

Haringey Temporary Event Notice Licensing Act 2003

For help contact

<u>licensing@haringey.gov.uk</u> Telephone: 020 8489 8232

* required information

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You can save the form at any t	ime and resume it later. You do not need to be	logged in when you resume.
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference GHE1-1 2015		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?		Put "no" if you are applying on your own behalf or on behalf of a business you own or
• Yes C N	lo	work for.
Applicant Details		
* First name	Tekleweni Tesfay	
* Family name	Ghebreselassie	
* E-mail		
		Include country code.
Other telephone number		
☐ Indicate here if the appl	cant would prefer not to be contacted by telep	hone
Is the applicant:		
 Applying as a business of 	or organisation, including as a sole trader	A sole trader is a business owned by one
 Applying as an individual 	àl	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.

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Address		
* Building number or name	783	
* Street	High Road	
District		
* City or town	London	
County or administrative area		
* Postcode	N17 6UP	
* Country	United Kingdom	
number		
☐ Indicate here if you woul	d prefer not to be contacted by telephone	
Are you:		
An agent that is a busine	ss or organisation, including a sole trader	A sole trader is a business owned by one person without any special legal structure.
 A private individual actir 	ng as an agent	
Agent Business Is your business registered in the UK with Companies House?	YesNo	Note: completing the Applicant Business section is optional in this form.
Registration number	OC358152	
Business name	Dadds LLP	If your business is registered, use its registered name.
VAT number GB	101 5996 25	Put "none" if you are not registered for VAT.
Legal status	Limited Liability Partnership	
Your position in the business	Solicitor/Partner	
Home country	United Kingdom	The country where the headquarters of your business is located.

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Agent Registered Address		Address registered with Companies House.
Agent Registered Address		Address registered with companies house.
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APPLICATION DETAILS (See	also guidance on completing the form, gene	ral notes and note 1)
Have you had any previous or	maiden names?	
○ Yes	No	
* Your date of birth	12 / 02 / 1984	Applicant must be 18 years of age or older
	dd mm yyyy	
National Insurance number	SK753498X	This box need not be completed if you are an
		individual not liable to pay UK national insurance.
Place of birth	BETIGEBRIAL	
Correspondence Address		-
<u> </u>	similar to) the address given in section one?	If "Yes" is selected you can re-use the details
C Voc	○ No	from section one, or amend them as required. Select "No" to enter a completely
Yes	No	new set of details.
Building number or name	Crescent House	
Street	51 High Street	
District		-]
	Billericay	
City or town] 1
County or administrative area		
Postcode	CM12 9AX	
Country	United Kingdom	

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Additional Contact Details		
Are the contact details the sam	ne as (or similar to) those given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as
Yes	○ No	required. Select "No" to enter a completely new set of details.
E-mail	office@dadds.co.uk	
Telephone number	01277 631811	
Other telephone number		
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THE PREMISES		
activity at the premises describ Give the address of the premise	es where you intend to carry on the licensable anance Survey references). (See also guidance o	activities or if it has no address give a detailed
Yes	○ No	
Address	NO NO	
	imilar to) the address given in section one?	If "Yes" is selected you can re-use the details
Yes	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
* Building number or name	783	
* Street	High Road	
District		
* City or town	London	
County or administrative area		
* Postcode	N17 6UP	
* Country	United Kingdom	
* Does a premises licence or clu to the premises (or any part of	ub premises certificate have effect in relation the premises)?	
○ Neither	es licence Club premises certificate	
* Premises licence number	LN/000020711	
Location Details		
* Provide further details about	the location of the event	
Eritrean & Etheopian Restaurar	nt, 783 High Road	

Continued from previous page If you intend to use only part of the premises at this address or intend to rest description and details below (see also guidance on completing the form, no	
Whole Premises	
Describe the nature of the premises below (see also guidance on completing	g the form, note 4)
Eritrean & Ethiopian Restaurant	
Describe the nature of the event below (see also guidance on completing the	e form, note 5)
Pre-Christmas Party booking. Ticketed event. Food will be served. Recorded music only - no live music. Maximum capacity 50 patrons plus staf No under 25's - generally older clientele. 4 x SIA employed at the premises for the TEN - One covering the fire exit, on and supporting front door and one on the front door. The premises Licence holder agrees to abide by the conditions attached to t Temporary Event. A copy of the licence conditions is attached to this applica	ne by the DJ/music area, one walking the floor the premises licence for the duration of the
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LICENSABLE ACTIVITIES	
State the licensable activities that you intend to carry on at the premises (see also guidance on completing the form, note 6): The sale by retail of alcohol The supply of alcohol by or on behalf of a club to, or to the order of, a member of the club	
	(See also guidance on completing the form, note 7).
☐ The giving of a late temporary event notice	Late notices can be given no later than 5 working days but no earlier than 9 working days before the event. (See also guidance on completing the form, note 8).
Event Dates There must be a period of at least 10 working days between the date you sul when you will be using these premises for licensable activities.	
State the dates on which you intend to use these premises for licensable acti	ivities
(see also guidance on completing the form, note 9)	
Event start date 08 / 12 / 2024 dd mm yyyyy	The maximum period for using premises for licensable activities under the authority of a temporary event notice is 168 hours or seven days.

