

## 5. REPORT

### Background

5.1 An application for a new Premises Licence, by Mr Mpala Mufwankolo in respect of Savannahs Pleasures Café Bar Restaurant, 614 High Road, Tottenham, London N17 9TB under the Licensing Act 2003.

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

**Provision of Regulated Entertainment: Recorded Music, Anything of a Similar Description to that of live or recorded music or performances of dance, provision of making music,**

Monday to Saturday      0700 to 0500  
Sunday                      0700 to 0000

**Live Music & Performances of Dance, Provision of entertainment facilities for dancing and entertainment of a similar description to that of making music or dancing.:**

Thursday to Saturday:    2200 to 0500  
Sunday:                      1900 to 0000

**Provision of Late Night Refreshment:**

Monday to Saturday      2300 to 0500  
Sunday                      2300 to 0000

**Supply of Alcohol:**

Monday to Saturday      1100 to 0300  
Sunday                      1100 to 0000

**Opening hours:**

Monday to Saturday      0700 to 0500  
Sunday                      0700 to 0000

**General-all four licensing objectives**

5.3 Crime and Disorder

5.4 Public Safety

5.5 Public Nuisance

5.6 Child Protection

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

### **Responsible authorities:**

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

Made representation against the application which has now been withdrawn.

**APP 2**

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

##### **Noise Team**

Have made representation against the 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**

Made representation against the application which has now been withdrawn.

**APP 4**

#### **6.4 Planning Officer**

Have no objections to this application

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

Comments made on this application. **APP 5**

#### **7.0 Interested Parties**

6 letters of representation has been received against this application. **App 6**

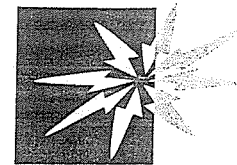
#### **8.0 Financial Comments**

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

## **9.0 Licensing Officer Comments**

We feel the Committee should pay attention to Part of the application form as the possible conditions offered by the applicant do not assist in upholding or promoting the licensing objectives.

# APPENDIX 1



Haringey Council

## 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

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 SAVANNAHS PLEASURES CAFE - BAR - RESTAURANT 614 HIGH ROAD TOTTENHAM	
Post town LONDON	Postcode N17 9TB

Telephone number at premises(if any)

Non-domestic rateable value of premises

£

### 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:

- 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)

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

Surname

MUFWANKOLO

First names

MPALA

I am 18 years old or over  Please tick  yes

Date of birth 

Day	Month	Year
28	01	1954

Current postal address if different from premises address

99 TOTTENHALL ROAD  
PALMERS GREEN

Post town LONDON

Postcode N13 6JA

Daytime contact telephone number

07956 347 831

E-mail address (optional)

MUFWANKOLO 1 @ HOTMAIL . COM

**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

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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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
3	08	2010

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

Day	Month	Year
N/A		

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)  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			
Wed			State any seasonal variations for performing plays (please read guidance note 4)
Thur			
Fri			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)
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)  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			
Wed			State any seasonal variations for the exhibition of films (please read guidance note 4)
Thur			
Fri			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)
Sat			
Sun			

<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			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)
Thur			
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			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)
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 checked="" type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Standard days and timings (please read guidance note 6)			
Day	Start	Finish	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	10 Pm	5am	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)  Acoustic, Soft Live Music will take place occasionally but not regularly. This will consist of very low level music.
Fri	10 Pm	5am	
Sat	10 Pm	5am	
Sun	7pm	12am	

# 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)			
Day	Start	Finish	Please give further details here (please read guidance note 3)
Mon	7am	5am	
Tue	7am	5am	State any seasonal variations for the playing of recorded music (please read guidance note 4)
Wed	7am	5am	
Thur	7am	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	7am	5am	
Sat	7am	5am	
Sun	7am	12am	

**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 <input checked="" type="checkbox"/> (please read guidance note 2)  Indoors <input checked="" 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 performance of dance (please read guidance note 4)
Wed			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)
Thur	10pm	05am	
Fri	10pm	05am	
Sat	10pm	05am	
Sun	7pm	12am	

**H**

Anything of a similar description to that falling within (e), (f) or (g) 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	
Mon	7am	5am	Will this entertainment 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"/>
Tue	7am	5am	Please give further details here (please read guidance note 3)
Wed	7am	5am	State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)
Thur	7am	5am	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)
Fri	7am	5am	
Sat	7am	5am	
Sun	7am	12am	

<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)
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 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)
Day	Start	Finish	Indoors <input checked="" 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	10pm	5am	
Fri	10pm	5am	
Sat	10pm	5am	
Sun	7pm	12am	

**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 checked="" 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 facilities for entertainment of a similar description to that falling within I or J (please read guidance note 4)
Thur	10Pm	5am	
Fri	10Pm	5am	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)
Sat	10Pm	5am	
Sun	7Pm	12am	

**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)
			Indoors <input checked="" type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)
Mon	7am	5am	
Tue	7am	5am	
Wed	7am	5am	State any seasonal variations for the provision of late night refreshment (please read guidance note 4)
Thur	7am	5am	
Fri	7am	5am	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	7am	5am	
Sun	7am	12am	

**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)
			On the premises <input checked="" type="checkbox"/> Off the premises <input type="checkbox"/> Both <input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)
Mon	11am	3am	
Tue	11am	3am	
Wed	11am	3am	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	11am	3am	
Fri	11am	3am	
Sat	11am	3am	
Sun	11am	12am	



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

Name **Mr. MPALA MUFWANKOLO**  
 Address **99 TOTTENHALL ROAD**  
 Postcode **N 13 6 JA**  
 Personal Licence number (if known)  
 Issuing licensing authority (if known) **LONDON BOROUGH OF ENFIELD**

**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)

*(A diagonal line is drawn across this section, indicating no additional information was provided.)*

**O**

**Hours premises are open to the public**

Standard days and timings  
 (please read guidance note 6)

Day	Start	Finish
Mon	7am	5am
Tue	7am	5am
Wed	7am	5am
Thur	7am	5am
Fri	7am	5am
Sat	7am	5am
Sun	7am	12am

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)

All four licensing objectives must be actively promoted and practiced by The Licensing Authority, personal and premises licence holders, users or temporary event Notice, staff employed on licensed premises training and supervision will make sure that staff are aware of all 4 licensing objectives, and they must put them in application all the time.

b) The prevention of crime and disorder

The Premises consist of a CCTV system and use Registered Security officers.  
The Premise will refuse to sell or provide alcohol to any one appearing to be drunk, or acting in an anti-social behaviour and shall be removed, and operate with local authority, the police, and be part of a Social Community (local group) to tackle and reduce crime and disorders within the area, and avoid binge drinking and alcohol misuse

c) Public safety

The Premises and its staffs have the duty to prevent any kind of disorder and to reduce any kind of anti-social behaviour, and also to avoid any nuisance as the result of noise from premises, and constantly cooperate with the police and the local authority.

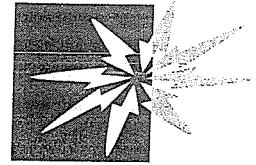
d) The prevention of public nuisance

Customers leaving the premises after 11pm will be supervised and directed to a different gate, this with the object of controlling noise from clients, to avoid any disturbance of neighbours at night. Signs requesting consideration will be used, as well as supervision.

e) The protection of children from harm

The premises will challenge 21 policy, and will employ experienced staffs to avoid under 18 to access to alcohol, and ongoing staff training, will be apply, as staffs have the duty to protect children from harm. In Restaurant, under 16 must be with an adult, if this is after midnight.

Consent of individual to being specified as  
premises supervisor



Haringey Council

Reference number:

I [full name of prospective premises supervisor] Mr. MPALA MUFWANKOLO  
AKA : NICHE JUAMI 99 TOTTENHALL ROAD  
N13 6JA

of [home address of prospective premises supervisor] 99 TOTTENHALL ROAD  
PALMERS GREEN  
N13 6JA

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

[type of application]  
PREMISE LICENCE

by

[name of applicant] MPALA MUFWANKOLO AKA NICHE JUAMI

relating to a premises licence

[number of existing licence, if any]

for

[name and address of premises to which the application relates]  
SAVANNAH'S PLEASURES  
614 High Road  
TOTTENHAM  
N17 9TB

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

[name of applicant]  
MPALA MUFWANKOLO AKA NICHE JUAMI

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.

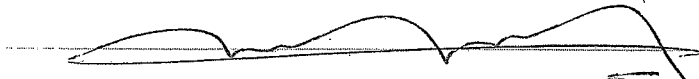
Signature 

Date 9/7/2010

Capacity OWNER Manager - DPS

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 9/7/2010

Capacity OWNER MANAGER

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.

## STATUTORY DECLARATION

1, MPALA MUFWANKOLO , with passport number 730003012 and Naturalisation certificate number 4240334 of 2 Fogerty Close, Enfield , Middlesex, EN3 6XJ , do Solemnly and Sincerely declare as follows:

1. In my passport ( number 730003012 ) and in my Naturalisation certificate ( number 4240334) my name appears as Niche Juami. This was my former name.

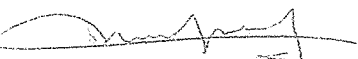
2. I hereby absolutely renounce and abandon the use of my former name of Niche Juami and in lieu thereof I assume as from the date hereof the name of Mpala Mufwankolo and in pursuance of such change of name as aforesaid , I hereby DECLARE that I shall at all times hereafter in all records deeds and instruments in writing and dealings and transactions and upon all occasions whatsoever use and sign the said name of Mpala Mufwankolo as my name in lieu of my previous name of Niche Juani so renounced as aforesaid.

AND I hereby authorise and request all persons to designate and address me by such assumed name of Mpala Mufwankolo

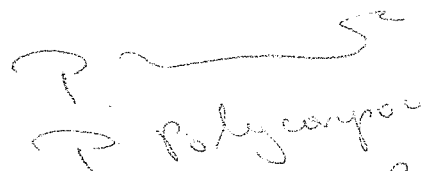
IN WITNESS whereof I have hereunto signed my name of

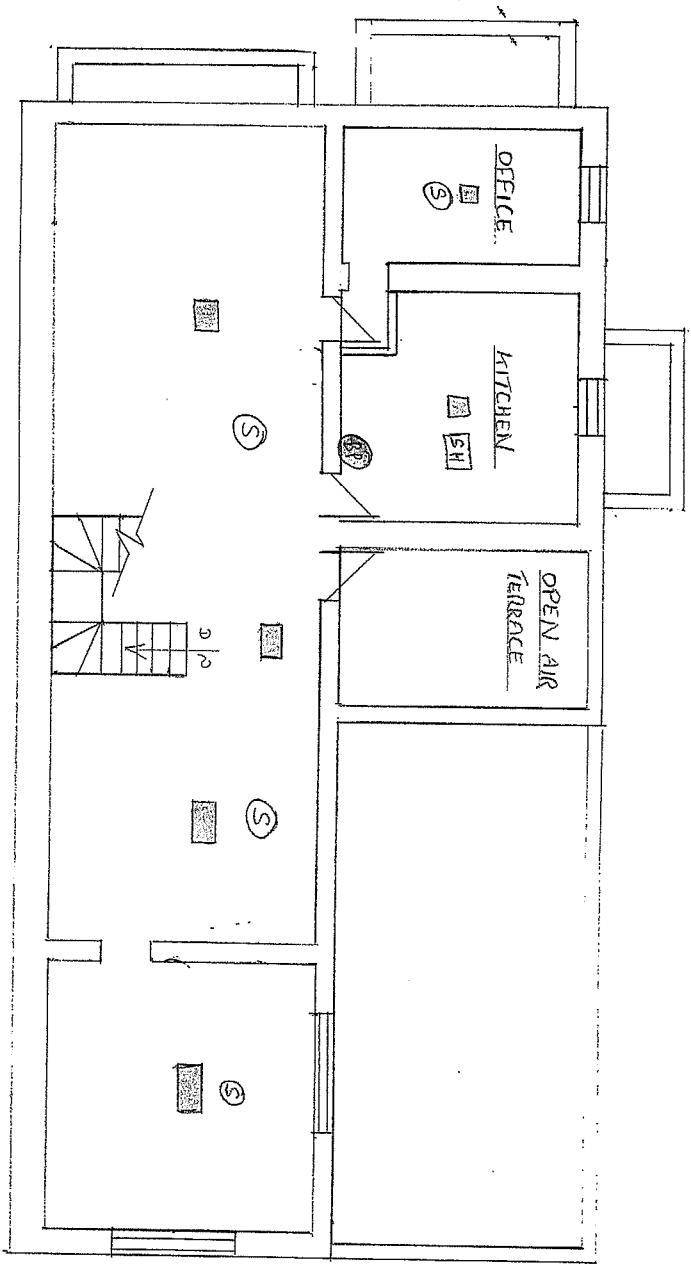
Mpala Mufwankolo on 23rd Day of May 2006..

