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## **LICENSING SUB-COMMITTEE**

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**TUESDAY, 25TH JULY, 2006 at 18:00 HRS –  
CIVIC CENTRE, HIGH ROAD, WOOD GREEN, N22 8LE.**

**MEMBERS:** Councillors Demirci, Patel (Chair), and Vanier

### **AGENDA**

**1. APOLOGIES FOR ABSENCE**

**2. URGENT BUSINESS:**

The Chair will consider the admission of any late items of urgent business. (Late items will be considered under the agenda item where they appear. New items will be dealt with at item 7 below).

**3. DECLARATIONS OF INTEREST:**

A member with a personal interest in a matter who attends a meeting of the Authority at which the matter is considered must disclose to that meeting the existence and nature of that interest at the commencement of that consideration, or when the interest becomes apparent.

A member with a personal interest in a matter also has a prejudicial interest in that matter if the interest is one which a member of the public with knowledge of the relevant facts would reasonably regard as so significant that it is likely to prejudice the member's judgement of the public interest.

**4. SUMMARY OF PROCEDURE: (PAGES 1 - 4)**

The Chair will explain the procedure that the Committee will follow for each of the hearings considered under the Licensing Act 2003. A copy of the procedure is attached.

**5. HILL RISE CLUB, 807 HIGH ROAD TOTTENHAM, N17 (NORTHUMBERLAND PARK WARD): (PAGES 5 - 42)**

To consider an application to provide a licensable activity in the form of Supply of Alcohol, Provision of Regulated Entertainment, and Provision of Late Night Refreshment.

**6. SIRWAN FOOD CENTRE, 5-11 GREEN LANES, PALMERS GREEN, N13 (WOODSIDE WARD): (PAGES 43 - 68)**

To consider an application to provide a licensable activity in the form of Supply of Alcohol.

**7. ITEMS OF URGENT BUSINESS:**

To consider any new items admitted under item 2 above.

**YUNIEA SEMAMBO**  
**Head of Member Services**  
River Park House  
225 High Road  
Wood Green  
London N22 8HQ

**NICOLAS MATTIS**  
**Principal Support Officer (Council)**  
Tel: 020 8489 2916  
Fax: 020 8489 2660  
[nicolas.mattis@haringey.gov.uk](mailto:nicolas.mattis@haringey.gov.uk)

**17 July 2006**

<p><b><u>LICENSING SUB-COMMITTEE HEARINGS</u></b>  <b><u>PROCEDURE SUMMARY</u></b></p>	<p>Tick box to record action / decisi on</p>
<p><u>INTRODUCTION</u></p>	
<p>1. The Chair introduces himself and invites other Members, Council officers, Police, Applicant and Objectors to do the same.</p>	
<p>2. The Chair invites Members to disclose any prior contacts (before the hearing) with the parties or representations received by them</p>	
<p>3. The Chair explains the procedure to be followed by reference to this summary which will be distributed.</p>	
<p><u>NON-ATTENDANCE BY PARTY OR PARTIES</u></p>	
<p>4. If one or both of the parties fails to attend, the Chair decides whether to:</p>	
<p>(i) grant an adjournment to another date, or</p>	
<p>(ii) proceed in the absence of the non-attending party.</p>	
<p>Normally, an absent party will be given one further chance to attend.</p>	
<p><u>TOPIC HEADINGS</u></p>	
<p>5. The Chair suggests the "topic headings" for the hearing.</p> <p>In the case of the majority of applications for variation of hours, or other terms and conditions, the main topic is:</p> <p><b>Whether the extensions of hours etc. applied for would conflict with the four licensing objectives i.e.</b></p>	
<p>(i) the prevention of crime and disorder,</p>	
<p>(ii) public safety,</p>	

(iii) the prevention of public nuisance, and	
(iv) the protection of children from harm.	
6. The Chair invites comments from the parties on the suggested topic headings and decides whether to confirm or vary them.	
<u>WITNESSES</u>	
7. The Chair asks whether there are any requests by a party to call a witness and decides any such request.	
8. <u>Only</u> if a witness is to be called, the Chair then asks if there is a request by an opposing party to “cross-examine” the witness. The Chair then decides any such request.	
<u>DOCUMENTARY EVIDENCE</u>	
9. The Chair asks whether there are any requests by any party to introduce late documentary evidence.	
10. If so, the Chair will ask the other party if they object to the admission of the late documents.	
11. If the other party <u>do object</u> to late admission, the following criteria shall be taken into account when the Chair decides whether or not to admit the late documents:	
(i) What is the reason for the documents being late?	
(ii) Will the other party be unfairly taken by surprise by the late documents?	
(iii) Will the party seeking to admit late documents be put at a major disadvantage if admission of the documents is refused?	
(iv) Is the late evidence really important?	
(v) Would it be better and fairer to adjourn to a later date?	
<u>THE LICENSING OFFICER'S INTRODUCTION</u>	
12. The Licensing Officer introduces the report explaining, for example, the existing hours, the hours applied for and	

<p>the comments of the other Council Services or outside official bodies. This should be as “neutral” as possible between the parties.</p>	
<p>13. The Licensing Officer can be questioned by Members and then by the parties.</p>	
<p><u>THE HEARING</u></p>	
<p>14. This takes the form of a discussion led by the Chair. The Chair can vary the order as appropriate but it should include:</p>	
<p>(i) an introduction by the Objectors' main representative</p>	
<p>(ii) an introduction by the Applicant or representative</p>	
<p>(iii) questions put by Members to the Objectors</p>	
<p>(iv) questions put by Members to the Applicant</p>	
<p>(v) questions put by the Objectors to the Applicant</p>	
<p>(vi) questions put by the Applicant to the Objectors</p>	
<p><u>CLOSING ADRESSES</u></p>	
<p>15. The Chair asks each party how much time is needed for their closing address, if they need to make one.</p>	
<p>16. Generally, the Objectors make their closing address before the Applicant who has the right to the final closing address.</p>	
<p><u>THE DECISION</u></p>	
<p>17. Members retire with the Committee Clerk and legal representative</p>	

<p>to consider their decision including the imposition of conditions.</p> <p>The decision is put in writing and Members return to the meeting.</p>	
<p>18. The Chair should read out the following statement before asking the Committee Clerk to read out in public a summary of the Committee's Decision:</p> <p><i>“The Committee Clerk will read out a summary of the Committee’s Decision. The Parties will receive a written Decision Notice in which the Decision will be formally set out. Please note that the written Decision will be substantially the same although the wording might vary slightly from the summary read out.”</i></p>	

**Licensing Act 2003 Sub-Committee on 25th JULY 2006**

Report title: Application for a Premises Licence for HILL RISE CLUB, 807 HIGH RD, TOTTENHAM, N17 0PH

Report of: The Lead Officer Licensing

Ward(s) affected Tottenham

1. Purpose

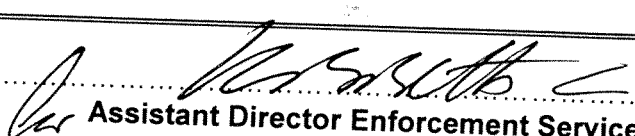
To consider an application by WINSTON DAVIS to provide a licensable activity in the Supply of alcohol and Provision of regulated entertainment and Late Night Refreshment.

2. Recommendations

- 2.1 (a) Grant the application as asked  
 (b) Modify the conditions of the licence, by altering or omitting or adding to them  
 (c) Reject the whole or part of the application

The Committee is asked to note that it may not modify the conditions or reject the whole or part of the application unless it is necessary to promote the licensing objectives.

Report authorised by: Robin Payne.....

