

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 **Mrs Tharany VICKINARAJAH**

(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 <b>Sivathurka News</b> <b>5 Aire Drive</b>			
Post town	<b>South Ockendon</b>	Postcode	<b>RM15 5AP</b>

Telephone number at premises (if any)	
Non-domestic rateable value of premises	<b>£3,850</b>

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 type="checkbox"/>	Mrs <input checked="" type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname <b>Vickinarajah</b>			First names <b>Tharany</b>		
Date of birth	[REDACTED]	I am 18 years old or over	<input checked="" type="checkbox"/>	Please tick yes	
Nationality <b>British Citizen</b>					
Current residential address if different from premises address		[REDACTED]			
Post town	[REDACTED]			Postcode	[REDACTED]
Daytime contact telephone number					
E-mail address (optional)		[REDACTED]			

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 checked="" type="checkbox"/>		Please tick yes	
Nationality											
Current postal address if different from premises address											
Post town								Postcode			
Daytime contact telephone number											
E-mail address (optional)											

(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)
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**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD	MM	YYYY
A	S	P

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) . News Agent & Convenience Store
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If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

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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

J

Supply of alcohol Standard days and timings (please read guidance note 7)			<u>Will the supply of alcohol be for consumption – please tick</u> (please read guidance note 8)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5)  On New Year's Eve from the start of permitted hours to the start of permitted hours on the following day.  <u>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</u> (please read guidance note 6)		
Mon	08:00	21:00			
Tue	08:00	21:00			
Wed	08:00	21:00			
Thur	08:00	21:00			
Fri	08:00	21:00			
Sat	08:00	21:00			
Sun	08:00	20:00			

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 Mr Naresh Patel
Date of birth
Address [REDACTED]
Postcode [REDACTED]
Personal licence number (if known) 08NP-00AQ-RGFE-WGL4
Issuing licensing authority (if known) London Borough of Harrow

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)
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NONE

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any <u>seasonal variations</u> (please read guidance note 5)  On New Year's Eve from 10.00 to the start of permitted hours on the following day.
Day	Start	Finish	
Mon	08:00	21:00	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 (please read guidance note 6)
Tue	08:00	21:00	
Wed	08:00	21:00	
Thur	08:00	21:00	
Fri	08:00	21:00	
Sat	08:00	21:00	
Sun	08:00	20:00	

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)

1. The Licensee shall ensure that a 'Challenge 25' scheme is operated, whereby any person who appears to be under 25 years of age is required to produce means of identification proving they are over 18 years of age. The only authorised means of identification shall be passport, UK photo driving licence or 'PASS' accredited card.
2. The Licensee and Designated Premise Supervisor shall ensure that signage is displayed advising customers that a 'Challenge 25' policy is in force.
3. The Licensee and shall ensure that a refusal's record is maintained at the premises which detail all refusals to sell alcohol. Each entry shall, as a minimum, record the date and time of the refusal and the name of the staff member refusing the sale. The record shall be made immediately available to the Police or Licensing Authority staff upon request.

4. The Licensee shall ensure that a written record is kept on the premises of all persons authorised by the Designated Premises Supervisor or a Personal Licence Holder to sell or supply alcohol in their name. Such records shall be provided to any officer authorised under The Licensing Act
5. The premises shall have installed and maintain a closed-circuit television surveillance (CCTV) The system which at all times complies with the below requirements:
  - a) CCTV shall be provided in the form a recordable system, capable of providing pictures of evidential quality in all lighting conditions particularly facial recognition;
  - b) CCTV cameras shall cover all public areas including all entrances and exits;
  - c) Equipment shall be maintained in good working order, be correctly time and date stamped, recordings must be kept in good working order and kept for a minimum period of 31 days;
  - d) At all times, whilst the premises is open for licensable activities, there shall be members of staff able to immediately provide viewable copies of recordings to the Police or Licensing Authority staff upon reasonable request;
  - e) The recording equipment and data storage devices shall be kept in a secure environment and fitted with security functions (such as passwords) to prevent recordings being tampered with;
6. Signs shall be displayed at all public entrances advising customers that CCTV is operating at the premises.
7. An incident log shall be kept at the premises and made immediately available to the Police or Licensing Authority staff upon request. The log shall record the following:
  - a) All crimes reported to the venue
  - b) All ejections of patrons
  - c) Any complaints received concerning crime and disorder
  - d) Any incidents of disorder
  - e) All seizures of drugs or offensive weapons
  - f) Any faults in a CCTV system, searching equipment or scanning equipment mandated as a condition of the licence.
  - g) All complaint of noise nuisance
8. Alcohol in the licensed premises shall be kept separate from and not displayed adjacent to products used predominantly by children.
9. All staff working at the point of sale must receive training in respect of the Licensing Act 2003. This training to include specifically: Challenge 25, underage sales, the nature of ID to be accepted and the serving of alcohol to a person whom appears intoxicated.

Training records shall be kept on the premises (or otherwise be accessible on the premises) for a minimum of 12 months and made immediately

available to police, trading standards or licensing authority staff upon reasonable request.

10. Signage will be displayed at the exit of the premises requesting customers leaving the premises late at night to do so quietly and with consideration so as not to disturb nearby residents.

b) The prevention of crime and disorder

See above Box (M a)

c) Public safety

See above Box (M a)

d) The prevention of public nuisance

See above Box (M a)

e) The protection of children from harm

See above Box (M a)

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 (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	<p>[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).</p> <p>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 her proof of entitlement to work, if appropriate (please see note 15)</p>
Signature	Paul Richards
Date	13 <sup>th</sup> November 2022
Capacity	Licensing Consultant, duly authorised to sign on behalf of the applicant

For joint applications, signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> 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)

Mr Paul Richards, Century House, 24 Brunswick Close,

Post town	Biggleswade	Postcode	SG18 0DA
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Telephone number (if any)	07502 121 887
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If you would prefer us to correspond with you by e-mail, your e-mail address (optional)  
paul@21stcenturylicensing.com

Please ensure all correspondence and the final licence documents are returned to 21<sup>st</sup> Century Licensing. No correspondence should go directly to the applicant or application site. This will enable us to check documents on behalf of the applicant.

In the event that you consider the application is defective in any way we respectfully request that you contact 21<sup>st</sup> Century Licensing to see if matters can be resolved before rejecting it.

