 Parry Thomas Centre Pendine			
Post town	Carmarthen	Postcode	SA33 4NY

Telephone number at premises (if any)	01292 88156
Non-domestic rateable value of premises	£5000

Part 2 - Applicant details

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

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
- i as a limited company/limited liability partnership please complete section (B)
- ii as a partnership (other than limited liability) 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 in Wales please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England please complete section (B)
- h) the chief officer of police of a police force in England and Wales please complete section (B)

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

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a statutory function or
- a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname Rea			First names Robert Andrew		
Date of birth REDACTED		I am 18 years old or over <input checked="" type="checkbox"/>		Please tick yes	
Nationality British					
Current residential address if different from premises address		16 High Street Llandybie			
Post town	Ammanford			Postcode	SA18 3HX
Daytime contact telephone number		REDACTED			
E-mail address (optional)		bistrobaypendine@outlook.com			
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 15 for information)					

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
Date of birth			I am 18 years old or over <input type="checkbox"/> Please tick yes		
Nationality					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 15 for information)					

(B) OTHER APPLICANTS

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

Name
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
01	05	2023

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

DD	MM	YYYY

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

Council owned unit on Pendine beachfront. Off sales consumption to seated area directly in front of the premises. On sales inside the premises.

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 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all that apply

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

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

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

In all cases complete boxes K, L and M

A

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

B

Films Standard days and timings (please read guidance note 7)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	Please give further details here (please read guidance note 4)					
Mon								
Tue								
Wed						State any seasonal variations for the exhibition of films (please read guidance note 5)		
Thur								
Fri						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 (please read guidance note 6)		
Sat								
Sun								

C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)	
Day	Start	Finish		
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)	
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 6)
Fri				
Sat				
Sun				

D

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

E

Live music Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4) Acoustic sets, amplified, but kept to level only heard by bistro guests. <u>State any seasonal variations for the performance of live music</u> (please read guidance note 5) Outdoor occasionally, summer months only weather permitting. <u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 6) N/A		
Mon	11:00	23:00			
Tue	11:00	23:00			
Wed	11:00	23:00			
Thur	11:00	23:00			
Fri	11:00	23:00			
Sat	11:00	23:00			
Sun	11:00	22:30			

F

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

G

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

H

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

I

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

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premises	<input type="checkbox"/>			
				Off the premises	<input type="checkbox"/>			
				Both	<input checked="" type="checkbox"/>			
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)					
Mon	11:00	23:00						
Tue	11:00	23:00						
Wed	11:00	23:00						
Thur	11:00	23:00				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 (please read guidance note 6)		
Fri	11:00	23:00						
Sat	11:00	23:00						
Sun	11:00	22:30						

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

Name Robert Andrew Rea	
Date of birth XXXXXXXXXX	
Address 16 High Street Llandybie Ammanford	
Postcode	SA18 3HX
Personal licence number (if known) OONU-IND-01991	
Issuing licensing authority (if known) CCC	

K

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 9).

N/A

L

<p>Hours premises are open to the public Standard days and timings (please read guidance note 7)</p>			<p><u>State any seasonal variations</u> (please read guidance note 5)</p> <p>During winter months, premises will likely operate on reduced hours eg 10:00-16:00.</p>
Day	Start	Finish	<p><u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u> (please read guidance note 6)</p>
Mon	08:00	23:30	
Tue	08:00	23:30	
Wed	08:00	23:30	
Thur	08:00	23:30	
Fri	08:00	23:30	
Sat	08:00	23:30	
Sun	08:00	22:30	

M

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

a) General – all four licensing objectives (b, c, d and e) (please read guidance note 10)

Primarily the premises will be a café during daytime hours, serving alcohol alongside meals.
Bistro @ 5pm -11pm - again primarily serving alcohol alongside meals.

b) The prevention of crime and disorder

Only operating within licensing objectives
CCTV installed
Not serving intoxicated/drug users
Reporting to police any concerns

c) Public safety

Not overcrowding premises
Having and maintaining fire, pest control, and updated health and safety systems
Providing first aid equipment on the premises
Maintaining up to date food safety records

d) The prevention of public nuisance

Keeping noise to minimum – displaying notices to state this
Providing litter bins
Close outside seating area at 11pm

e) The protection of children from harm

Challenge 25 Policy

Checklist:

Please tick to indicate agreement

- 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 designated premises supervisor, if applicable.
- I understand that I must now advertise my application.
- I understand that if I do not comply with the above requirements my application will be rejected.
- [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15).