  
 Assistant Director Enforcement Services

Contact Officer: Ms Daliah Barrett

Telephone: 020 8489 5103

3. Executive summary

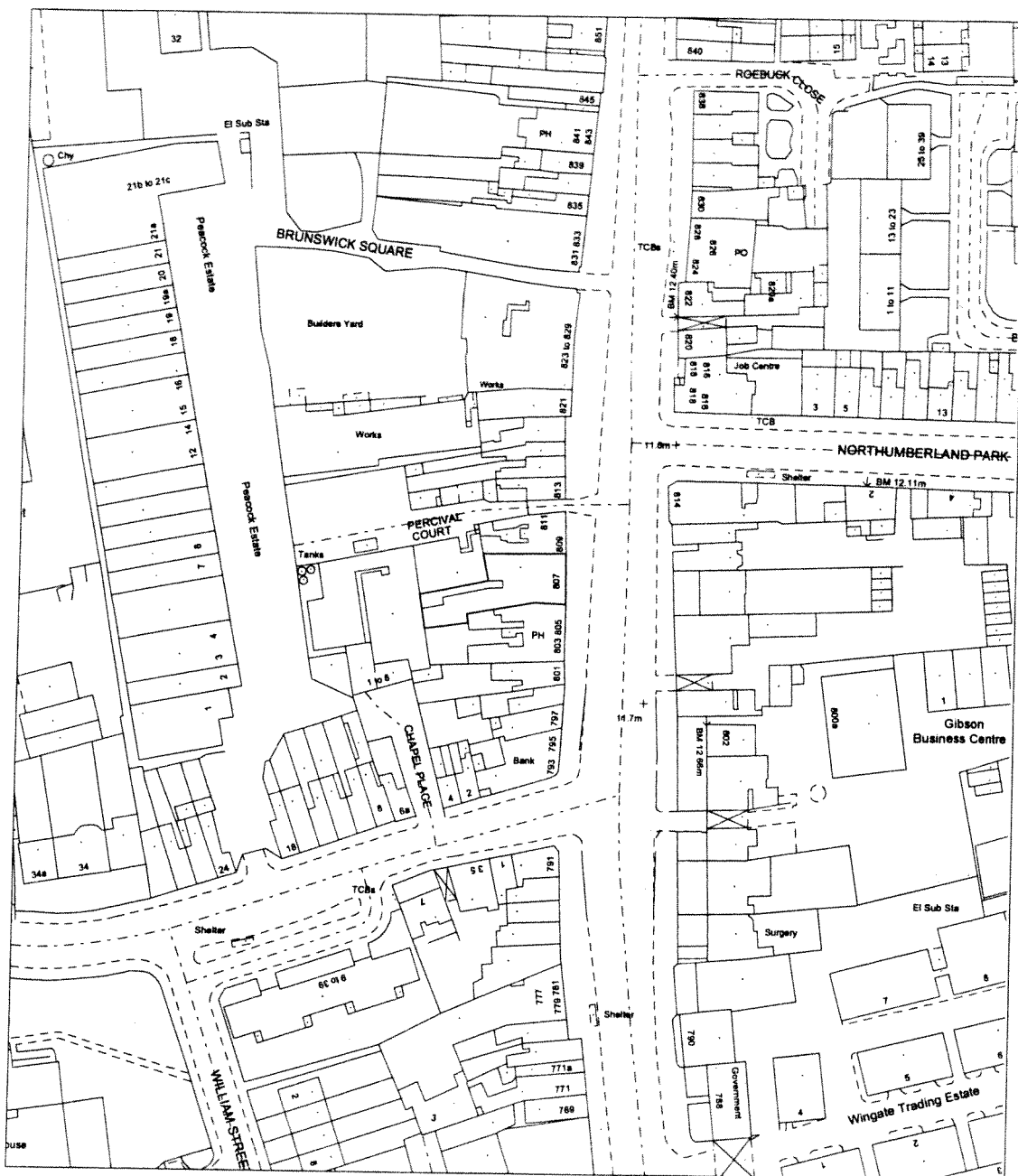
For consideration by Sub Committee under Licensing Act 2003 for a New Premises licence

4. Access to information:

Local Government (Access to Information) Act 1985  
 Background Papers

The following Background Papers are used in the preparation of this Report:  
 File: HILL RISE CLUB, 807 HIGH ROAD, N17

The Background Papers are located at Enforcement Service, Civic Centre, High Road Wood Green N22

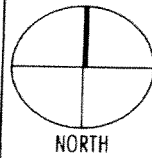


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**Site plan**  
**Hill Rise Club, 807 High Road N17**

**HARINGEY COUNCIL**  
**Directorate of Environmental Services**

Robin Payne  
 Assistant Director  
 Enforcement Service  
 639 High Road  
 London N17 8BD  
 Tel 020 8489 0000  
 Fax 020 8489 5525

 NORTH	Drawn by	DW
	Scale	1:1250
	Date	02/06/2006



**5. REPORT****Background**

**5.1** Application by **WINSTON DAVIS**, for a New Premises Licence in respect of **807 HIGH ROAD, N17** under the Licensing Act 2003.

**5.2 Details of new Premises Licence application****Opening Hours for Public**

Sunday to Thursday	11.00 to 05.00
Friday & Saturday	11.00 to 06.00

**Supply of alcohol**

Sunday to Thursday	11.00 to 04.00
Friday & Saturday	11.00 to 05.00

**Late Night Refreshments**

Sunday to Thursday	23.00 to 04.00
Friday to Saturday	23.00 to 05.00

**Regulated entertainment (Dancing and Making music)**

Sunday to Thursday	21.00 to 04.00
Friday & Saturday	21.00 to 05.00

**Live Music and Recorded Music**

Sunday to Thursday	21.00 to 04.00
Friday to Saturday	21.00 to 05.00

**OPERATING SCHEDULE****5.2 Crime and Disorder**

A digital Closed Circuit Television System will be installed and maintained on the premises. The CCTV system will be recording at all times when the premises are open and the recordings shall be made available to the police and the council on request.

Two door supervisors will be stationed on the premises between 21.00 and the closing of the premises on every day and 4 hours before the scheduled kick off until 1 hour after the end of the match on days when a designated football match is being played at Tottenham Hotspur Football Club.

All alcoholic drinks dispensed from the bar will be purred into plastic containers. No glass bottles will be sold over the bar.

Anti drugs signs will be displayed on the premises.

**5.4 Public Safety**

Fire Safety equipment will be checked regularly and any requirements made by the Fire Safety Officer will be complies with.

**5.5 Public Nuisance**

Staff will call Taxis/ Mini cabs for the use of customers leaving the premises when requested to do so.

**5.6 Child Protection**

No children under the age of 18 will be admitted to the premises after 21.00 except at pre-booked private functions and the age will be checked at the door by requesting photographic identification where there is any doubt that they are over the age of 18.

All staff will be trained that alcohol will only be sold to persons who can produce photographic identification where there is any doubt that they are over the age of 18.

**6. RELEVANT REPRESENTATIONS (CONSULTATION)**

**Responsible authorities:**

**6.1 Comments of Metropolitan Police**

The Police have made representation to this application. App 2

**6.2 Comments of Enforcement Services:**

Noise team have not commented on this application.

**Food Team**

Have no objections to this application

**Health and Safety**

Have no objections to this application

**Trading Standards**

Page 4

Have no objections to this application

**6.3 Fire Officer**

The Fire Officer has made a representation against this application. App 3

**6.4 Planning Officer**

Planning has no objection to this application.

**6.5. Comments of Child Protection Agency or Nominee**

No comments to make on this application.

**7.0 Interested Parties**

1 letters of representation have been received against this application. App 4

**8.0 Financial Comments**

The fee which would be applicable for this application was **£190.00**

# **APPENDIX 1**

# **APPLICATION FORM**

**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 **WINSTON DAVIS**

*(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**

<b>Postal address of premises or, if none, ordnance survey map reference or description</b> HILL RISE CLUB 807 HIGH ROAD TOTTENHAM			
<b>Post town</b>	LONDON	<b>Post code</b>	N17 0DH
<b>Telephone number at premises (if any)</b>			
<b>Non-domestic rateable value of premises</b>		£15000	

**Part 2 - Applicant Details**

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

- a) an individual or individuals \*  please complete section (A)
- b) a person other than an individual \*
  - i. as a limited company  please complete section (B)
  - ii. as a partnership  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  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:

Please tick yes

- 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)**

<b>Mr</b> <input checked="" type="checkbox"/>	<b>Mrs</b> <input type="checkbox"/>	<b>Miss</b> <input type="checkbox"/>	<b>Ms</b> <input type="checkbox"/>	<b>Other Title (for example, Rev)</b>	
<b>Surname</b> DAVIS			<b>First names</b> WINSTON		
<b>I am 18 years old or over</b>				<input checked="" type="checkbox"/>	<b>Please tick yes</b>
<b>Current postal address if different from premises address</b>		40A GREAT CAMBRIDGE ROAD TOTTENHAM			
<b>Post Town</b>	LONDON		<b>Postcode</b>	N17 7BU	
<b>Daytime contact telephone number</b>			07932 591733		
<b>E-mail address (optional)</b>					

**SECOND INDIVIDUAL APPLICANT (if applicable)**

<b>Mr</b> <input type="checkbox"/>	<b>Mrs</b> <input type="checkbox"/>	<b>Miss</b> <input type="checkbox"/>	<b>Ms</b> <input type="checkbox"/>	<b>Other Title (for example, Rev)</b>	
<b>Surname</b>			<b>First names</b>		
<b>I am 18 years old or over</b>				<input type="checkbox"/>	<b>Please tick yes</b>

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)

**Part 3 Operating Schedule**

When do you want the premises licence to start?

