

## **5. REPORT**

### **Background**

**5.1** An application for a new Premises Licence, by Mr Eva Zack in respect of Place Trocadero, 12 St Loys Road, Tottenham, London N17 under the Licensing Act 2003.

### **5.2 Details of the application being sought under a new Premises Licence APP1**

#### **The Provision of Regulated entertainment:**

##### **Recorded Music**

**Monday to Sunday 1200 to 0500**

#### **The provision of late night refreshment:**

**Monday to Sunday 2300 to 0500**

#### **Supply of alcohol for ON the premises only:**

**Monday to Sunday 1200 to 0500**

##### **Opening Hours**

**Monday to Sunday 1200 to 0500**

#### **General-all four licensing objectives**

The premises will be managed and controlled by a responsible person at all times. Any incidents of a criminal nature will be reported to the police. The premises will be smoke free and the required signs will be displayed at all times. The designated premises supervisor will be on the premises or contactable during the opening hours.

### **5.3 Crime and Disorder**

An announcement will be made prior to closing requesting clients to leave the premises. Customers will not be allowed to stand outside the premises talking. Any incidents of a criminal nature will be reported to the police.

### **5.4 Public Safety**

The manager will check the premises prior to opening hours to ensure that there are no risks to clients and that all safety (etc broken table or chair, wet floor...) precautions are in place. Fire safety equipment will be installed and will be maintained on the premises.

## **5.5 Public Nuisance**

Doors and windows will be kept shut during the opening hours and the sound level of the music will be controlled by the management. Customers will be asked not to stand around talking in the street outside the premises and asked to leave the vicinity quickly and quietly. The premises and entrance will be kept clean and free from any hazards.

## **5.6 Child Protection**

Any young persons under 16 must be accompanied by an adult. Anyone who appears to be under the age of 21 years old will be required to produce photographic evidence to prove that they are 18 years old or over before any sale is made. All alcohol will be located behind the counter area. The restaurant will be smoke free.

## **6. RELEVANT REPRESENTATIONS (CONSULTATION)**

### **Responsible authorities:**

### **6.1 Comments of Metropolitan Police**

The Police have made representation against this application.  
**APP 2**

### **6.2 Comments of Enforcement Services:**

#### **Noise Team**

Have made representation against this application.  
**APP 3**

#### **Food Team**

Have no objections to this application.

#### **Health and Safety**

Have no objections to this application

#### **Trading Standards**

Have no objections to this application

### **6.3 Fire Officer**

Have made comments on this application.  
**APP 4**

### **6.4 Planning Officer**

Have no objections to this application

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

No representation made on this matter

**7.0 Interested Parties – App 5**

44 letters of representation have been received against this application and a petition.

**8.0 Financial Comments**

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

APP 1

APPLICATION FORM

*Report*

*AP 9114795*

### 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 *EVA ZACK*

*Spoke to Mr Zack - re. news paper ad, he coming with it today, 08/06/09.*

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  
*PLACE TROCADERO  
12 ST LOYS ROAD  
TOTTENHAM*

Post town *HARINGEY* Postcode *N11 2PU*

Telephone number at premises(if any)

Non-domestic rateable value of premises  
£ *652.65*

#### 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)

(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
0	5	03
1	9	73

Current postal address if different from premises address

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)

Part 3 - Operating Schedule

When do you want the premises licences to start?

Day	Month	Year
ASAP		

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)

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 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**

# A

Plays			Will the performance of a play take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Day	Start	Finish	
Standard days and timings (please read guidance note 6)			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 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

Films			Will the exhibition of films take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Day	Start	Finish	
Standard days and timings (please read guidance note 6)			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 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**

Indoor sporting events			Please give further details here (please read guidance note 3)
Day	Start	Finish	
Mon			<p>State any seasonal variations for indoor sporting events (please read guidance note 4)</p> <p>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)</p> <p style="text-align: center; font-size: 2em;">N/A</p>
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

**D**

Boxing or wrestling entertainments			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	
Mon			Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Tue			<p>Please give further details here (please read guidance note 3)</p> <p>State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)</p> <p>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)</p> <p style="text-align: center; font-size: 2em;">N/A</p>
Wed			
Thur			
Fri			
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			State any seasonal variations for the performance of live music (please read guidance note 4)
Wed			
Thur			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)
Fri			
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 checked="" 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	12PM	5AM	
Tue	12PM	5AM	State any seasonal variations for the playing of recorded music (please read guidance note 4)
Wed	12PM	5AM	
Thur	12PM	5AM	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)
Fri	12PM	5AM	
Sat	12PM	5AM	
Sun	12PM	5AM	

# 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)
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 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
Day	Start	Finish	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)			Will the facilities for making music be 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			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)			Will the facilities for dancing be 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			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>			Please give a description of the type of entertainment facility you will be providing
Standard days and timings (please read guidance note 6)			Will the entertainment facility be 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 the provision of facilities for entertainment of a similar description to that falling within I or J (please read guidance note 4)
Wed			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)
Thur			
Fri			
Sat			
Sun			