SIGNED AS A DEED

BY Mpala Mufwankolo 

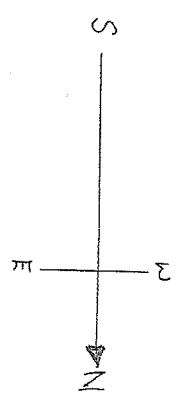
in the presence of :

  
P. Polycarpus,  
2 St. Peter's Parade,  
Lambton NSW 581  
Sobida



← HIGH ROAD →

← SCOTLAND GREEN →



FIRST FLOOR PLAN

SAVANNAH'S PLEASURES CAFE

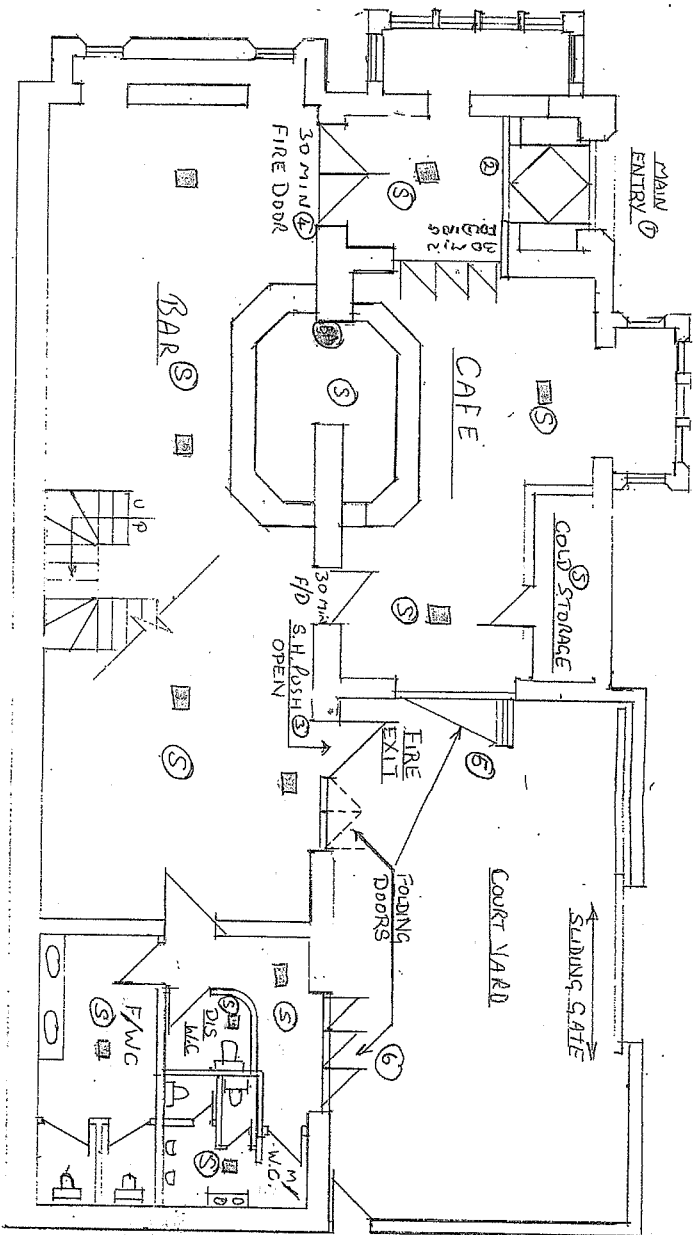
617 HIGH ROAD

NITZ 978

DRAWN BY: PE DATE 01/08/2010

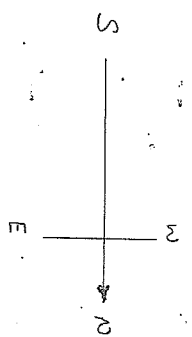
Drawings no. of 20 Scale 1:100





HIGH ROAD

SCOTLAND GREEN



NOTE:

- ① MAIN ENTRY IS TO BE SINGLE HAND OPERATING WHEN PREMISES ARE CLOSED & OPEN AT OTHER TIMES
- ② 2ND SET OF ENTRY LOBBY LOCKS NO LOCKS & SINGLE HAND PUSH OPEN (SOUND RESTRICTION)
- ③ ROOMS WIDE SINGLE HANDED CASY GRAB FIRE EXIT PLUS FOODING DOORS TO EXTERNAL COURT YARD AREA
- ④ Area LOADING FIRE RATED DOORS (SOUND RESTRICTION)
- ⑤ EXTERNAL LOADING DOORS FOR ACCESS TO COURT YARD
- ⑥ EMERGENCY LIGHTING
- ⑦ STROKE DETECTORS
- ⑧ ALARM BREAM FITS
- ⑨ FIRE STAIRS SEE PROVIDED PLAN

GROUND FLOOR PLAN	
SAVANNAH'S PLEASURES CAFE	
614 HIGH ROAD	
N17 9TB	
DRAWN BY:	DATE 01/08/2010
DESIGNED BY: No 1 of 2	SCALE 1:100

# APPENDIX 2



Your  
reference:

Our reference: 164/2010

Date: 20 July, 2010

Ms D.BARRETT  
Licensing  
Techno Park  
Ashley Road  
Tottenham N.17

**Metropolitan Police Service**

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

Tel: 0203 – 276 - 0150

Dear Ms. Barrett

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

**Savannah's Pleasure Café, Bar & Restaurant, 614 High Road N.17**

With reference to the above application and our letter of representation dated the 15th of July 2010. I have received correspondence from the applicant agreeing to my representation.

I therefore wish to withdraw my representation.

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