Day	Month	Year
1	3	05 2006

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

Day	Month	Year

Please give a general description of the premises (please read guidance note1)  
 NIGHTCLUB / BAR

BAR DURING THE DAYTIME

NIGHTCLUB FROM 21.00

OCCASIONAL PRE-BOOKED PRIVATE FUNCTIONS SUCH AS WEDDINGS AND  
 CHRISTENINGS.

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 of the Licensing Act 2003 and Schedules 1 and 2 to the  
 Licensing Act 2003)

**Provision of regulated entertainment**

**Please tick yes**

- 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 entertainment facilities:**

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j)  
 (if ticking yes, fill in box K)

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

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

In all cases complete boxes N, O and P



**A**

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of a play take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)	Both	<input type="checkbox"/>
Tue					
Wed			<b><u>State any seasonal variations for performing plays</u></b> (please read guidance note 4)		
Thur					
Fri			<b><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></b> (please read guidance note 5)		
Sat					
Sun					

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
Both	<input type="checkbox"/>				
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
Thur					
Fri			<b>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</b> (please read guidance note 5)		
Sat					
Sun					

**C**

Indoor sporting events Standard days and timings (please read guidance note 6)			<b><u>Please give further details</u></b> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 4)
Wed			
Thur			<b><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></b> (please read guidance note 5)
Fri			
Sat			
Sun			

**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 4)		
Wed					
Thur					
			<b><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></b> (please read guidance note 5)		
Fri					
Sat					
Sun					

**E**

Live music Standard days and timings (please read guidance note 6)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	21.00	04.00		Both	<input type="checkbox"/>
				<u>Please give further details here</u> (please read guidance note 3) Amplified or unamplified music	
Tue	21.00	04.00	<u>State any seasonal variations for the performance of live music</u> (please read guidance note 4)		
Wed	21.00	04.00	<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 5) Until 05.00 following Christmas Eve and New Years Eve		
Thur	21.00	04.00			
Fri	21.00	05.00			
Sat	21.00	05.00			
Sun	21.00	04.00			

## F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music take place <u>indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 3) Amplified or unamplified music Disco DJ		
Mon	21.00	04.00			
Tue	21.00	04.00			
Wed	21.00	04.00			
Thur	21.00	04.00			
Fri	21.00	05.00	<b><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></b> (please read guidance note 5) Until 05.00 following Christmas Eve and New Years Eve		
Sat	21.00	05.00			
Sun	21.00	04.00			

G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for the performance of dance</b> (please read guidance note 4)		
Thur					
Fri			<b>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</b> (please read guidance note 5)		
Sat					
Sun					

H

<p><b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)</p>			<p><b><u>Please give a description of the type of entertainment you will be providing</u></b></p>		
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<p><b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><b><u>Please give further details here</u></b> (please read guidance note 3)</p>		
Wed					
Thur			<p><b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 4)</p>		
Fri					
Sat			<p><b><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></b> (please read guidance note 5)</p>		
Sun					



<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the facilities for making music you will be providing</u></b> AMPLIFIED OR UNAMPLIFIED LIVE BAND DISCO DJ	
			<b><u>Will the facilities for making music be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)	
Mon	21.00	04.00		
Tue	21.00	04.00	<b><u>State any seasonal variations for the provision of facilities for making music</u></b> (please read guidance note 4)	
Wed	21.00	04.00		
Thur	21.00	04.00	<b><u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5) Until 05.00 following Christmas Eve and New Years Eve	
Fri	21.00	05.00		
Sat	21.00	05.00		
Sun	21.00	04.00		

J

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			<b><u>Will the facilities for dancing be indoors or outdoors or both – please tick</u></b> (see guidance note 2)	Indoors <input checked="" type="checkbox"/>
				Outdoors <input type="checkbox"/>
				Both <input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give a description of the facilities for dancing you will be providing</u></b> DANCE FLOOR	
Mon	21.00	04.00	<b><u>Please give further details here</u></b> (please read guidance note 3)	
Tue	21.00	04.00		
Wed	21.00	04.00	<b><u>State any seasonal variations for providing dancing facilities</u></b> (please read guidance note 4)	
Thur	21.00	04.00		
Fri	21.00	05.00	<b><u>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5) Until 05.00 following Christmas Eve and New Years Eve	
Sat	21.00	05.00		
Sun	21.00	04.00		

K

<b>Provision of facilities for entertainment of a similar description to that falling within i or j</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the type of entertainment facility you will be providing</u></b>		
Day	Start	Finish	<b><u>Will the entertainment facility be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed					
Thur			<b><u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u></b> (please read guidance note 4)		
Fri					
Sat			<b><u>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within i or j at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sun					

L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	23.00	04.00	<b><u>Please give further details here</u></b> (please read guidance note 3)	Both	<input type="checkbox"/>
Tue	23.00	04.00			
Wed	23.00	04.00	<b><u>State any seasonal variations for the provision of late night refreshment</u></b> (please read guidance note 4)		
Thur	23.00	04.00			
Fri	23.00	05.00	<b><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></b> (please read guidance note 5) Until 05.00 following Christmas Eve and New Years Eve		
Sat	23.00	05.00			
Sun	23.00	04.00			

M

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption (Please tick box)</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Mon	11.00	04.00			
Tue	11.00	04.00			
Wed	11.00	04.00			
Thur	11.00	04.00			
Fri	11.00	05.00			
Sat	11.00	05.00			
Sun	11.00	04.00	<b>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</b> (please read guidance note 5) Until 05.00 following Christmas Eve and New Years Eve		

**State the name and details of the individual whom you wish to specify on the licence as premises supervisor**

<b>Name</b> TESHEKA DAVIS	
<b>Address</b> 125-127 STROUD GREEN ROAD LONDON	
<b>Postcode</b>	N4 3PX
<b>Personal Licence number (if known)</b> 95700	
<b>Issuing licensing authority (if known)</b> ISLINGTON COUNCIL	

N

**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 8)**

NONE

O

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variations</b> (please read guidance note 4)
Day	Start	Finish	
Mon	11.00	05.00	<p><b><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></b> (please read guidance note 5)</p> <p>Until 06.00 following Christmas Eve and New Years Eve</p>
Tue	11.00	05.00	
Wed	11.00	05.00	
Thur	11.00	05.00	
Fri	11.00	06.00	
Sat	11.00	06.00	
Sun	11.00	05.00	

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

**a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)**

See below

**b) The prevention of crime and disorder**

A digital Closed Circuit Television System will be installed and maintained on the premises. The CCTV system will be recording at all times when the premises are open and the recordings shall be made available to the police and the council on request.

Two door supervisors will be stationed on the premises between 21.00 and the closing of the premises on every day and 4 hours before the scheduled kick off until 1 hour after the end of the match on days when a designated football match is being played at Tottenham Hotspur Football Club.

All alcoholic drinks dispensed from the bar will be poured into plastic containers. No glass bottles will be sold over the bar.

Anti drugs signs will be displayed on the premises.

**c) Public safety**

Fire safety equipment will be checked regularly and any requirements made by the Fire Safety Officer will be complied with.

**d) The prevention of public nuisance**

Staff will call Taxis / Mini cabs for the use of customers leaving the premises when requested to do so.

Signs will be displayed at the exit reminding customers to leave quietly and respect the neighbours

**e) The protection of children from harm**

No children under the age of 18 will be admitted to the premises after 21.00 except at pre-booked private functions and the age will be checked at the door by requesting photographic identification where there is any doubt that they are over the age of 18.

All staff will be trained that alcohol will only be sold to persons who can produce photographic identification where there is any doubt that they are over the age of 18.

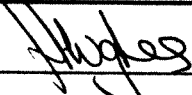
Please tick yes

- 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 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

**IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION**

**Part 4 – Signatures** (please read guidance note 10)

**Signature of applicant or applicant's solicitor or other duly authorised agent** (See guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	13TH APRIL 2006
Capacity	AUTHORISED AGENT

**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 12). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	
Capacity	



<b>Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)</b> J & H LICENSING CONSULTANTS 35 WALFIELD AVENUE WHETSTONE			
<b>Post town</b>	LONDON	<b>Post code</b>	N20 9PS
<b>Telephone number (if any)</b>	0208 446 8643		
<b>If you would prefer us to correspond with you by e-mail your e-mail address (optional)</b>			

### Notes for Guidance

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

**Consent of individual to being specified as premises supervisor**

I TESHEKA DAVIS  
[full name of prospective premises supervisor]

of 125-127 STROUD GREEN ROAD  
LONDON  
N4 3PX

-----  
[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

PREMISES LICENCE  
[type of application]

by

WINSTON DAVIS  
[name of applicant]

relating to a premises licence 1  
[number of existing licence, if any]

for HILL RISE CLUB  
807 HIGH ROAD  
TOTTENHAM  
LONDON  
N17 0DH

-----  
[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by

WINSTON DAVIS

[name of applicant]

concerning the supply of alcohol at

HILL RISE CLUB  
807 HIGH ROAD  
TOTTENHAM  
LONDON  
N17 0DH

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

95700

[insert personal licence number, if any]

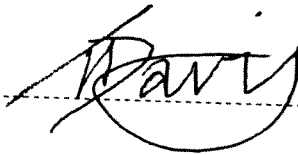
Personal licence issuing authority

ISLINGTON COUNCIL

[insert name and address and telephone number of personal licence issuing authority, if any]

159 UPPER STREET, LONDON N1 1RE 0207 527 3312

Signed



Name (please print)

TESHEKA DAVIS

Date

09/04/06

## **APPENDIX 2**

# **POLICE REPRESENTATION**



Your reference:

Our reference:

Date: 10<sup>th</sup> May 2006

Ms D.BARRETT  
ENVIRONMENTAL CONTROL SERVICES  
639 HIGH ROAD  
TOTTENHAM N.17 8BD

**Metropolitan Police Service**

*Licensing*  
Wood Green Police Station  
347 High Road  
Wood Green  
N.22 4HZ

Tel: 0208 – 345 -2005

Dear Ms. Barrett

**Re:- Application for a Premises Licence:- The Hill Rise Club, 807 High Road N.17**

With regards to the above application, Police have considered the application and would like to make the following representations.

The applicant Mr. Winston Davis came to notice of Police when he was involved in the running of an illegal club called the Hillrise Club in the Seven Sisters Road and then Lawrence Road area of Tottenham. This establishment served alcohol without any form of licence and illegal drugs were a concern. The club was open every weekend and was open to the early hours of the morning. The club closed around 18 months ago.

In 2002 Mr. Davies was also involved in several other illegal clubs in Hackney E.8

Mr. Davies as several previous convictions including in 1996 a 9 month prison sentence for Importing Controlled Drugs and in 1982 a fine for possessing a controlled drug.

I have spoken to the intended Designated Premises Supervisor Ms Tesheka Davis this will be the first time that she will have control of a licensed premise and I feel that she lacks the necessary experience to supervise the sale of alcohol at a night club venue.

If the Local Authority feels fit to grant this application I wish the following conditions to be attached to the licence.

The management of the Hillrise Club inform Police and the Local Authority of the names of the promoters and acts performing at the club with 14 days notice of the events. To complete a risk assessment form. This will enable Police to carry out the necessary security checks.

Haringey Police in conjunction with licensees who run Public Houses in and around Tottenham Hotspur Football Club have for the past 4 seasons run a anti hooligan initiative

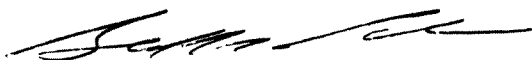
called Tackling Trouble Together. This scheme as resulted in a reduction of reported violent crime.

Police would now wish to formalise the previously voluntary conditions and have the following attached to the premises licence for compliance on football match days.

1. Premises not to open for the sale of alcohol before 11.00 on Saturday and Sunday
2. All drinks dispensed from the bar are poured into plastic containers – 4 hours before the scheduled kick off time until 1 hour after the end of the match.
3. No glass bottles are sold over the bar – 4 hours before the scheduled kick off time until 1 hour after the end of the match.
4. A minimum of two Door Staff who have been approved by the Security Industry Authority to be employed on the premises to control the entry and exit of customers – 4 hours before the scheduled kick off time until 1 hour after the end of the match.

If you require further information please do not hesitate to contact me on the above telephone number.

Yours Sincerely



Geoffrey Parker  
Licensing  
Wood Green Police Station

## **APPENDIX 3**

# **FIRE REPRESENTATION**



**FIRE AND COMMUNITY SAFETY DIRECTORATE**  
**Roy Bishop Deputy Commissioner**

Date  
19 April 2006

Our Ref.  
FS/31/10438/GW

Your Ref.

Addressee  
MS D Barrett  
Licensing Team  
London Borough of Haringey  
2nd Floor, Civic Centre,  
High Road  
Wood Green  
London  
N22 8LE

Please reply to  
Sub Officer Cadman  
Inspecting Officer

Direct Telephone  
020 8803 7530

Direct Fax  
020 8807 7196

Direct E-mail  
enfieldgroup@london-fire.gov.uk

Dear Madam,

### LICENSING ACT 2003

**Premises: Hill Rise Club, 807 High Road, Tottenham, London, N17 0DH**

With reference to the application dated 13 April 2006, as shown on plan, number(s) , the application has been examined and **the Fire Authority want to make a representation** to the Licensing Authority in relation to this application.

The applicant has been informed that the Fire Authority will be making a representation to the Licensing Authority.

The items that are of concern to this authority are detailed on the attached schedule.

The Fire Authority has not received all of the information required/has not received the information in sufficient time and has not therefore, been able to form a judgement as to whether the public safety objective of the Licensing Act has been adequately addressed.

Please advise me, at your earliest convenience, of the date and time of the Licensing Committee Hearing.

Should these matters be resolved to the satisfaction of this Authority at least 2 days prior to the Licensing Committee Hearing the representation will be withdrawn.

Any queries regarding this letter should be addressed to the person named at the top of the letter. If you are dissatisfied in any way with the response given, please ask to speak to the Team Leader quoting our reference.

Yours faithfully,

for Assistant Commissioner

Data Protection Act 1998: The information you have given on this form will be processed by London Fire Emergency Planning Authority for the purpose of **fire and emergency planning and control**. We will keep your details secure and will not disclose them to other organisations or third parties (except contractors or suppliers working on our behalf) without your permission unless we are legally required to do so.

For more information about how we use your personal information, see our notification entry (Z7122455) [www.informationcommissioner.gov.uk](http://www.informationcommissioner.gov.uk) or visit: [www.london-fire.gov.uk](http://www.london-fire.gov.uk)



FIRE AND COMMUNITY SAFETY DIRECTORATE

Roy Bishop Deputy Commissioner

Our Ref.  
FS/31/10438/GW

Your Ref.

Sheet 1 of 1

SCHEDULE

Workplace: - Hill Rise Club, 807 High Road, Tottenham, London, N17  
ODH

Schedule referred to in the letter reference 31/10438/GW under the Licensing Act 2003, issued by the London Fire and Emergency Planning Authority on 19 April 2005.

Where appropriate, a plan may form part of this Schedule to illustrate the steps which, in the opinion of the fire authority, need to be taken in order to promote the public safety objective.

**NOTE** : Notwithstanding any consultation undertaken by the fire authority, **before** you make any alterations to the workplace, **you** must apply for local authority building control department approval (and/or the approval of any other bodies having a statutory interest in the premises) if their permission is required for those alterations to be made.

Licensing Objective not adequately addressed	Location and detail of matters which are considered to put people at risk in the event of a fire emergency	Steps considered necessary to promote the public safety licensing objective
Public Safety	Throughout premises	See attached plan
Public Safety	Throughout Premises	1/Written fire risk assessment required 2/Written evacuation plan required.

