

WK/437164



Haringey
Provisional statement
Licensing Act 2003

For help contact
licensing@haringey.gov.uk
 Telephone: 020 8489 8232

* required information

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You can save the form at any time and resume it later. You do not need to be logged in when you resume.

System reference This is the unique reference for this application generated by the system.

Your reference You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.

Are you an agent acting on behalf of the applicant?

Yes No

Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.

Applicant Details

* First name

* Family name

* E-mail

Main telephone number

Other telephone number

Include country code.

Indicate here if the applicant would prefer not to be contacted by telephone

Is the applicant:

Applying as a business or organisation, including as a sole trader
 Applying as an individual

A sole trader is a business owned by one person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.

Applicant Business

Is the applicant's business registered in the UK with Companies House? Yes No

Is the applicant's business registered outside the UK? Yes No

Note: completing the Applicant Business section is optional in this form.

Business name

VAT number

If the applicant's business is registered, use its registered name.
Put "none" if the applicant is not registered for VAT.

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Legal status

Applicant's position in the business

Home country

The country where the applicant's headquarters are.

Applicant Business Address

If the applicant has one, this should be the applicant's official address - that is an address required of the applicant by law for receiving communications.

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

Agent Details

* First name

* Family name

* E-mail

Main telephone number

Include country code.

Other telephone number

Indicate here if you would prefer not to be contacted by telephone

Are you:

- An agent that is a business or organisation, including a sole trader
- A private individual acting as an agent

A sole trader is a business owned by one person without any special legal structure.

Agent Business

Is your business registered in the UK with Companies House? Yes No

Note: completing the Applicant Business section is optional in this form.

Registration number

Business name

If your business is registered, use its registered name.

VAT number

Put "none" if you are not registered for VAT.

Legal status

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Your position in the business

Home country

The country where the headquarters of your business is located.

Agent Registered Address

Address registered with Companies House.

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

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PREMISES DETAILS

I/we, as named in section 1, apply for a provisional statement under section 29 of the Licensing Act 2003 for the premises described in section 2 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.

Premises Address

Are you able to provide a postal address, OS map reference or description of the premises?

- Address OS map reference Description

Postal address of premises.

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

Further Details

Telephone number

Non-domestic rateable value of premises (£)

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APPLICATION DETAILS

In what capacity are you applying for the premises licence?

- An individual or individuals
- A limited company
- A partnership
- An unincorporated association
- A recognised club
- A charity
- The proprietor of an educational establishment
- A health service body
- A person who is registered under part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales
- A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England
- The chief officer of police of a police force in England and Wales
- Other (for example a statutory corporation)

Confirm The Following:

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

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INDIVIDUAL APPLICANT DETAILS

Applicant Name

Is the name the same as (or similar to) the details given in section one?

- Yes No

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

First name

Family name

Is the applicant 18 years of age or older?

- Yes No

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Applicant Postal Address

Is the address the same as (or similar to) the address given in section one?

- Yes No

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

Building number or name	72-76
Street	High Road
District	
City or town	London
County or administrative area	
Postcode	N15 6JU
Country	United Kingdom

Applicant Contact Details

Are the contact details the same as (or similar to) those given in section one?

- Yes No

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

E-mail	
Telephone number	
Other telephone number	
Add another applicant	

What is your nature of interest in the premises?

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SCHEDULE OF WORK

Is the premises:

- About to be constructed
 Being extended or altered

Give details of the work and attach plans of the work being done or about to be done at the premises

We are expanding our business to the two units we bought. I

Continued from previous page...

Give particulars of the premises to which the application relates. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where you are completing section 16 and 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.

Please see enclosed copy of the plans.

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PROVISION OF PLAYS

Will you be providing plays?

Yes No

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PROVISION OF FILMS

Will you be providing films?

Yes No

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PROVISION OF INDOOR SPORTING EVENTS

Will you be providing indoor sporting events?

Yes No

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PROVISION OF BOXING OR WRESTLING ENTERTAINMENTS

Will you be providing boxing or wrestling entertainments?

Yes No

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PROVISION OF LIVE MUSIC

Will you be providing live music?

Yes No

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PROVISION OF RECORDED MUSIC

Will you be providing recorded music?

Yes No

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PROVISION OF PERFORMANCES OF DANCE

Will you be providing performances of dance?

Yes No

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PROVISION OF ANYTHING SIMILAR TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF DANCE

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Will you be providing anything similar to live music, recorded music or performances of dance?

Yes No

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PROVISION OF LATE NIGHT REFRESHMENT

Will you be providing late night refreshment?

Yes No

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SUPPLY OF ALCOHOL

Will you be supplying alcohol?

Yes No

Standard Days And Timings

MONDAY

Start

End

Start

End

TUESDAY

Start

End

Start

End

WEDNESDAY

Start

End

Start

End

THURSDAY

Start

End

Start

End

FRIDAY

Start

End

Start

End

SATURDAY

Start

End

Start

End

SUNDAY

Start

End

Start

End

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.

Continued from previous page...

Will the sale of alcohol be for consumption:

- On the premises Off the premises Both

If you wish people to be able to consume alcohol on the premises, tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, tick 'off the premises'. If you wish people to be able to do both, tick 'both'

State any seasonal variations for the supply of alcohol

For example (but not exclusively) where the activity will occur on additional days during the summer months.