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

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

Part 4 – Signatures (please read guidance note 11)

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

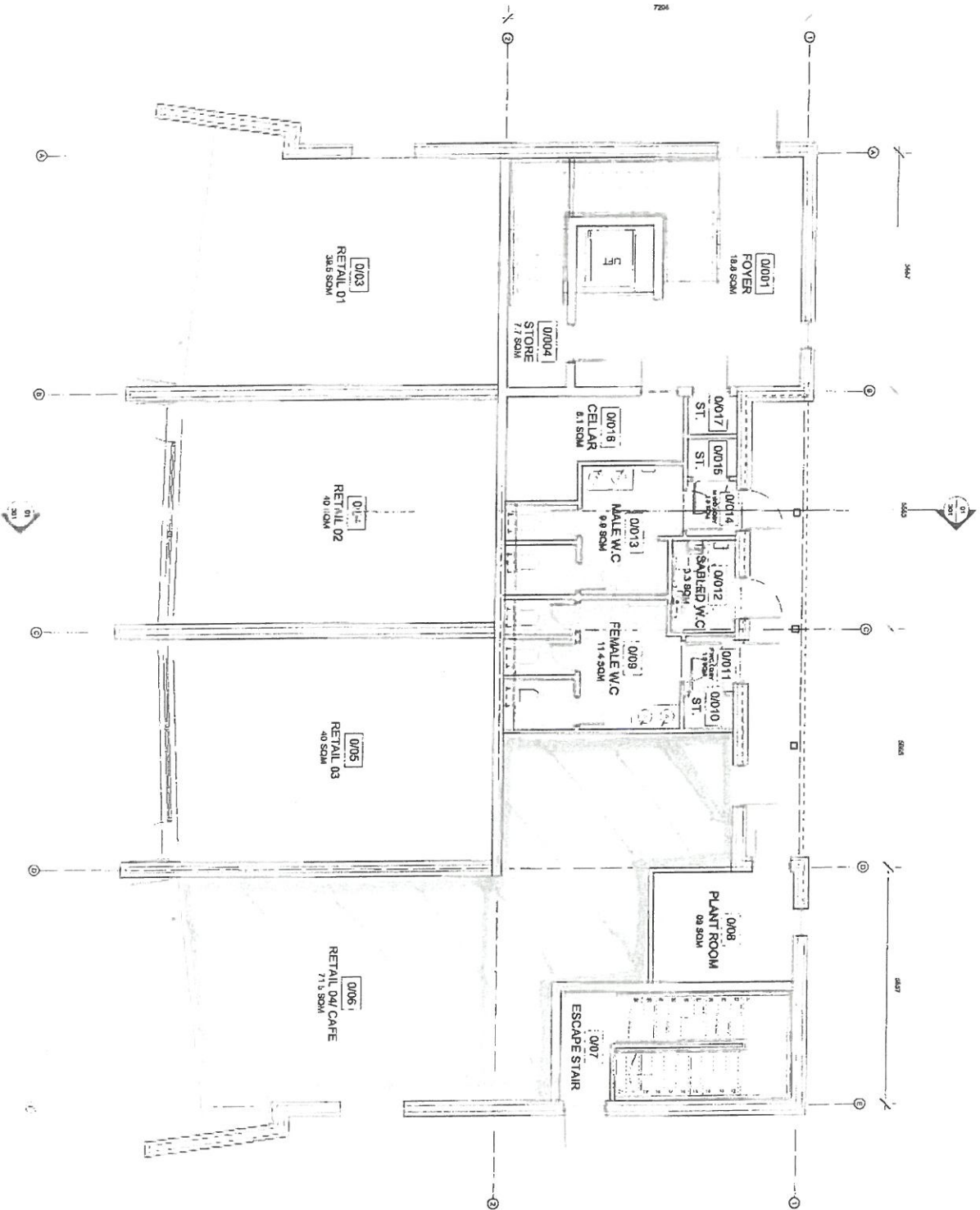
Declaration	<ul style="list-style-type: none">• [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15).• The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or
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	her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)
Signature	<i>Robert Rea</i>
Date	07-04-2023
Capacity	Applicant

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 13). 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 14)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			