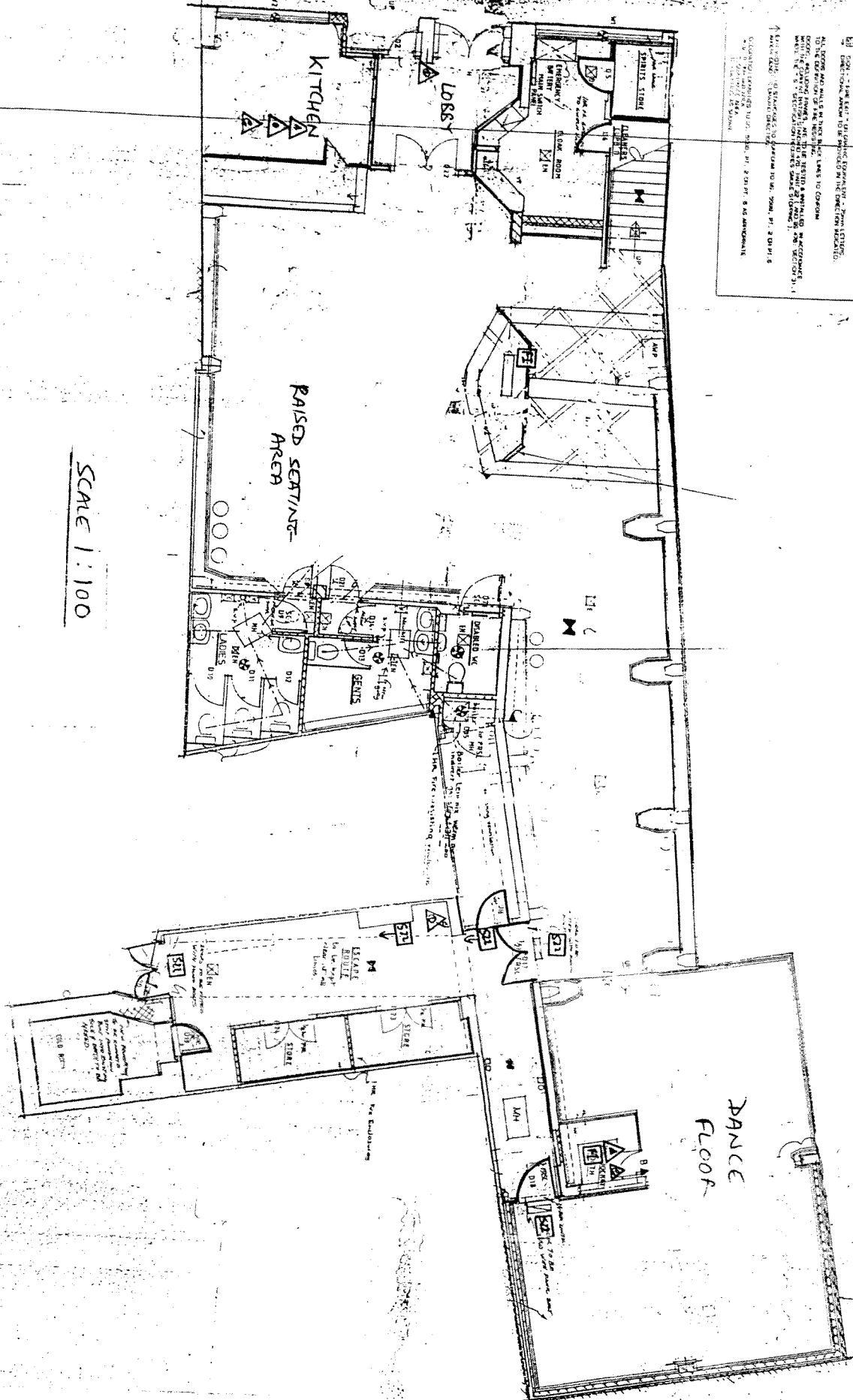
Data Protection Act 1998: The information you have given on this form will be processed by London Fire Emergency Planning Authority for the purpose of **fire and emergency planning and control**. We will keep your details secure and will not disclose them to other organisations or third parties (except contractors or suppliers working on our behalf) without your permission unless we are legally required to do so.

For more information about how we use your personal information, see our notification entry (Z7122455) [www.informationcommissioner.gov.uk](http://www.informationcommissioner.gov.uk) or visit: [www.london-fire.gov.uk](http://www.london-fire.gov.uk)

## **APPENDIX 4**

# **RESIDENTS REPRESENTATION**

HILL RISE CLUB  
807 HIGH ROAD  
TOTTENHAM, N17 0DN



SCALE 1:100

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**G.I.M. SERVICES LTD**

12 Oaklands Crescent, Old Moulsham  
Chelmsford, ESSEX CM2 9PR

Tel : 01245 281610

Fax: 01245 281610

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Licensing Team  
Civic Centre  
High Road  
Wood Green  
LONDON  
N22 8LE

8<sup>th</sup> May 2006

Dear Sir

RE: Licence Application HILL RISE CLUB, 807 HIGH ROAD TOTTENHAM N.17

Further to the above application. We are the owners of the Bricklayers Public House, 803-805 High Road, Tottenham N17 8ER and would like to register our objection to the licence. The late night music has caused us immense problems in the past, and two years ago the Council would not allow it. The noise can be heard clearly from the manager's accommodation and has in the past kept him up all night.

Please keep me informed of any development concerning this application.

Yours faithfully



JOHN WALKIN  
OPERATIONS DIRECTOR

**Licensing Act 2003 Sub-Committee on 25<sup>th</sup> July 2006**

Report title: Application for a Premises Licence For SIRWAN FOOD CENTRE, 5-11 GREEN LANES, PALMERS GREEN, LONDON, N13 4TT

Report of: The Lead Officer Licensing

Ward(s) affected Wood Green

1. Purpose

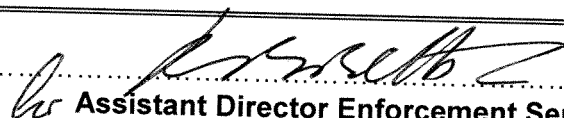
To consider an application by TAYLAN CAVUS to provide a licensable activity in the Supply of alcohol

2. Recommendations

- 2.1 (a) Grant the application as asked  
 (b) Modify the conditions of the licence, by altering or omitting or adding to them  
 (c) Reject the whole or part of the application

The Committee is asked to note that it may not modify the conditions or reject the whole or part of the application unless it is necessary to promote the licensing objectives.

Report authorised by: Robin Payne.....

  
 Assistant Director Enforcement Services

Contact Officer: Ms Daliah Barrett

Telephone: 020 8489 5103

3. Executive summary

For consideration by Sub Committee under Licensing Act 2003 for a New Premises licence

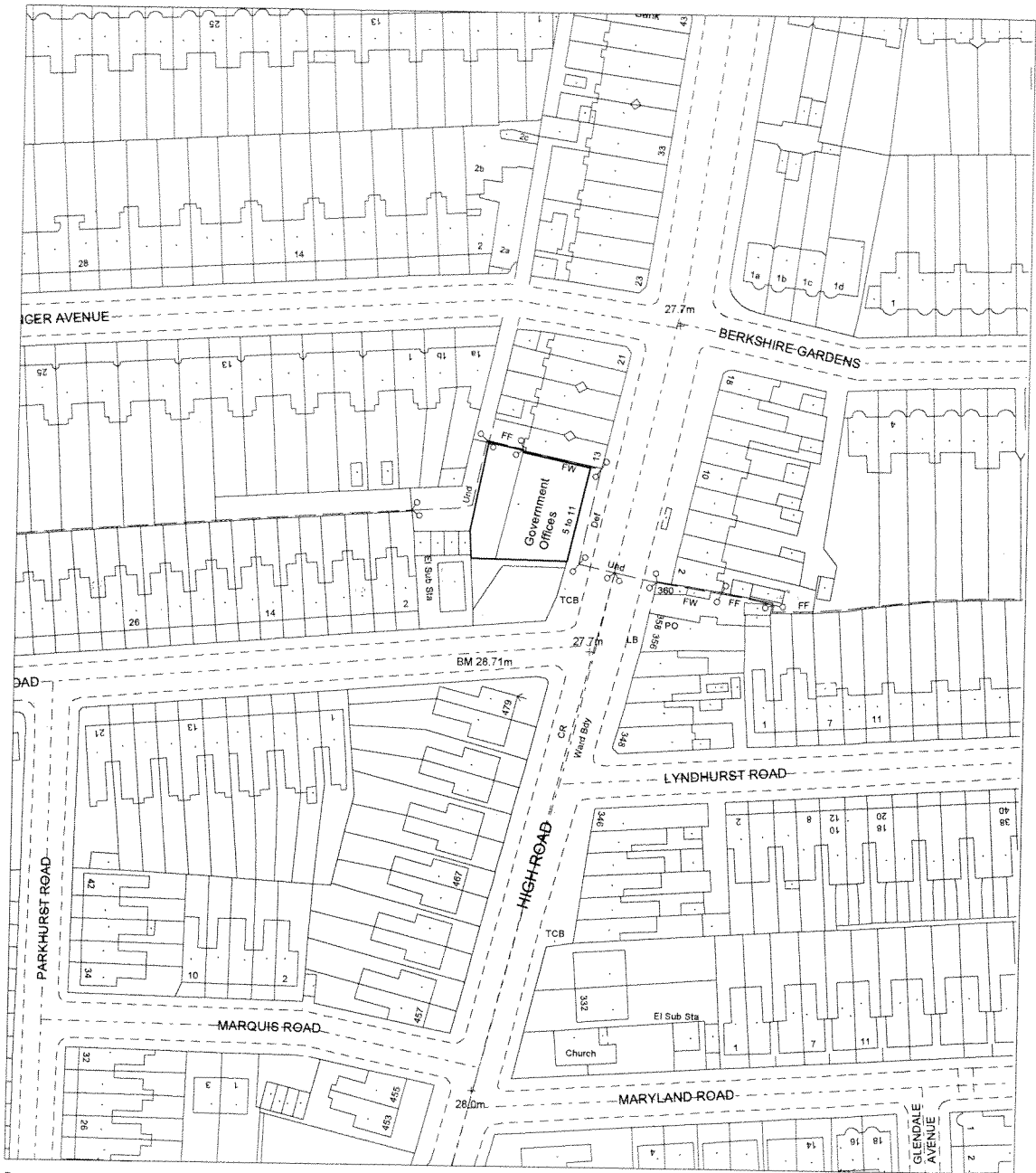
4. Access to information:

Local Government (Access to Information) Act 1985  
 Background Papers

The following Background Papers are used in the preparation of this Report:

File: SIRWAN FOOD CENTRE, 5-11 GREEN LANES, N13 4TT

The Background Papers are located at Enforcement Service, Civic Centre, High Road Wood Green N22



Reproduced from the Ordnance Survey mapping with the permission of the Controller of Her Majesty's Stationery Office. © Crown copyright. Unauthorised reproduction infringes crown copyright and may lead to prosecution or civil proceedings. LB Haringey LA086401 2004

Site plan

**Sirwan Food Centre, 5-11 Green Lanes N13**

**HARINGEY COUNCIL**

**Directorate of  
Environmental  
Services**

Robin Payne  
Assistant Director  
Enforcement Service  
639 High Road  
London N17 8BD  
Tel 020 8489 0000  
Fax 020 8489 5525

	Drawn by	DW
	Scale	1:1250
	Date	17/07/2006

**5. REPORT****Background**

**5.1** Application by **SIRWAN FOOD CENTRE**, for a New Premises Licence in respect of **5-11 GREEN LANES, N13** under the Licensing Act 2003.

**5.2 Details of new Premises Licence application****Opening Hours for Public**

Sunday to Saturday 24 hours

**Supply of alcohol**

Sunday to Saturday 24.00 hours

**OPERATING SCHEDULE****General**

On the premises we make sure that all the floors are clean and not slippery for the safety of our customers and staff. We will record of HACCP and also our staff will get training about the principles of HACCP

**5.2 Crime and Disorder**

A CCTV system will be installed operated and maintained at the premises. This system will monitor the front door, till, all alcohol display areas and the pavement outside the premises.

The CCTV will monitor activity 24 hours 7 days a week.

**5.3 Public Safety**

We will carry out a Risk Assessment at our premise. All staff will be trained according to Risk Assessment. We will have fire extinguishers on the premises at necessary points.

**5.4 Public Nuisance**

In case of a trouble on the premises there is a panic button situated under the till and connected to a central monitoring station that can call the police straight away.

**5.5 Child Protection**

We are going to operate the current Local authority or similar 'Proof of Age' scheme and display the relevant signs and literature. The staff who directly serve tobacco and alcohol will be trained about basic licensing laws.

**6.0 RELEVANT REPRESENTATIONS (CONSULTATION)**

**Responsible authorities:**

**6.1 Comments of Metropolitan Police**

The Police have no objections to this application.

**6.2 Comments of Enforcement Services:**

Noise team have not commented on this application.

**Food Team**

Have no objections to this application

**Health and Safety**

Have no comments on this application.

**Trading Standards**

Have no objections to this application

**6.3 Fire Officer**

The Fire Officer has made a representation against this application. **App 2**

**6.4 Planning Officer**

Planning has no objection to this application.

---

**6.5. Comments of Child Protection Agency or Nominee**

No comments to make on this application.

**7.0 Interested Parties**

No letters of representation have been received against this application.

**8.0 Financial Comments**

The fee which would be applicable for this application was **£190.00**





APP 1.

APPLICATION FORM.

---

# Application for a premises licence to be granted under the Licensing Act 2003

(1)

Reference number:

## 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

(2) I/We

FOO110015812  
ctq f 315,00

apply for a premises licence under section 17 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 5-11 GREEN LANES PALMERS GREEN SILWAN FOOD CENTRE	
Post town LONDON	Postcode N13 4TT

Telephone number at premises(if any)

0208 803 6688

Non-domestic rateable value of premises

£ 46,500

### Part 2 - Applicant details

Please state whether you are applying for a premises licence as

- |   |   |
|---|---|
| a) an individual or individuals*                | <input checked="" type="checkbox"/> please complete section (A) |
| b) a person other than an individual*           | <input type="checkbox"/> please complete section (B)            |
| i. as a limited company                         | <input type="checkbox"/> please complete section (B)            |
| ii. as a partnership                            | <input type="checkbox"/> please complete section (B)            |
| iii. as an unincorporated association; or       | <input type="checkbox"/> please complete section (B)            |
| iv. other (for example a statutory corporation) | <input type="checkbox"/> please complete section (B)            |

(1) Insert name and address of relevant licensing authority and its reference number (optional)  
(2) Insert name(s) of applicant

- 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  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:

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or Please tick  yes
- 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  Mrs  Miss  Ms  Other title   
 (for example, Rev)

Surname  First names

I am 18 years old or over  Please tick  yes  
 Date of birth 

Day	Month	Year
1	7	07 1979

Current postal address if different from premises address  
 11 MAPLE AVENUE  
 CHINGFORD

Post town  Postcode

Daytime contact telephone number

E-mail address (optional)

**SECOND INDIVIDUAL APPLICANT** (if applicable)

Mr  Mrs  Miss  Ms  Other title   
 (for example, Rev)

Surname  First names

I am 18 years old or over  Please tick  yes  Date of birth 

Day	Month	Year

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)

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

**Provision of regulated entertainment**

- Please tick  yes
- 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 entertainment facilities for:**

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j)  
(if ticking yes, fill in box K)

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

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

**In all cases complete boxes N, O and P**

## Part 3 - Operating Schedule

When do you want the premises licences to start?

Day	Month	Year
26	06	2006

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

Day	Month	Year

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

THE PREMISES IS GOING TO TRADE UNDER THE NAME OF SIRWAN FOOD CENTRE AS A SUPERMARKET AND GROCERY SHOP. THE SIZE OF THE PREMISES 306M<sup>2</sup> HAS A RECTANGULAR SHAPE. THE SHOP SITUATED ON A MAIN ROAD ALOS, GREEN LANES, AT THE BORDER'S OF ENFIELD COUNCIL AND HARINGEY COUNCIL. THERE ARE OTHER SHOPS NEXT, OPPOSITE TO OUR SHOP THE NEAREST SCHOOL IS NEARLY 600 YARDS AWAY FROM OUR SHOP SITUATED ON TOTENHALL ROAD XI/3.

IN THE SHOP WE WILL HAVE TWO CASH POINT AND THE DISPLAY FOR ALCOHOL & CIGARETTES ARE GOING TO BE BEHIND THE CASH POINTS. THERE ARE SMOKE DETECTORS, FIRE EXTINGUISHERS AND FIRE EXIT SIGNS ON THE PREMISES THAT IS SHOWN ON THE PLAN ATTACHED TO THE APPLICATION FORM.

THE SALE OF ALCOHOL FROM OUR PREMISES IS TO BE CONSUMED OFF THE PREMISES.

