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Mr Tony Ireland
Licensing Services Manager
Licensing Services
Business and Consumer Services
Luton Borough Council
Town Hall
Upper George Street
Luton, LU1 2BQ

Date 9 November 2012
Your ref
Our ref ROBERDA/051949-010083

## **By Courier**

Dear Sirs

The Gambling Act 2005 - Application for small Casino Provisional Statement by Genting Casinos UK Limited

Premises: Casino yet to be named and to comprise of the part of a multi tenanted building which is currently occupied in part by Genting Casino Luton and in part by Genting Electric Luton, Skimpot Road, Luton, Bedfordshire, LU4 0JB and as shown on the plans accompanying this application

We act on behalf of Genting Casinos UK Limited and are duly authorised on behalf of our client to submit the enclosed Application for a Provisional Statement for a Small Casino under the Gambling Act 2005 proposed to be located at the above address.

In support of our client's Application, please find enclosed the following:-

- Application Form for Small Casino Provisional Statement;
- Application Plans for proposed Small Casino numbered LIC-01 Revision A;
- Site Plans numbered LIC-02;
- Form A, Notice of Application for Provisional Statement;
- Cheque for Application fee of £8,000;
- Copy of Letter of Authority from Genting Casinos UK Limited.

We can confirm that Notice of this Application has been displayed at the site, and copies of this letter, together with copies of the Provisional Statement Application Form, Plans and Form A Notice are being served on each of the Responsible Authorities.

If you have any queries in respect of this Application, then please do not hesitate to contact David Roberts of these offices.

Eversheds LLP Eversheds House 70 Great Bridgewater Street Manchester M1 5ES





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We would be grateful if you would kindly acknowledge receipt.

Yours faithfully.

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Encl.





# Stage 1 Application for a provisional statement under the Gambling Act 2005 (standard form)

Tony Ireland Licensing Services Manager **Business and Consumer Services** Luton Borough Council Town Hall **Upper George Street** Luton LU1 2BQ

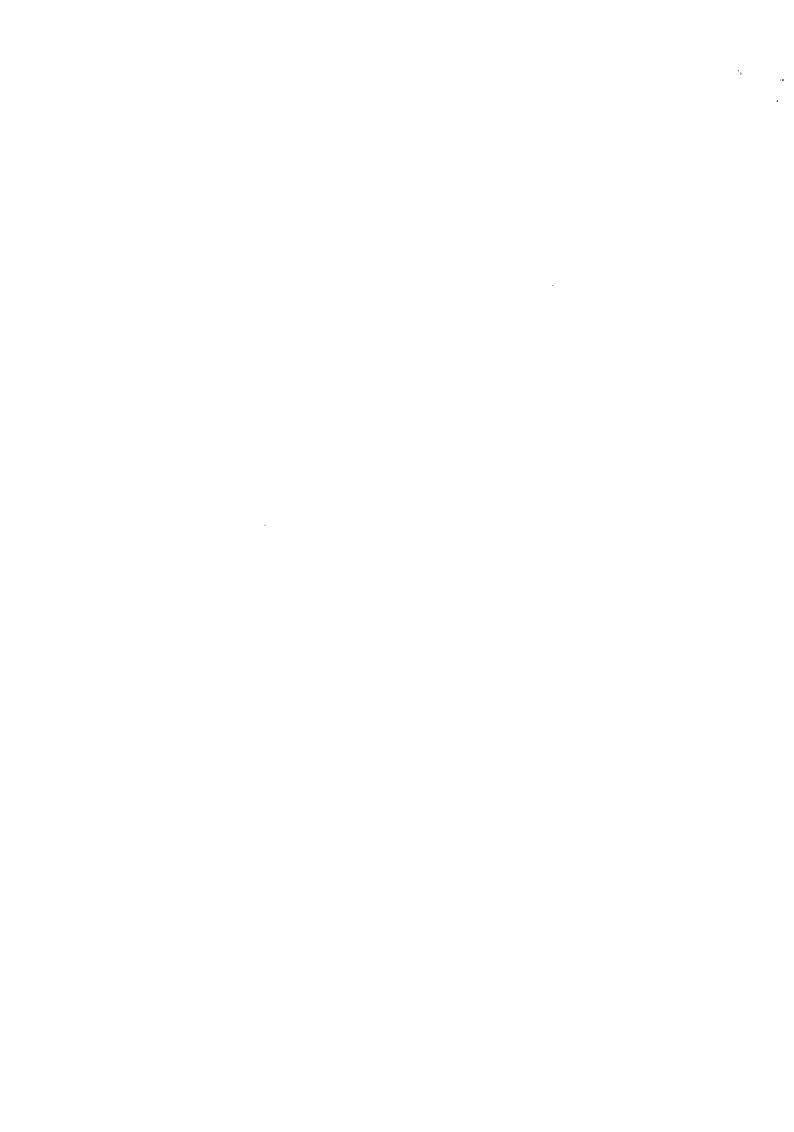
## PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

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 – Type of premises licence applied for	
Small Casino x	
Part 2 Applicant Details	
If you are an individual, please fill in Section A. If the application organisation (such as a company or partnership), please fill in Sect Section A Individual applicant	
1. Title: Mr □ Mrs □ Miss □ Ms □ Dr □ Other (please s	pecify)
2. Surname:  [Use the names given in the applicant's operating licence or, if the operating licence, as given in any application for an operating licen	
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 t	he operating licence)
4(b) If the applicant does not hold an operating licence but is in the the date on which the application was made.	process of applying for one, give