01 PROPOSED GROUND FLOOR PLAN 1:100



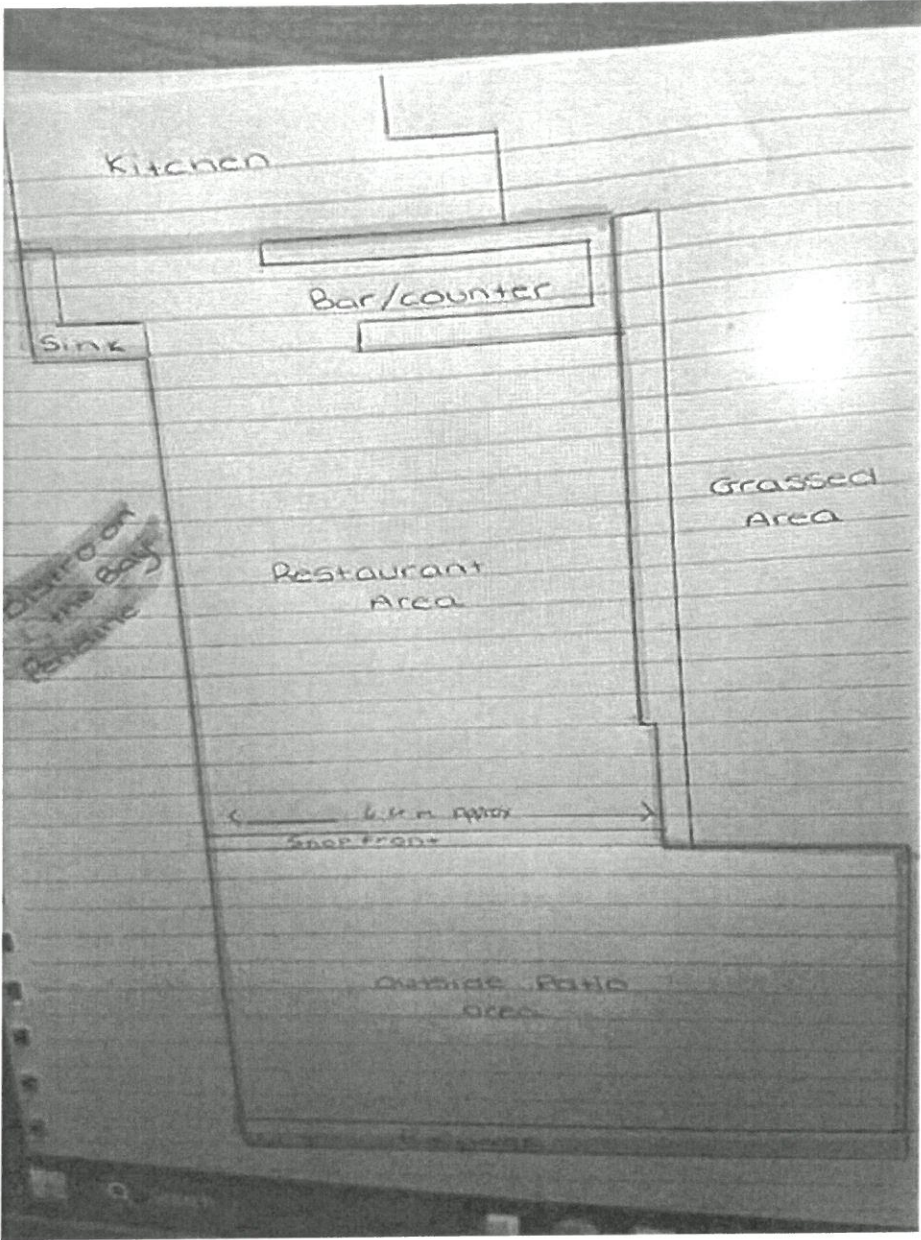
Rev	Description	Date	Author
1	PROPOSED GROUND FLOOR PLAN	12/01/14	JP
2	REVISED PLAN	12/01/14	JP
3	REVISED PLAN	12/01/14	JP
4	REVISED PLAN	12/01/14	JP
5	REVISED PLAN	12/01/14	JP
6	REVISED PLAN	12/01/14	JP
7	REVISED PLAN	12/01/14	JP
8	REVISED PLAN	12/01/14	JP
9	REVISED PLAN	12/01/14	JP
10	REVISED PLAN	12/01/14	JP

WATERSHAY LAKE
 THE GREAT
 FISHERY
 CARMARTHENSHIRE
 WALES
 SA31 3WU
 PROJECT NO. 14/01/14
 DRAWING NO. P101

CARMARTHENSHIRE COUNTY COUNCIL
 PARRY THOMAS CENTRE
 PROPOSED DRAWINGS

1:100 A3 PLANNING
 A2002 P101 F
 JP SEPT 2014

THIS DRAWING IS THE PROPERTY OF THE COUNTY COUNCIL AND IS NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM, WITHOUT THE WRITTEN PERMISSION OF THE COUNTY COUNCIL.