THE UPPER LEVELS ABOVE THE SHOP IS BEING OCCUPIED AS OFFICES.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend

N/A

**A**

<b>Plays</b> Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)  Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	
Mon			Please give further details here (please read guidance note 3)
Tue			State any seasonal variations for performing plays (please read guidance note 4)
Wed			Non-standard timings. Where you intend to use the premises for the performance of plays at different times from those listed in the column on the left, please list (please read guidance note 5)
Thur			
Fri			
Sat			
Sun			

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			Will the exhibition of films take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)  Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	
Mon			Please give further details here (please read guidance note 3)
Tue			State any seasonal variations for the exhibition of films (please read guidance note 4)
Wed			Non-standard timings. Where you intend to use the premises for the exhibition of films at different times from those listed in the column on the left, please list (please read guidance note 5)
Thur			
Fri			
Sat			
Sun			



**C**

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			Please give further details here (please read guidance note 3)
Day	Start	Finish	
Mon			State any seasonal variations for indoor sporting events (please read guidance note 4)
Tue			
Wed			
Thur			Non-standard timings. Where you intend to use the premises for indoor sporting events at different times from those listed in the column on the left, please list (please read guidance note 5)
Fri			
Sat			
Sun			

**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Day	Start	Finish	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)
Tue			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)
Wed			
Thur			
Fri			Non-standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times from those listed in the column on the left, please list (please read guidance note 5)
Sat			
Sun			

**E**

<b>Live music</b>			Will the performance of live music take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)  Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Standard days and timings (please read guidance note 6)			
<b>Day</b>	<b>Start</b>	<b>Finish</b>	Please give further details here (please read guidance note 3)
Mon			
Tue			
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)
Thur			
Fri			Non-standard timings. Where you intend to use the premises for the performance of live music at different times from those listed in the column on the left, please list (please read guidance note 5)
Sat			
Sun			

**F**

<b>Recorded music</b>			Will the playing of recorded music take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)  Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Standard days and timings (please read guidance note 6)			
<b>Day</b>	<b>Start</b>	<b>Finish</b>	Please give further details here (please read guidance note 3)
Mon			
Tue			
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 4)
Thur			
Fri			Non-standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times from those listed in the column on the left, please list (please read guidance note 5)
Sat			
Sun			

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
<b>Day</b>	<b>Start</b>	<b>Finish</b>	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)
Tue			
Wed			State any seasonal variations for the performance of dance (please read guidance note 4)
Thur			
Fri			Non-standard timings. Where you intend to use the premises for the performance of dance entertainment at different times from those listed in the column on the left, please list (please read guidance note 5)
Sat			
Sun			

**H**

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing
<b>Day</b>	<b>Start</b>	<b>Finish</b>	Will this entertainment take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Mon			Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
			Please give further details here (please read guidance note 3)
Tue			
Wed			
			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)
Thur			
Fri			
			Non-standard timings. Where you intend to use the premises for the entertainment of similar description to that falling within (e), (f) or (g) at different times from those listed in the column on the left, please list (please read guidance note 5)
Sat			
Sun			

<b>Provision of facilities for making music</b>			Please give a description of the facilities for making music you will be providing
Standard days and timings (please read guidance note 6)			
<b>Day</b>	<b>Start</b>	<b>Finish</b>	Will the facilities for making music be indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)
Tue			State any seasonal variations for the provision of facilities for making music (please read guidance note 4)
Wed			Non-standard timings. Where you intend to use the premises for provision of facilities for making music at different times from those listed in the column on the left, please list (please read guidance note 5)
Thur			
Fri			
Sat			
Sun			

**J**

<b>Provision of facilities for dancing</b>			Please give a description of the facilities for dancing you will be providing
Standard days and timings (please read guidance note 6)			
<b>Day</b>	<b>Start</b>	<b>Finish</b>	Will the facilities for dancing be indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)
Tue			State any seasonal variations for providing dancing facilities (please read guidance note 4)
Wed			Non-standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times from those listed in the column of the left, please list (please read guidance note 5)
Thur			
Fri			
Sat			
Sun			

**K**

<b>Provision of facilities for entertainment of a similar description to that falling within I or J</b>  Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment facility you will be providing																																											
			Will the entertainment facility be indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>																																											
<table border="1"> <thead> <tr> <th>Day</th> <th>Start</th> <th>Finish</th> </tr> </thead> <tbody> <tr> <td>Mon</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>Tue</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>Wed</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>Thur</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>Fri</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>Sat</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>Sun</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Day	Start	Finish	Mon						Tue						Wed						Thur						Fri						Sat						Sun						Please give further details here (please read guidance note 3)
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			Non-standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times from those listed in the column on the left, please list (please read guidance note 5)																																											

**L**

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Day	Start	Finish	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)
Tue			
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)
Thur			
Fri			Non-standard timings. Where you intend to use the premises for the provision of late night refreshment at different times from those listed in the column on the left, please list (please read guidance note 5)
Sat			
Sun			

**M**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption - please tick box <input checked="" type="checkbox"/> (please read guidance note 7)
Day	Start	Finish	On the premises <input type="checkbox"/> Off the premises <input checked="" type="checkbox"/> Both <input type="checkbox"/>
Mon	00.00	23.59	State any seasonal variations for the supply of alcohol (please read guidance note 4)
Tue	00.00	23.59	
Wed	00.00	23.59	Non-standard timings. Where you intend to use the premises for the supply of alcohol at different times from those listed in the column on the left, please list (please read guidance note 5)
Thur	00.00	23.59	
Fri	00.00	23.59	
Sat	00.00	23.59	
Sun	00.00	23.59	

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name TAYLAN CANUS  
 Address 11 MARLE AVENUE  
 CHINGFOLD LONDON  
 Postcode E4 3R  
 Personal Licence number (if known) 201X0411MA13  
 Issuing licensing authority (if known) LONDON BOROUGH OF WALTHAM FOREST

**N**

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 8)

N/A

**O**

**Hours premises are open to the public**

Standard days and timings  
 (please read guidance note 6)

Day	Start	Finish
Mon	00.00	23.59
Tue	00.00	23.59
Wed	00.00	23.59
Thur	00.00	23.59
Fri	00.00	23.59
Sat	00.00	23.59
Sun	00.00	01.00
	00.00	23.59

State any seasonal variations (please read guidance note 4)

Non-standard timings. Where you intend to use 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 5)

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

a) General - all four licensing objectives (b, c, d, e) (please read guidance note 9)

ON THE PREMISES WE MAKE SURE THAT ALL THE FLOORS ARE CLEAN BUT SLIPPERY FOR THE SAFETY OF OUR CUSTOMERS AND STAFFS. WE WILL KEEP RECORD OF HACCP AND ALSO OUR STAFF WILL GET A TRAINING ABOUT THE PRINCIPLES OF HACCP.

b) The prevention of crime and disorder

A CCTV SYSTEM WILL BE INSTALLED, OPERATED AND MAINTAINED AT THE PREMISES. THIS SYSTEM WILL MONITOR THE FRONT DOOR, TILL, ALL ALCOHOL DISPLAY AREAS AND THE PAVEMENT OUTSIDE THE PREMISES. THERE IS GOING TO BE A RED CARE ALARM SYSTEM INSTALLED TO THE PREMISES AND WILL BE MONITORED 24/7.

c) Public safety

WE WILL HAVE RISK ASSESSMENT AT OUR PREMISES. ALL STAFF SHOULD BE TRAINED ACCORDING TO RISK ASSESSMENT. WE WILL HAVE FIRE EXTINGUISHERS ON THE PREMISES AT NECESSARY PLACES.

d) The prevention of public nuisance

IN CASE OF A TROUBLE ON THE PREMISES THERE IS A PANIC BUTTON SITUATED UNDER THE TILL AND CONNECTED TO A CENTRAL MONITORING STATION THAT CAN CALL THE POLICE STRAIGHT AWAY.

e) The protection of children from harm

WE ARE GOING TO OPERATE THE CURRENT LOCAL AUTHORITY OR SIMILAR 'PROOF OF AGE' SCHEME AND DISPLAY THE RELEVANT SIGNS & LITERATURE. THE STAFFS WHO DIRECTLY SERVES TABACOR ALCOHOL WILL BE TRAINED ABOUT BASIC LICENSING LAWS.



CHECKLIST:

Please tick ✓

- 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 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

**IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION**

**Part 4 - Signatures** (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent. (Please read guidance note 11)  
If signing on behalf of the applicant please state in what capacity.

Signature



Date 17/05/2006.

Capacity OWNER

For joint applications signature of 2nd applicant, 2nd applicant's solicitor or other authorised agent.  
(Please read guidance note 12)

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 13)

\_\_\_\_\_

Post town

Postcode

Telephone number (if any)

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

**Notes for Guidance**

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick 'on the premises', if you wish people to be able to purchase alcohol to consume away from the premises please tick 'off the premises'. If you wish people to be able to do both please tick 'both'.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

London Borough of Waltham Forest  
Licensing Service  
154 Blackhorse Road  
Walthamstow  
London  
E17 6NW

Lic No: Z01N0411MA/3

## LICENSING ACT 2003 *Personal Licence (Part 2)*

---

This Licence authorises: **Mr Taylan CAVUS**

of: 11 Maple Avenue  
London E4 8RR

to sell or supply alcohol to authorise the sale or supply of alcohol in accordance with the requirements of the Licensing Act 2003.