5. Tick the box if the application is being made by more than one per [Where there are further applicants, the information required in que on additional sheets attached to this form, and those sheets sho further applicants".]	estions 1 to 4 should be included
Section B	
Application on behalf of an organisation	
6. Name of applicant business or organisation: Genting Casinos UK [Use the names given in the applicant's operating licence or, it operating licence, as given in any application for an operating licence	the applicant does not hold an
7. The applicant's registered or principal address:	
Genting Club Star City Watson Road Birmingham	
Postcode: B7 5SA	
8(a) The number of the applicant's operating licence (as given in the 000-000537-N-103203-015	operating licence):
8(b) If the applicant does not hold an operating licence but is in the the date on which the application was made: N/A	process of applying for one, give
9. Tick the box if the application is being made by more than one organization.	ganisation. □
[Where there are further applicants, the information required in qu on additional sheets attached to this form, and those sheets sho further applicants".]	
Part 3 - Premises Details	Marking and the second of the



- 10. Proposed trading name to be used at the premises (if known): To be confirmed
- 11. Address of the premises (or, if none, give a description of the premises or proposed premises and their location):

Casino yet to be named and to comprise of the part of a multi tenanted building which is currently occupied in part by Genting Casino Luton and in part by Genting Electric Luton,

Skimpot Road

Luton

Bedfordshire

and as shown on the plans accompanying this application

Postcode: LU4 0JB

- 12. Telephone number at premises (if known): 0158 259 1148
- 13. If the premises are in only a part of a building, please describe the nature of the building (for example, a shopping centre or office block). The description should include the number of floors within the building and the floor(s) on which the premises are located.

The premises will comprise of the part of an existing two storey multi tenanted building which is currently occupied by two separate casino premises and adjoins the neighbouring Mecca Bingo Club and a gymnasium. The building is located on a business estate.

- 14(a) Are the premises or proposed premises situated in more than one licensing authority area? No [delete as appropriate]
- 14(b). If the answer to question 14(a) is yes, please give the names of all the licensing authorities within whose area the premises are partly located, other than the Licensing Authority to which this application is made: N/A

#### Part 4 – Times of operation

- 15(a). Do you want the licensing authority to exclude a default condition so that the premises may be used for longer periods than would otherwise be the case? Yes [delete as appropriate] [Where the relevant kind of premises licence is not subject to any default conditions, the answer to this question will be no.]
- 15(b). If the answer to question 15(a) 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	23:59	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	



16. If you wish to apply for a premises licence with a condition restricting gambling to specific periods in a year, please state the periods below using calendar dates: N/A

#### Part 5 - Miscellaneous

- 17. Proposed commencement date for licence (leave blank if you want the licence to commence as soon as it is issued): (dd/mm/yyyy)
- 18(a) Does the application relate to premises or proposed premises which are part of a track or other sporting venue which already has a premises licence: No [delete as appropriate]
- 18(b) If the answer to question 18(a) is yes, please confirm by ticking the box that an application to vary the main track premises licence has been submitted with this application:  $\Box$
- 19(a) Do you hold any other premises licences that have been issued by this licensing authority?

Yes [delete as appropriate]

19(b) If the answer to question 19(a) is yes, please provide full details:

Genting Casinos UK Limited holds two Converted Casino Premises Licence issued under the Gambling Act 2005 which relate to the following casinos:-

Genting Casino, Luton, Skimpot Road, Luton, LU4 0JB – Premises Licence reference No. 076422 and

Genting Electric Luton, Skimpot Road, Luton, LU4 0JB – Premises Licence reference No.076161.

- 20. Please set out any other matters which you consider to be relevant to your application:
- 1. This Provisional Statement application relates to the part of a multi tenanted building which is currently occupied by two separate casino premises operated by Genting Casinos UK Limited. Should this Provisional Statement be granted Genting will ensure that those existing Premises Licences shall not relate to any part of the building prior to the grant of any subsequent application for a Small Casino Premises Licence.
- 2. Genting Casinos UK Limited operates robust practices, policies and procedures to ensure that it complies with the requirements of the Gaming Act 2005, the Gambling Commission and relevant Licensing Authority Statements of Gambling Policy.

### Part 6 – Declaration and Checklist (Please tick)

- I/ We confirm that, to the best of my/ our knowledge, the information contained in this application is true.
- 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.



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Checklist:		
<b>Q</b>	Payment of the appropriate fee has been made/is el	nclosed
	A plan of the premises or proposed premises is enc	osed
<b>9</b>	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 adve	ertise the application and give the
	appropriate notice to the responsible authorities	
   Part 7 – Sign	aturae	
	of applicant or applicant's solicitor or other duly author	prised agent. If signing on behalf of
the applicant,	please state in what capacity:	·
Sig		
Oig		·
Print Name: D	David Roberts	
Date 9/11/2		Duly authorised solicitor
	applications, signature of 2nd applicant, or 2nd appl	icant's solicitor or other authorised
	ng on behalf of the applicant, please state in what car	
Signature:	·	
	•	
Print Name:	· · · · · · · · · · · · · · · · · · ·	
Date	dd/mm/yyyy Capacity	
[Where there	e are more than two applicants, please use an	1
"Signature(s)   paragraphs 2	of further applicant(s)". The sheet should include 1 and 22.1	all the information requested in
[Where the a	pplication is to be submitted in an electronic form, t	_
electronically	and should be a copy of the person's written signatur	e.j
Part 8 - Cont		ut the application
David Roberts	give the name of a person who can be contacted abo	ut the application:
23(b) Please	give one or more telephone numbers at which the	person identified in guestion 23(a)
can be contac	· ·	portion identified in question 20(a)
	•	
24. Postal add	dress for correspondence associated with this applica	tion:
Eversheds LL	P	
Eversheds Ho	ouse, 70 Great Bridgewater Street, Manchester	
Postcode:M1	5ES	
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25. 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:

