

9th November 2018

City of Lincoln Council
Directorate of Resources
Corporate Support Services
City Hall
Beaumont Fee
Lincoln LN1 1DB

Dear Sir

Application for the Renewal of a Sex Establishment License Simply Pleasure.com - at 72 High Street, Lincoln

We would like to apply for the above sex establishment license on 9^{th} January 2018 and enclose the following:

- 1. The License fee of £302.00 was paid by company credit card on 9/1/18
- 2. Completed application form.
- I confirm the notice will be displayed at the premises for 21 days from the 9th January 2018 being the date of application.
- 4. A copy of our email requesting the Lincolnshire Echo to place our advert in the public notices section on 11th January 2018. I will forward a copy of the actual newspaper in due course.
- Copy of letter to the Licensing Officer of Lincolnshire Police for your records.

I trust I have not overlooked anything and that my application can proceed.

Yours faithfully

Tim Hemming

CC: Licensing Officer - Lincolnshire Police

Simply Pleasure Limited

Spring Lane, Forest Gate Business Park, Ringwood, Hampshire BH24 3FH
T: +44 (0)1202 868511 W: www.simplypleasure.com

Copy not Absted bout for your records only.



9th January 2018

Licensing Officer Lincolnshire Police West Parade Lincoln LN1 1YP

Dear Sir

<u>Application for the Renewal of a Sex Establishment License – Simply Pleasure.com - at 72 High Street, Lincoln, LN5 8AD</u>

I write to inform you that I am applying for the renewal of the above license on 9th January 2018. A copy all relevant documentation has been enclosed for your records.

The appropriate notice will be appearing in Lincolnshire Echo on 11th January 2018.

Should you require more information please do not hesitate to contact me.

Yours faithfully

PTim Hemming

CC: City of Lincoln Council

APPLICATION FOR THE GRANT/RENEWAL/TRANSFER* OF A LICENCE FOR A SEX ESTABLISHMENT

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982

EITHER:

Part 1 – If application is	made on behalf of an individual(s	s) please state:
First applicant:	iss Ms Dr Other (please	snecify)
Surname:	ise in the interest (pieuse	specify)
Other name(s):		
2. Home Address:		
Postcode:		
3. Place of Birth:		
4. Date of Birth:		Age:
5. Telephone:	Daytime:	
	Mobile: Evening:	
6. Email Address:	Evering.	
[please give as many cont	act details as possible in case we n	eed to contact you]
Second applicant:		20 00 1 - 1 b 1 b 1 b 1 b 1 b 1 b 1 b 1 b 1 b
The state of the s	ss Ms Dr Other (please	specify)
Surname:		
Other name(s): 8. Home Address:		
o. Home Address.		
Postcode:		-1 0 00
 Place of Birth: Date of Birth: 		A
11. Telephone:	Daytime:	Age:
· · · · · · · · · · · · · · · · · · ·	Mobile:	
	Evening:	
12. Email Address:		
[please give as many conta	act details as possible in case we ne	eed to contact you]
[continue on a separate she	eet if necessary]	

OR:

Part 1 – If application is state:	made on behalf of a corporate o	(1) 10 10 10 10 10 10 10 10 10 10 10 10 10
13. Full Name of Body: 14. Full Address of Registered or Principal Office: Postcode: 15. Telephone:	SIMPLY PLEASUR HEAD OFFICE: FOREST SPRING LANE, RING BH24 3FH BH24 3FH 01202 868516	GATE BUSINESS PARK WOOD, HANTS
	3(2) 800310	
Part 2 - Give full names	and private address of all director	ors or other persons
responsible for manage	ment of the establishment	
Title: Mr X Mrs Miss	☐ Ms ☐ Dr ☐ Other (please sp	ecify)
Surname:	HEMMING	
Other name(s):	TIMOTHY	
Home Address:	CUMATION	
	BUANTA DOME THE	
Postcode:	CONTRACTOR CONTRACTOR	
Place of Birth:		
Date of Birth:		Age:
Telephone:	Daytime:	
	Mobile:	TING 83
Title: Mr Mrs Miss	☐ Ms ☐ Dr ☐ Other (please spe	ecify)
Surname:		
Other name(s):	OTHER DIRECTORS	
Home Address:	TOBY BRANSTON ?	AS ATTACION
	TOBY BRANSTON ? SYMON REEVESS	AS ATTACHED
Postcode:	ONLINE REEVE 30	U
Place of Birth:		
Date of Birth:		Age:
Telephone:	Daytime:	7.90.
SECTION STATES	Mobile:	
Title: Mr Mrs Miss	☐ Ms ☐ Dr ☐ Other (please spe	ecify)
Surname:		
Other name(s):		
Home Address:		
Postcode:		
Place of Birth:		
Date of Birth:		Age:
Telephone:	Daytime:	
	Mobile:	
Title: Mr Mrs Miss	☐ Ms ☐ Dr ☐ Other (please spec	cify)
Surname:		

Other name(s):			
Home Address:			
Postcode:			
Place of Birth:			
Date of Birth:		Age:	
Telephone:	Daytime:	Age.	
	Mobile:		
[continue on a separa	ate sheet if necessary!		