Eich cyf / Your ref: Gofynner am / Please ask for: Emyr Jones
Fy nghyf / My ref: Llinell Uniongyrchol / Direct Line: (01267) 228717
Dyddiad / Date: 12th May 2023 E-bost / E-mail: publicprotection@carmarthenshire.gov.uk

Head of Homes and Safer Communities
Carmarthenshire County Council
3 Spilman Street,
Carmarthen
SA31 1LE

Dear Sir,

**RE: Application for a Premises Licence
Bistro on the Bay, Unit 4, Parry Thomas Centre, Seafront, Pendine,
Carmarthenshire, SA33 4NZ
Application Date 14/04/2023**

Further to the receipt of the above application, the Licensing Authority make the following representations:

a) Previous Enforcement Action / Prosecutions

There have been no previous prosecutions or enforcement action taken by the licensing authority in relation to these premises.

b) Complaints.

There have been no complaints received by the licensing authority in relation to these premises.

c) Responsible Authority Referrals.

The licensing authority has not received any referrals from the other responsible authorities in relation to the above premises.

d) Relevant Sections of the Statutory Guidance.

The Licensing Authority believes that the following sections of the Statutory Guidance are relevant to this licence application: - Section 1 Introduction, Section 2 relating to The Licensing Objectives, Section 5 relating to Premises licences, Section 8 relating to Applications for Premises Licences and Section 10 relating to Licence Conditions.

Jonathan Morgan

Pennaeth Tai a Diogelu'r Cyhoedd,
3 Heol Spilman, Caerfyrddin SA31 1LE | Llawr cyntaf, Tŷ Elwyn, Llanelli SA15 3AP |
Tŷ Parcyrhyn, Ffordd Y Rhyd, Rhydaman SA18 3FB

Head of Housing and Public Protection,
3 Spilman Street, Carmarthen SA31 1LE | 1st floor, Tŷ Elwyn, Llanelli SA15 3AP |
Tŷ Parcyrhyn, Ffordd Y Rhyd, Ammanford SA18 3FB

Mae croeso i chi gysylltu â ni yn y Gymraeg neu'r Saesneg | You are welcome to contact us in Welsh or English

e) Relevant Sections of the Local Licensing Policy.

The Licensing Authority believes that the following sections of Carmarthenshire's Licensing Policy are relevant to this licence application:- Section 3 Fundamental principles, Section 4 Conditions of Licence, Sections 5 – 9 relating to The Licensing Objectives and Section 11 relating to Licensing Hours.

f) Proposed Operating Schedule.

Having considered the current application and the operating schedule put forward by the applicant, the Licensing Authority believes that, if the application were granted, the wording set out in the operating schedule, which refers to the existing licence conditions, is not sufficiently precise to enable it to form clear enforceable licence conditions in accordance with section 18(2)(a) of the Licensing Act .

The operating schedule make reference to CCTV being installed at the premises. Given the nature of the premises, it's location and the request to authorise activities in the outside areas it would appear to be appropriate for the following CCTV conditions to be attached to the premises licence :-

1. A CCTV system shall be installed and maintained at the premises which gives coverage to the whole of the premises including entry and exit points as well as all consumption and smoking areas used by customers. There must not be any hidden or obscured areas or any other obstruction including outside Umbrellas and Canopies.
2. The system shall continually record whilst the premises are open and conducting licensable activities and if a defect arises the Licensing Authority or the Police must be informed and immediate arrangements must be made to rectify the fault
3. Footage from the CCTV system must be capable of being recorded onto an easily downloadable format.
4. Images recorded by the CCTV system shall be retained for a period of not less than 31 days and shall be provided to the Police or an authorised Officer of the Licensing Authority upon request.
5. All images recorded by the CCTV system shall denote an accurate date and time.
6. The CCTV system must be serviced annually to ensure continuous quality of image capture retention.
7. The system must be registered with the Information Commissioner (Tel 0303 123 1113 or email registration@ico.org.uk).
8. Notices shall be prominently displayed indicating that the area is being monitored by CCTV.