This licence becomes effective on *17 August 2005* and, unless surrendered, forfeited or revoked, will **expire on 16 August 2015**.

Any application to renew this licence must be made to Waltham Forest Council during the two-month period beginning three months before the date the licence expires.

This licence does not have any effect during any period when it is suspended under the provision of the Licensing Act 2003, s129.

Signed:   
Group Manager Public Protection

The holder of this licence had been convicted of the following relevant offences or foreign offences:

Detail of Conviction	Date of Conviction	Sentence Imposed
<b>none</b>		

*Please see reverse  
for conditions of licence*



APP 2.

FIRE OFFICER

REPRESENTATION.

---

Edmonton Fire Station  
99 Church Street  
Edmonton, London N9 9AA

Switchboard 020 7587 2000  
www.london-fire.gov.uk



LONDON FIRE & EMERGENCY PLANNING AUTHORITY

FIRE AND COMMUNITY SAFETY DIRECTORATE  
Roy Bishop Deputy Commissioner

Date  
23 May 2006

Our Ref.  
FS/31/010804/LH

Your Ref.

Addressee  
Ms D Barrett  
Lead Licensing Officer  
Haringey Council  
2nd Floor, Civic Centre  
High Road  
Wood Green  
London  
N22 8LE

Please reply to  
Tony Cadman  
Inspecting Officer

Direct Telephone  
020 8803 7530

Direct Fax  
020 8807 7196

Direct E-mail  
haringeygroup@london-fire.gov.uk

Dear Madam,

### LICENSING ACT 2003

**Premises: Sirwan Food Centre, 5-11 Green Lanes, London, N13 4TT**

With reference to the application dated 17 May 2006, as shown on plan, number 91.06/02, the application has been examined and **the Fire Authority want to make a representation** to the Licensing Authority in relation to this application.

The applicant has been informed that the Fire Authority will be making a representation to the Licensing Authority.

The items that are of concern to this authority are detailed on the attached schedule.

Please advise me, at your earliest convenience, of the date and time of the Licensing Committee Hearing.

Should these matters be resolved to the satisfaction of this Authority at least 2 days prior to the Licensing Committee Hearing the representation will be withdrawn.

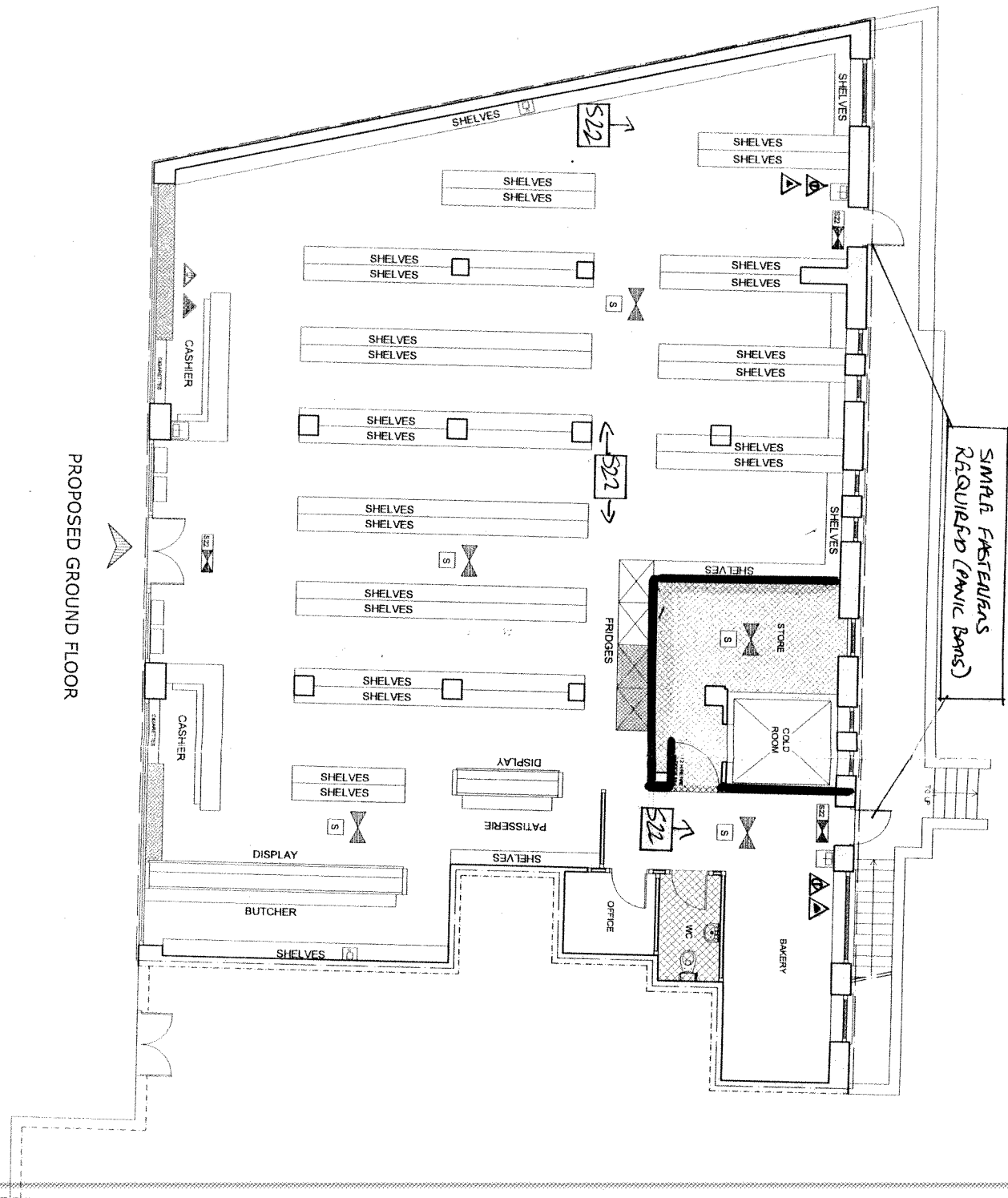
Any queries regarding this letter should be addressed to the person named at the top of the letter. If you are dissatisfied in any way with the response given, please ask to speak to the Team Leader quoting our reference.

Yours faithfully,

for Assistant Commissioner

Data Protection Act 1998: The information you have given on this form will be processed by London Fire Emergency Planning Authority for the purpose of **fire and emergency planning and control**. We will keep your details secure and will not disclose them to other organisations or third parties (except contractors or suppliers working on our behalf) without your permission unless we are legally required to do so.

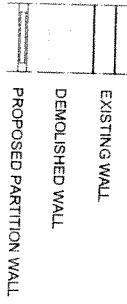
For more information about how we use your personal information, see our notification entry (Z7122455) [www.informationcommissioner.gov.uk](http://www.informationcommissioner.gov.uk) or visit: [www.london-fire.gov.uk](http://www.london-fire.gov.uk)



LEGEND

- LIQUOR SALES
- LIQUOR STORAGE
- WC, PASSAGEWAY, ETC
- AMBIT OF LICENSED PREMISES
- SAFETY LIGHTING TO BS 5266.
- SMOKE DETECTOR TO BS 5839 P1
- CARBON DIOXIDE FIRE EXTINGUISHER
- 9 LT. WATER FIRE EXTINGUISHER
- INTERNALLY ILLUMINATED FIRE ESCAPE SIGN (BS 5266)
- FIRE ALARM CALL POINT TO BS 5839 P1
- CONTROL PANEL SOUNDERS TO BS 5839 P

**30 MINUTES FIRE RESISTANT MATERIAL (INCLUDE DOOR TO B SALE CLOSURE)**



EXISTING AREA: 315.17m<sup>2</sup>

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**SIRWAN SUPERMARKET**  
 5-11 GREEN LANES  
 LONDON N13 4TT

PROPOSED  
 - GROUND FLOOR PLAN

SCALE: 1/100	REF. NO.: 91/06/02
DATE: MAY 06	DRG BY: AAV

**ANVA LTD.**

P.O. BOX 1827  
 ILFORD, IG2 7WJ  
 TEL: 020 8599 5096 FAX: 020 8596 4401  
 MOBILE: 07710942923 / 07931393989