Part 3 – Convictions

Have you or any of the above named any convictions?

Or if a body corporate or unincorporated body, that body or any of its directors or other persons responsible for its management?

YES (NO)

If YES, please state:

a) All convictions must be disclosed

b) Spent convictions, as defined below, should not be included

Date of conviction(s)

Offence

Sentence (including suspended sentence)

NA.

[continue on a separate sheet if necessary]

Sentence	Becomes spent after:
Imprisonment of between 6 months and 21/2	10 years
years	
Imprisonment of up to 6 months	7 years
Borstal training	7 years
A fine or other sentence not otherwise	5 years
covered in this table	
Absolute discharge	6 months
Probation order, conditional discharge or bind over	1 year (or until order expires, whichever is the longer)
Detention Centre Order	3 years
Remand home, attendance centre or approved school order	The period of the order and a further year after the order expires
Hospital order under the Mental Health Act	The period of the order and a further 2 years after it expires
Cashiering, discharge with ignominy or dismissal with disgrace from the Armed Forces	10 years
Dismissal from Armed Forces	7 years
Detention	5 years

NOTE: A sentence of more than $2\frac{1}{2}$ years imprisonment can never become spent. If you were under 17 years of age on the date of conviction, please halve the period shown in the right-hand column.

Part 4 – Qu						
16. Have all applicants been resident in the United Kingdom throughout a YESNO*						
	period of six months immediately preceding the date of this application?					
	17. If the application is made on behalf of a body corporate, is that body incorporated in the United Kingdom?			(YES)NO*		
			?		112111111	2
16. Register	red number (i	r applicable)		O	434148	8
Part 5 – Par	ticulars					
	ess of premis	es	72 H	1648	-066	
	to be used a	s a sex	12 17	IGH 3	reci	
establish	ment:		LINCO	こと		
Postcode:			LNS	RAD		
20. Telephor	ne number:		LN5 01522	54519	77	
21. If this app	olication relate	es to a vehicle	e/vessel/stall	give descript	ion and state	where it is to
be used a	as a sex esta	blishment:				
			MA.			
				2		
22. State hou	irs and days t	hat you wish t	to trade:			
	and dayo	nat you wish	o trade.			
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From	From	From	From	From	From	From
10 AM	10AM	10AM	10 AM	10 AM	10AM	OAM
То	To	To	То	То	То	To
88m	TO SPM	RPM	RPM	8 PM	10000	0-4
OALL	04101	91.1	Okin	01101	Ofin	ThM
23. Non stand	dard timings.	Where you int	end to use th	e premises a	at different tin	nes to those
listed in th	ne columns at	oove, please li	st			
24. Are the pr	emises to be	used as a sex	shon?		=	
24. Are the premises to be used as a sex shop? 25. Are the premises to be used as a sex cinema?						
26. Are the premises to be used as a sexual entertainment venue?						
27. Are you (or, if a corporate or unincorporated body, that body) disqualified YES/NO						
from holdi	ng a licence f	or a sex estab	lishment?			
28. Have you	28. Have you ever been refused a licence for a sex establishment? (E)/NO*			(E)/NO*		
			PURELY D	METO LO	CATION	

29. I/WE* confirm that, to the best of MY/OUR* knowledge, the information contained in

Part 6 – Declaration and Checklist (please tick)

this application is true.	
30. If applying as a new applicant for a sex shop, I/WE* have enclosed evidence of identity, date of birth and address and include a passport size photo of each member of staff that will be nominated as being in charge of the premises whilst open to the public. [This information may be forwarded to Lincolnshire Police]	
31.I/WE* understand that information given may be used in conjunction with other authorities for the prevention and detection of crime, and will be held on computer, subject to the Data Protection Act 1998.	
32. If applying for a new Sexual Entertainment Venue, I/WE* have enclosed a scale plan of the premises indicating where on the premises relevant entertainment will take place. [Each form of entertainment will require identification e.g. lap dancing, pole dancing, table dancing, strip shows, peep shows]	
33. The appropriate fee is enclosed (cheques should be made payable to City of Lincoln Council). PAID BY COMPANY CARD OVER PHONE 91118	
34. I/WE* confirm that this application shall be advertised in accordance with the requirements contained within Paragraph 10 of Schedule 3 of the Local Government (Miscellaneous Provisions) Act 1982.	
35. I/WE* confirm that a copy of this application has been sent to the Chief Officer of Lincolnshire Police (except electronic applications)	y
36. I/WE* understand that if the above requirements have not been complied with my application will be rejected.	
IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE NOT EXCEEDING £20,000 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION	
Part 7 – Signature(s)	
37. Signature of applicant or applicant's solicitor or other duly authorised agent. If signing behalf of the applicant, please state in what capacity:	on
Signature:	

Part 7 – Signature(s)

37. Signature of applicant or applicant's solicitor or other duly authorised agent. If signing on behalf of the applicant, please state in what capacity:

Signature:

Print Name:

Capacity:

Accounts

Date:

38. 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:

Capacity:

Date:

Print Name:

Capacity:

Date:

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 37 and 38 above.]

