

**Application to vary a premises licence 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 Parkstock Limited

*(Insert name(s) of applicant)*

**being the premises licence holder, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below**

<b>Premises licence number</b> LN000003206
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**Part 1 – Premises Details**

<b>Postal address of premises or, if none, ordnance survey map reference or description</b> Rowans 10 Stroud Green Road Finsbury Park			
<b>Post town</b>	London	<b>Post code</b>	N4 2DF

Telephone number at premises (if any)	██████████
Non-domestic rateable value of premises	£189,000

**Part 2 - Applicant Details**

<b>Daytime contact telephone number</b>			
<b>E-mail address (optional)</b>			
<b>Current postal address if different from premises address</b>	255 Green Lanes Palmers Green		
<b>Post Town</b>	London	<b>Postcode</b>	N13 4XE

**Part 3 - Variation**

Please tick yes

Do you want the proposed variation to have effect as soon as possible?

If not do you want the variation to take effect from

Day	Month	Year

**Please describe briefly the nature of the proposed variation** (please see guidance note 1)

This application is for approval of updated premises licence plans to include the garden/smoking area on the ground floor and the first floor Park Suite within the licensed areas currently licensed for the provision of sale of alcohol, regulated entertainment and late-night refreshments. There are otherwise no changes to the permitted activities and hours covered by this licence.

If your proposed variation would mean that 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend

**Part 3 Operating Schedule**

**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 late night refreshment** (if ticking yes, fill in box I)

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

**In all cases complete boxes K, L and M**

**A**

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of a play 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			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Wed					
Thur			<b>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</b> (please read guidance note 5)		
Fri					
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 checked="" 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	09:00	04:00			
			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
Tue	09:00	04:00			
			<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)		
Wed	09:00	04:00			
Thur	09:00	04:00			
Fri	09:00	04:00			
Sat	09:00	04:00			
Sun	09:00	04:00			

**C**

<b>Indoor sporting events</b> 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	09:00	04:00	
Tue	09:00	04:00	<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 4)
Wed	09:00	04:00	
Thur	09:00	04:00	<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	09:00	04:00	
Sat	09:00	04:00	
Sun	09:00	04:00	

**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"/>
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 4)		
Tue					
			<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)		
Wed					
Thur					
Fri					
Sat					
Sun					

**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of live music take place indoors or outdoors or both – please tick</u></b> (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)					
Mon	09:00	04:00						
Tue	09:00	04:00						
Wed	09:00	04:00				<b><u>State any seasonal variations for the performance of live music</u></b> (please read guidance note 4)		
Thur	09:00	04:00						
Fri	09:00	04:00				<b><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></b> (please read guidance note 5)		
Sat	09:00	04:00						
Sun	09:00	04:00						



**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b><u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u></b> (please read 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 further details here</u></b> (please read guidance note 3)		
Mon	09:00	04:00			
Tue	09:00	04:00			
Wed	09:00	04:00	<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 4)		
Thur	09:00	04:00			
Fri	09:00	04:00	<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)		
Sat	09:00	04:00			
Sun	09:00	04:00			

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of dance take place indoors or outdoors or both – please tick</u></b> (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)		
Mon	09:00	04:00			
Tue	09:00	04:00			
			<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 4)		
Wed	09:00	04:00			
Thur	09:00	04:00			
			<b><u>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</u></b> (please read guidance note 5)		
Fri	09:00	04:00			
Sat	09:00	04:00			
Sun	09:00	04:00			

# 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)			<b><u>Please give a description of the type of entertainment you will be providing</u></b> Specialist performance works.		
Day	Start	Finish	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Mon	09:00	04:00		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue	09:00	04:00	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed	09:00	04:00			
Thur	09:00	04:00	<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)		
Fri	09:00	04:00			
Sat	09:00	04:00	<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)		
Sun	09:00	04:00			

I

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"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	23:00	04:00	<b><u>Please give further details here</u></b> (please read guidance note 3)		
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	04:00	<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)		
Sat	23:00	04:00			
Sun	23:00	04:00			

**J**

<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"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Mon	09:00	04:00			
Tue	09:00	04:00			
Wed	09:00	04:00			
Thur	09:00	04:00			
Fri	09:00	04:00			
Sat	09:00	04:00			
Sun	09:00	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)		

**K**

**Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children** (please read guidance note 8)

As far as the applicant is aware none of the proposed activities should give rise to concern in respect of children.

L

<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	09:00	05:00	
Tue	09:00	05:00	
Wed	09:00	05:00	
Thur	09:00	05:00	
Fri	09:00	05:00	<b>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</b> (please read guidance note 5)
Sat	09:00	05:00	
Sun	09:00	05:00	

Please identify those conditions currently imposed on the licence which you believe could be removed as a consequence of the proposed variation you are seeking  
 N/A – this application is for changes to the premises licence plans only and therefore all existing licence conditions remain capable of upholding the licensing objectives.

- Please tick yes
- I have enclosed the premises licence
  - I have enclosed the relevant part of the premises licence

Reasons why I have failed to enclose the premises licence or relevant part of the premises licence  
N/A

**M** Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

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

All existing licence conditions remain capable of upholding the licensing objectives.

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

See above

**c) Public safety**

See above

**d) The prevention of public nuisance**

See above

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

See above


**Please tick yes**

- I have made or enclosed payment of the fee
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I understand that I must now advertise my application
- I have enclosed the premises licence or relevant part of it or explanation
- I understand that if I do not comply with the above requirements my application will be rejected
- {Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships} I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15)

**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 5 – Signatures** (please read guidance note 10)

**Signature of applicant (the current premises licence holder) 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	23/07/2024
Capacity	Solicitors for the applicant

**Where the premises licence is jointly held signature of 2<sup>nd</sup> applicant (the current premises licence holder) 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	



**Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)**

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

**Post town**

[REDACTED]

**Post code**

[REDACTED]

**Telephone number (if any)**

[REDACTED]

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

[REDACTED]