None

Non-standard timings. Where the premises will be used for the supply of alcohol at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

None

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ADULT ENTERTAINMENT

Please highlight any adult entertainment or services, activities, or other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children

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, gambling machines etc.

N/A

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HOURS PREMISES ARE OPEN TO THE PUBLIC

Standard Days And Timings

MONDAY

Start

End

Start

End

TUESDAY

Start

End

Start

End

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.

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WEDNESDAY

Start	<input type="text" value="00:00"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

THURSDAY

Start	<input type="text" value="00:00"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

FRIDAY

Start	<input type="text" value="00:00"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

SATURDAY

Start	<input type="text" value="00:00"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

SUNDAY

Start	<input type="text" value="00:00"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

State any seasonal variations

For example (but not exclusively) where the activity will occur on additional days during the summer months.

None

Non standard timings. Where you intend to use the premises to be open to the members and guests at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

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LICENSING OBJECTIVES

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

a) General – all four licensing objectives (b,c,d,e)

list below here steps you will take to promote all four licensing objectives together.

Please see below

Continued from previous page...

b) The prevention of crime and disorder

- 1) The dps, a personal licence holder or trained member of staff nominated in writing by the dps shall be on duty at all times the premises are open to the public.
- 2) a) A cctv system covering the interior & exterior of the premises will be installed to current metropolitan police / Home office standards and shall be kept operational at all times the premises are open to the public.
 - b) It shall be capable of taking a head & shoulders shot of persons entering the premises, of recording images to an evidential standard in any light and be capable of storing images for a minimum of 31 days.
 - c) All staff who may work front of house shall be trained to operate the cctv system and download images.
 - d) At least one member of staff trained to operate the cctv system & download images shall be on duty at all times the premises are open to the public. Footage shall be shown to the police and screenshots provided to them on request. Copies of downloaded images shall be provided to the police on a usb stick, cd or other acceptable means as soon as possible and in any case within 24 hours of the request
- 3) challenge 25 shall be operated as the proof of age policy.
- 4) An incident book shall be kept at the premises, and made available to the police or authorised council officers, which will record the following:
 - A) All crimes reported,
 - B) Lost property,
 - C) All ejections of customers,
 - D) Any complaints received,
 - E) Any incidents of disorder,
 - F) Any seizure of drugs or offensive weapons,
 - G) Any faults in the cctv,
 - H) Any refusal in the sale of alcohol.
 - I) Any visit by a relevant authority or emergency service
- 5) Notices will be prominently displayed by the entry/ exit door and point of sale (as appropriate) advising customers:
 - A) That cctv & challenge 25 are in operation;
 - B) Advising customers of the provisions of the licensing act regarding underage & proxy sales;
 - C) Of the permitted hours for licensable activities & the opening times of the premises;
 - D) Not to drink in the street;
 - E) To respect residents, leave quietly, not to loiter outside the premises or in the vicinity and to dispose of litter legally.

c) Public safety

A fire risk assessment and emergency plan will be prepared and regularly reviewed. All staff will receive appropriate fire safety training and refresher training.

d) The prevention of public nuisance

- 1) The front of the premises shall be kept tidy at all times and be swept at close.
- 2) Relevant notices will be prominently displayed by the entry/ exit door and point of sale (as appropriate)
- 3) No deliveries will be received or rubbish removed from the premises between 22.00 & 07.00.
- 4) Any music played will only be played at background level.
- 5) An incident book shall be kept at the premises and made available to the police or authorised council officers –see box b condition 5 for full details of the information to be recorded.
- 6) A phone number for the premises shall be made available if required upon request to the police, any other responsible authority or any local resident to express any concerns caused by the operation of the premises. Any complaints and the outcome will be recorded in the incident book.

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e) The protection of children from harm

- 1) Challenge 25 shall be operated as the proof of age policy and only a valid passport, photo driving licence, hm forces photographic id card or proof of age card with the pass logo or hologram on it may be accepted as proof of age.
- 2) All refusals of the sale of alcohol shall be recorded in the refusals section of the incident book. The incident book shall be kept and produced to police & authorised council officers on request –see section b condition 5 for full details.
- 3) relevant notices will be prominently displayed by the entry/ exit door and point of sale as appropriate– see section B condition 6 for full details.
- 4) All staff who work front of house will be trained for their role on induction and be given refresher training every six months. Written training records will be kept for each staff member and be produced to police & authorised council officers on request. Training will include identifying persons Under 25, making a challenge, acceptable proof of age & checking it, making & recording a refusal, avoiding conflict & responsible alcohol retailing.

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PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

This formality requires a fixed fee of £315

ATTACHMENTS

AUTHORITY POSTAL ADDRESS

Address

Building number or name	<input type="text"/>
Street	<input type="text"/>
District	<input type="text"/>
City or town	<input type="text"/>
County or administrative area	<input type="text"/>
Postcode	<input type="text"/>
Country	<input type="text" value="United Kingdom"/>

DECLARATION

* I/we understand 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.

Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

* Full name	<input type="text"/>
* Capacity	<input type="text"/>
Date (dd/mm/yyyy)	<input type="text"/>

Add another signatory

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Once you're finished you need to do the following:

1. Save this form to your computer by clicking file/save as...
2. Go back to <https://www.gov.uk/apply-for-a-licence/premises-licence/haringey/apply-2> to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.

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.