[Where the application is to be submitted in an electronic form, the signature should be generated electronically and should be a copy of the person's written signature.]

* Delete or select as necessary.

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982

NOTICE OF APPLICATION FOR THE [GRANT] [RENEWAL] [TRANSFER] OF A SEX ESTABLISHMENT LICENCE

To all persons whom it may concern
NOTICE IS HEREBY GIVEN that I/WE TIMOTHY HEMMING OF SIMPLY PLEASURE
Of SPENGLANE, FOREST GATE BUSINESS PARK, PINGWOOD HANTS BHOURS FH On STL JANHARY 2018 made application to the City of Lincoln Council being the licensing authority for the purposes of section 2 of the above Act, for the [grant] [renewal] [transfer] of a licence to use [the premises situate at and known as SIMPLY PLEASURE-COM 72 HIGH STREET, LINCOLN LNS 8AD [a vehicle/vessel/stall to be situated at
as a [Sex Shop][Sex Cinema][Sexual Entertainment Venue]
[The proposed transferee(s) is/are
of /
Any person objecting to the application must give notice in writing of such objection to the said Council at City Hall Beaumont Fee Lincoln LN1 1DB stating in general terms the grounds of such objection, not later than 28 days after
Signed July AP. TIMOTHY HEMMING On behalf of SIMPLY PLEASURE
On behalf of DIMPLY PLEASURE

(Delete any words in square brackets which do not apply)

NOTES (not part of the Notice)

- 1. Notice of application must in all cases be given by publishing an advertisement in a local newspaper circulating in the local authority area. The publication must not be later than 7 days after the date of the application.
- Where the application is in respect of premises, notice must in addition be displayed for 21 days beginning with the date of application on or near the premises and in a place where the notice can conveniently be read by the public.

(6°) \$ 180-00

Jenny.jefferies@lincolnshiremedia.co.uk Tel: 01522 820000

Lincolnshire Echo

9th January 2018 **Public Notices**

Please find below advertisement to appear in the Lincolnshire Echo under the Public Notices section on the **11**th **January 2018**

Please ensure that you send us a copy of the actual newspaper for our records.

Please can you confirm receipt of this email, with cost of the insertion. My direct number is 01202 868516. I can then pay by credit card.

Best regards

Jane Luty

Cc Lincoln City Council Cc Lincolnshire Police

LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982 NOTICE OF APPLICATION FOR A SEX ESTABLISHMENT LICENSE

To all persons whom it may concern NOTICE IS HEREBY GIVEN that TIMOTHY HEMMING of Simply Pleasure Ltd, Forest Gate Business Park, Spring Lane, Ringwood, Hants BH24 3FH applied to the City of Lincoln Council being the licensing authority for the purpose of section 2 of the above Act, for the renewal of a license to use the premises situated and known as SIMPLY PLEASURE.COM, 72 High Street, Lincoln, LN5 8AD as a Sex Establishment.

Any person objecting to the application must give notice in writing of his/her objection to the Council at City of Lincoln Council, City Hall, Beaumont Fee, Lincoln, LN1 1DB stating in general terms the grounds of such objection, not later than 28 days after 9th January 2018 being the date of application.

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tonylouth@aol.com

07787 419438_{cw}

EPC Rating: N/A

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OCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982 NOTICE OF APPLICATION FOR A SEX ESTABLISHMENT LICENSE

Lincoln Council being the licensing authority for the purpose of section 2 of the above Act, for the application of a license to use the premises situated and Simply Pleasure Ltd, Forest Gate Business Park, Spring Lane, Ringwood, Hants BH24 3FH applied to the City of known as Simply Pleasure.com, 72 High Street, Lincoln, NOTICE IS HEREBY GIVEN that Timothy Hemming To all persons whom it may concern LN5 8AD as a Sex Establishment.

notice in writing of his/her objection to the Council at City of Lincoln Council, City Hall, Beaumont Fee, Lincoln, LN1 1DB stating in general terms the grounds of such objection, not later than 28 days after 9th January 2018 Any person objecting to the application must give being the date of application

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order will, where appropriate, authorise the sale of the

premises described.

2.That under sections 554 and 556 of the Education Act 1996 any person interested may within one month after the date of this Notice make representations on the

proposed order in writing to the Secretary of State at A copy of the draft order may be inspected from Monday to Friday between 10 am and 4pm at Edward

the Department's address given below.

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