Yours Sincerely

Geoffrey Parker  
Licensing  
Quicksilver Patrol Base

c.c.M.Mufwankolo

FLB



Your reference:

Our reference: 164/2010

Date: 15 July, 2010

**Metropolitan Police Service**

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

*Licensing*  
Quicksilver Patrol Base  
Western Road  
Wood Green  
N22 6UH

Tel: 0203 276 0150

Dear Ms. Barrett

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

**Savannah's Pleasure Café, Bar & Restaurant, 614 High Road N.17**

With reference to the above application Police have considered the application and wish to make the following representations.

1.This is under the Protection of children from harm objective.

I recommend that the following form of verification of a persons proof of age is:-

- . A valid passport
- . A photo driving licence issued in a European Union Country
- . A proof of age standard card system
- . A citizen card, supported by the home office.

2. This is under the Prevention of Crime & Disorder objective.

Security Industry Registered door staff to be employed at the premises from 21.00 to close when regulated entertainment is taking place.

These premises are close to Tottenham Hotspur Football Club and will be operating as a bar. The following match day conditions to be included on the Premises Licence.

Premises not to open before 11.00 for the sale of alcohol on Saturday and Sunday match days.

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.

No glass bottles are sold over or removed from the bar 4 hours before the scheduled kick off time until 1 hour after the end of the match.

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.

Yours Sincerely

Geoffrey Parker  
Licensing  
Quicksilver Patrol Base

c.c.M.Mufwankolo