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Event end date	08 / 12 / 2024	
	dd mm yyyy	
State the times during the event period that you propose to carry on licensable activities		
(give times in 24 hour clock) (see also guidance on completing the form, note 10)	From 00:01hrs until 02:30hrs on Sunday 08/12/24 (Saturday night 7th December into the Sunday morning) for licensable activities with an additional 30 minutes added for the safe dispersal of patrons and the closure of the premises.	
State the maximum number of people at any one time that you intend to allow to be present at the premises during the times when you intend to carry on licensable activities, including any staff, organisers or performers (see also guidance on completing the form, note 11)	70	Note that the maximum number of people cannot exceed 499.
	nclude the supply of alcohol, state whether the on or off the premises, or both ing the form, note 12):	
On the premises only		
 Off the premises only 		
○ Both		
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RELEVANT ENTERTAINMENT	(See also guidance on completing the form	n, note 13)
State if the licensable activities period that you propose to pro	will include the provision of relevant entertain ovide relevant entertainment	ment. If so, state the times during the event
There will be no activity of this	nature	
Section 6 of 9		
PERSONAL LICENCE HOLDERS	S (See also guidance on completing the form	n, note 14 <u>)</u>
Do you currently hold a valid personal licence?	YesNo	
Provide the details of your pers	sonal licence below.	
Issuing licensing authority	London Borough of Haringey	

Continued from previous page	Licence num	ber		
LN/000026407				
Date of issue	07 / 03 dd mn			
Any further relevant details				
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PREVIOUS TEMPORARY EVEN	T NOTICES (See also guida	nce on completir	ng the form, note 15)
Have you previously given a temporary event notice in respect of any premises for events falling in the same calendar year as the event for which you are now giving this temporary event notice?	Yes	0	No	
State the number of temporary event notices (including the number of late temporary event notices, if any) you have given for events in that same calendar year	4			
Have you already given a temporary event notice for the same premises in which the event period: a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice?	○ Yes	•	No	
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ASSOCIATES AND BUSINESS (COLLEAGUES	(See also gui	dance on comple	ting the form, note 16)
Has any associate of yours given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice?	○ Yes	•	No	

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Has any associate of yours already given a temporary event notice for the same premises in which the event period: a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice?	0	Yes	•	No
Has any person with whom you are in business carrying on licensable activities given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice?	0	Yes	•	No
Has any person with whom you are in business carrying on licensable activities already given a temporary event notice for the same premises in which the event period: a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice?	0	Yes	•	No
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CONDITION (See also guidar	nce c	on completing the	form,	note 18)
above include the supply of alc	-			e relevant licensable activities described in Sections 4 and 5 e made by or under the authority of the premises user.
PAYMENT DETAILS				
This fee must be paid to the au	ıthor	ity. If you complete	e the a	oplication online, you must pay it by debit or credit card.
This formality requires a fixed f	ee o	f £21		
DECLARATION (See also guid	anc	e on completing t	he for	m, note 19)
* The information contained in	ı this	form is correct to t	he bes	et of my knowledge and belief
* I understand that it is an offe	nce:			
(i) to knowingly or recklessly liable on conviction for such				nection with this temporary event notice and that a person is I 5 on the standard scale; and
(ii) to permit an unauthorised licensable activity to be carried on at any place and that a person is liable on conviction for any such offence to a fine not exceeding £20,000, or to imprisonment for a term not exceeding six months, or to both				
		J		ood the above declaration

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This section should be comple behalf of the applicant?"	eted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
* Full name	David Dadds
* Capacity	Applicant's Solicitor
* Date	14 / 11 / 2024 dd mm yyyy
	Add another signatory
continue with your application	outer by clicking file/save as v.uk/apply-for-a-licence/temporary-event-notice/haringey/apply-1 to upload this file and
OFFICE USE ONLY	
Applicant reference number	GHE1-1 2015
Fee paid	
Payment provider reference	
ELMS Payment Reference	
Payment status	
Payment authorisation code	
Payment authorisation date	
Date and time submitted	
Approval deadline	
Error message	
Is Digitally signed	
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