A representation has been received from another person, which sets out their objection to the application. The objection states that the shared toilet facilities at the building are closed to the public at 5 p.m, when the application is seeking to authorise the sale of alcohol to customers until 11p.m.

The applicant is requested to provide written confirmation of the arrangements in place for customer toilets at the premises in order to prevent any public nuisance from the operation of the business.

I would request that the information provided include details of the maximum capacities of customers both within the premises and on the adjacent terrace along with details of the toilet facilities accessible to those customers.

The subcommittee will have to be satisfied that granting the application will not undermine the licensing objectives.

If the application is granted, I believe it would be appropriate to attach the 8 conditions above alongside the statements made in the operating schedule.

These representations have been prepared on the 12th of May 2023 with the benefit of viewing the original application and the objection dated 10th of May 2023.

I would be grateful if the applicant could contact me to discuss the above representations at the earliest opportunity and certainly prior to the application being referred to a Licensing Sub Committee hearing for determination.

If you require any further information or assistance, please do not hesitate to contact me.

Yours faithfully,

Mr E O R Jones
Licensing Lead

From: Julia rea
Sent: Wednesday, May 17, 2023 10:20 AM
To: Kirsten Smith
Subject: BISTRO ON THE BAY

Good morning Kirsten

I am forwarding you the correspondence received from Sian in response to the toilets query received by licensing.

Could you please ensure it reaches the correct person please.

Estimated seated capacity for premises is 51
Indoors – 25
Outdoors - 36

I am in the process of signing reps and I will also get that over to you this morning.

Many thanks
Julia and Rob

From: Sian E Mathias
Sent: Tuesday, May 16, 2023 5:08:03 PM
To: Julia rea
Subject: RE: UNIT 4 PENDINE

Hi Julia

Sorry I couldn't get back to you yesterday, I was waiting to hear back from colleagues on the toilet issues.

I've done is drafted a form of words that you can cut and paste/ forward directly to Licencing (if you want to forward this email directly to Licencing that's fine):-

The toilet facilities currently available to customers of Unit 4 Parry Thomas Centre are as follows:

- There are public toilets within the Parry Thomas Centre which are open daily 9am to 5pm (except Christmas Day). In previous years there has been extended opening to 7pm in the summer, but no decision has been made with regards to the extended summer opening hours for this year, given the new facilities at the newly opened Y Caban, which is adjacent to the Parry Thomas Centre.
- There is a disability toilet within the Parry Thomas Centre, which is available for use 24/7 for holders of a RADAR key.
- There are also public toilets available at Y Caban, adjacent to the Parry Thomas Centre and these are available 9am to 9pm

There are also 24/7 public toilets at Cliff Walk (Springwell). These are currently open seasonally between April 1st and October 31st. I am awaiting confirmation of this statement from the Environment Department.

Appendix C

Sent: May 10, 2023 at 3:04 PM
To: schlicensing@carmarthenshire.gov.uk
Subject: bistro by the sea Pendine

I wish to object to the possible grant of a live music licence and a 11 pm alcohol license.

On the grounds that there is no toilet facilities after 5 pm in building , the toilets are maintained and managed by Carmarthen county council,

To have these toilets open till after 11 pm will be a financial cost to Carmarthen which in tern have a impact on rate payers for the area.

If no toilet facilities there will become a public nuisance with people peeing against walls and door ways

Many thanks Helen Bowring

From: Julia rea
Sent: Friday, May 12, 2023 10:32 AM
To: Kirsten Smith

Subject: RE: Objection to application

Good morning Kirsten.

With regard to the objection received may I submit the following information?

1. Sian Mathias is dealing with the lease for the building. She advised me that we would have a key for the use of our customers. At the end of day, we would take it upon ourselves to clean the toilets although this has not been requested. We would also ensure outside areas are clean, tidy and secure.
2. The previous tenants 'Tea by the sea', also had a license until 11pm. I do not recall there were any public nuisance complaints with regard to this .
3. The live music license is not something that would be used on a regular basis with blaring music. This would be an occasional acoustic set merely for the pleasure of our customers.

Many thanks
Julia & Rob Rea