M A

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 checked="" type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Mon	11 PM	5 AM	Please give further details here (please read guidance note 3)
Tue	11 PM	5 AM	
Wed	11 PM	5 AM	State any seasonal variations for the provision of late night refreshment (please read guidance note 4)
Thur	11 PM	5 AM	
Fri	11 PM	5 AM	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	11 PM	5 AM	
Sun	11 PM	5 AM	

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 checked="" type="checkbox"/> Off the premises <input type="checkbox"/> Both <input type="checkbox"/>
Mon	12 PM	5 AM	State any seasonal variations for the supply of alcohol (please read guidance note 4)
Tue	12 PM	5 AM	
Wed	12 PM	5 AM	
Thur	12 PM	5 AM	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)
Fri	12 PM	5 AM	
Sat	12 PM	5 AM	
Sun	12 PM	5 AM	



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

Name **EVA ZACK**

Address **45 PALACE ROAD**

Postcode **N11 2PU**

Personal Licence number (if known) **LN/000007034**

Issuing licensing authority (if known) **LONDON BOROUGH OF HARINGEY**

**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	12 PM	5 AM
Tue	12 PM	5 AM
Wed	12 PM	5 AM
Thur	12 PM	5 AM
Fri	12 PM	5 AM
Sat	12 PM	5 AM
Sun	12 PM	5 AM

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)

The premises will be managed and controlled by a responsible person at all time. ~~Staff~~ Any incidents of a criminal nature will be reported to the police. The premises is smoke free and the required signs will displayed at all time. The Designated premises Supervisor will be on the premises or contactable during the operating hours.

b) The prevention of crime and disorder

An announcement will be made prior to closing requesting clients in leaving the premises. Customers will not allow to stand outside the premises talking. Any incidents of a criminal nature will be reported to the Police.

c) Public safety

The manager will check the premises prior to opening to ensure there are no risks to clients and that all safety (etc broken table or chair, wet floor...) precautions are in place. Fire safety equipments are installed and will be maintained on the premises.

d) The prevention of public nuisance

Doors and windows will be kept shut during the opening hour. and the sound level of the music will be control by the management. Customers will be asked not to stand around talking in the street outside the premises and asked to leave the vicinity quickly and quietly. The premises and entrance will be kept clean and free from any hazards.

e) The protection of children from harm

A young persone under 16 must be accompanied with an adult. Anyone who appears to be the age of 21 years will be required to produce a photographic evidence to prove they are 18 years or over before any sale is made. All Alcohol will be located behind the counter area. This restaurant is smoking free

CHECKLIST:

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. (Please read guidance note 11)  
If signing on behalf of the applicant please state in what capacity.

Signature



Date 14.04.2009

Capacity

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.
14. The information you have provided will be held by the Council on computerised and manual files. The data may also be disclosed to other departments within the Council or other organisations, but only in order to ensure compliance with relevant legislation or to detect and prevent fraud or a crime.

## Consent of individual to being specified as premises supervisor

Reference number:

I [full name of prospective premises supervisor]

EVA ZACK

of [home address of prospective premises supervisor]

45 PALACE ROAD  
LONDON  
N11 2PU

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

[type of application]

PREMISES LICENCES

by

[name of applicant]

EVA ZACK

relating to a premises licence

[number of existing licence, if any]

for

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

PLACE TROCADERO  
12 ST LOY'S ROAD  
LONDON  
N17 6UA

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

[name of applicant]

EVA ZACK

CONTINUED

concerning the supply of alcohol at

[name and address of premises to which application relates]

PLACE TROCADERO  
12 ST LOYS ROAD  
LONDON  
N17 6UA

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

[insert personal licence number, if any]

Personal licence issuing authority

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

Signed



Name (please print) EVA ZACK

Date

APP 2

POLICE REPRESENTATION



Your reference:

Our reference: 30/2009

Date: 7 May, 2009

**Metropolitan Police Service**

Ms D.BARRETT  
ENVIRONMENTAL CONTROL SERVICES  
TECHNO PARK  
ASHLEY ROAD  
TOTTENHAM N.17

*Licensing*  
Quicksilver Patrol Base  
Western Road  
Wood Green  
N.22 6UH

Tel: 0203 – 276 -0150

Dear Ms. Barrett

**Re:- Application for a Premises Licence:-**

**Trocadero 12 St Loys Road N.17**

With reference to the above application Police have considered the application and wish to make the following representations under the Prevention of Crime & Disorder, Public Safety and Prevention of Public Nuisance objectives.

In addition to our letter dated the 16<sup>th</sup> April 2009 I submit a statement and photographs which support the representations from Police Constable Darren Green who is attached to the Bruce Grove Safer Neighbourhood Team.

Yours Sincerely

Geoffrey Parker  
Licensing  
Quicksilver Patrol Base



WITNESS STATEMENT

CJ Act 1967, s.9; MC Act 1980, ss.5A(3)(a) and 5B; Criminal Procedure Rules 2005, Rule 27.1

Statement of Darren Green Pc 276yr ..... URN: [ ] [ ] [ ] [ ]

Age if under 18 Over 18 ..... (if over 18 insert 'over 18') Occupation: Police officer 218738 .....

This statement (consisting of: ... 2..... pages each signed by me) is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence, I shall be liable to prosecution if I have wilfully stated anything in it which I know to be false, or do not believe to be true.

Signature: [Signature] Pc 276yr ..... Date: 5/5/09 .....

Tick if witness evidence is visually recorded [ ] (supply witness details on rear)

This statement is regarding the proposed alcohol licence submitted by TROCAEDERO restaurant at 12 St LOYS Road N17 6JA.

Officers from Bruce grove safer neighbourhood team have recently seen that the TROCAEDRO restaurant on St Loys Road N17 has currently applied for a licence to sell Alcohol and have an entertainments licence between the hours 2300 hrs and 0500 hrs. Bgsnt would like to object the application for the following reasons.

The area of St Loys Road and Moorefield road has been having ongoing issues for numerous years with males congregating in the street, illegal trading, urinating in the street, talking out aloud and drinking in the street until the early hours of the morning. In the last eighteen months officers from Bgsnt and local council enforcement officers have target this area to try and combat the problems. This has resulted in eight multi agency operations on the local business, one of these businesses was TROCAEDERO restaurant. On the 7th May 2008 the proprietor of the business Mr Eve ZACK had formal action taken against him by Haringey Council enforcement team regarding offences contrary to Sections 136, 137 and 138 of the Licensing Act 2003 which relate to selling alcohol within his business without a valid premises licence. (A picture of some of the alcohol seized is attached to this statement). I have also been informed by the enforcement team that on the 12th May 2008 at 00:15 hrs the business was visited by Haringey Noise abatement team in relation to a noise disturbance. Upon investigation officers discovered groups of males drinking alcohol with in the premises. The business was warned regarding its future conduct. Shortly after this visit the restaurant closed.

Although this address is situated near Tottenham High road it also surrounded by a residential area, with houses either side and across the road from the premises. Local residents have continued to complain to the police about

Signature: [Signature] Pc 276yr ..... Signature witnessed by: .....

Continuation of Statement of **Darren Green Pc 276yr**.....

the large groups of males that congregate in the street until the early hours of the morning drinking alcohol this has prompted officers to apply for and receive a no street drinking zone for the area this was implemented during the summer of 2008 and has had some impact , But there is a still a large amount of males that drink in the street in and deposit there empty containers on the floor when police officers are not present . (Please see attached pictures of Moorefield Road and the rail bank at the side of TROCAEDERO restaurant.) Officers from BGSNT have recently applied for and got a dispersal order for the area this is due to start on the 6<sup>th</sup> May 2009 for six months. This is the second dispersal order for this area in the last Six Year.

Officers fear that if the above licence is approved it will make the dispersal order and the no drinking zone difficult to police, as the restaurant itself is very small and the occupants at the property will spill out onto the street with there drinks. Officers also believe that this restaurant will be used mores as a social club as it did when previously open and that further offences may be committed in the area with the occupants leaving the premises in the early hours of the morning . *D/G PC 276yr*

Signature: *D/G PC 276yr*..... Signature witnessed by: .....







APP 3

NOISE TEAM REPRESENTATION

## Licensing Consultation - Internal Memo

To: Daliah Barrett-Williams

From: George Roberts (Noise)

Cc: Derek Pearce

Our Reference: WK119600

Date: 12/5/09

Premises: Place Trocedero, 12 St Loys Road, Tottenham, London, N17 6UA.

Type of application: New

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I would like to confirm that I have considered the above proposal with regard to the prevention of public nuisance on behalf of the Enforcement Response (Noise) Team & would like to:

Make representations to the Application.

On the following grounds:

That the proposed operating hours are inappropriate due to the close proximity of residential dwellings. Noise from music played at the premises is likely to affect local residents if played into the early hours of the morning without suitable conditions.

The operating schedule does not address the prevention of public nuisance from:

- Noise generated by patrons in external areas of the premises
- Noise from patrons exiting the premises
- Noise generated from deliveries
- Noise generated from refuse collections
- Noise from plant and machinery
- Cooking odour

### Supporting Information

WK78699 – proactive visits carried out on 12<sup>th</sup> and 13<sup>th</sup> July 2008 regarding sale of alcohol without a licence – licensing warning letter issued.

### Informative

I would recommend the following alterations/conditions to the operating schedule:

APP 4

FIRE OFFICER REPRESENTATION