

## 5. REPORT

### Background

5.1 An application for a new Premises Licence, by Roc UK Ltd in respect of Wellington Service Station, 513 Archway Road, Highgate, London N6 4HX under the Licensing Act 2003.

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

#### Provision of Late Night Refreshment

Monday to Sunday 2300 to 0500

#### Supply of Alcohol

Monday to Sunday 0600 to 2200

#### Opening Hours:

Monday to Sunday 24 hours a day

#### General-all four licensing objectives

CCTV system with recording facilities in place at site, images can be made available upon reasonable request by a relevant officer of a Responsible Authority.

Appropriate staff training to be satisfactorily completed and recorded. Training records can be made available for inspection upon reasonable request by a relevant officer of a Responsible Authority.

Refusals book will be operated and maintained.

Challenge 25 policy will be operated at the premises. Acceptable forms of proof of age will be a passport, a photo card driving licence or PASS accredited identification card.

### 5.3 Crime and Disorder

CCTV system with recording facilities in place at site. Images can be made available upon reasonable request by a relevant officer of a Responsible Authority.

Spirits located behind the counter.

Appropriate staff training to be satisfactorily completed and recorded. Training records can be made available for inspection upon reasonable request by a relevant officer of a Responsible Authority.

### 5.4 Public Safety

CCTV system with recording facilities in place at site. Images can be made available upon reasonable request by a relevant officer of a Responsible Authority.

## 5.5 Public Nuisance

Appropriate staff training to be satisfactorily completed and recorded. Training records can be made available for inspection upon reasonable request by a relevant officer of a Responsible Authority.

## 5.6 Child Protection

Appropriate staff training to be satisfactorily completed and recorded. Training records can be made available for inspection upon reasonable request by a relevant officer of a Responsible Authority.

Refusals book will be operated and maintained.

Spirits located behind the counter.

Challenge 25 policy will be operated at the premises. Acceptable forms of proof of age will be a passport, a photo card driving licence or PASS accredited identification card.

## 6. RELEVANT REPRESENTATIONS (CONSULTATION)

### Responsible authorities:

### 6.1 Comments of Metropolitan Police

Have made representation, now withdrawn. **APP 2**

### 6.2 Comments of Enforcement Services:

#### Noise Team

Have no objections to this application

#### 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 no objections to this application.

### 6.4 Planning Officer

Have no objections to this application

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

Have no objections to this application

## **7.0 Interested Parties**

1 letter of representation and 1 petition have been received against this application.

### **APP 3**

## **8.0 Financial Comments**

The fee which would be applicable for this application was **£450.00**

## **9.0 Licensing Officers Comments**

The premises does not currently hold a Premises Licence under the Licensing Act 2003. Section 176(1) of the Licensing Act 2003 states:

No premises licence, club premises certificate or temporary event notice has effect to authorise the sale by retail or supply of alcohol on or from excluded premises.

Section 176(2)(b) of the Licensing Act 2003 states:

In this section, excluded premises means premises used primarily as a garage or which form part of premises which are primarily so used

If a premises licence is granted for this particular premises, it will have no effect until such time as it has been established that the premises is not used primarily as a garage. The sale of alcohol under a premises licence relating to a premises that was primarily a garage would be unauthorised licensable activities and liable to prosecution under Section 136 of the Licensing Act 2003. It should be noted that the applicants have provided a graph illustrating the difference in petrol and non petrol sales.

It is for the Sub Committee to decide if the supporting chart truly illustrates the ratio of alcohol sales to groceries.

# APPENDIX 1--APPLICATION

**Application for a premises licence to be granted  
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 ROC UK LTD

*(Insert name(s) of applicant)*

**apply for a premises licence under section 17 of 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**

<b>Postal address of premises or, if none, ordnance survey map reference or description</b>			
WELLINGTON SERVICE STATION 513 ARCHWAY ROAD HIGHGATE			
<b>Post town</b>	LONDON	<b>Post code</b>	N6 4HX

Telephone number at premises (if any)	0208 348 3878
Non-domestic rateable value of premises	£101000

**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)
- 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 <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	
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 <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/> Please tick yes	

<b>Current postal address if different from premises address</b>			
<b>Post Town</b>		<b>Postcode</b>	
<b>Daytime contact telephone number</b>			
<b>E-mail address (optional)</b>			

**(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.

<b>Name</b>	ROC UK LTD
<b>Address</b>	EXXONMOBIL HOUSE ERMYN WAY LEATHERHEAD SURREY KT22 8UX
<b>Registered number (where applicable)</b>	4558828
<b>Description of applicant (for example, partnership, company, unincorporated association etc.)</b>	LIMITED COMPANY
<b>Telephone number (if any)</b>	01372 222000
<b>E-mail address (optional)</b>	

**Part 3 Operating Schedule**

When do you want the premises licence to start?

Day		Month		Year			
3	0	0	3	2	0	1	1

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 note1)  
 THIS 550 SQ FT (APPROX) CONVENIENCE STORE IS SITED ON AN ESSO FORECOURT TRADING UNDER THE COMPANIES OWN RETAIL FORMAT WITH A RANGE OF FRESH FOODS, GROCERIES, DAIRY PRODUCTS, CONFECTIONERY, SOFT DRINKS AND TOBACCO PRODUCTS ON OFFER. IT SERVES BOTH THE LOCAL COMMUNITY AND THOSE FROM FURTHER AFIELD. PARKING SPACES ARE AVAILABLE ON THE FORECOURT.

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 Schedules 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:**

- 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**

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of a play 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								
Tue								
Wed						<b><u>State any seasonal variations for performing plays</u></b> (please read guidance note 4)		
Thur								
Fri						<b><u>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</u></b> (please read guidance note 5)		
Sat								
Sun								

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b><u>Will the exhibition of films 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						
Tue						
Wed					<b><u>State any seasonal variations for the exhibition of films</u></b> (please read guidance note 4)	
Thur						
Fri					<b><u>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</u></b> (please read guidance note 5)	
Sat						
Sun						

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

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

**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of live music 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					
Wed			<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4)		
Thur					
Fri			<b>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</b> (please read guidance note 5)		
Sat					
Sun					

**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 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					
Tue					
Wed					
Thur					
Fri					
Sun					
			<b><u>State any seasonal variations for the playing of recorded music</u></b> (please read guidance note 4)		
			<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)		

**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 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				
Tue				
Wed			<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 4)	
Thur				
Fri			<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)	
Sat				
Sun				

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)</p>			<p><b><u>Please give a description of the type of entertainment you will be providing</u></b></p>		
Day	Start	Finish	<p><b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><b><u>Please give further details here</u></b> (please read guidance note 3)</p>		
Wed					
Thur			<p><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)</p>		
Fri					
Sat			<p><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)</p>		
Sun					



<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the facilities for making music you will be providing</u></b>	
			<b><u>Will the facilities for making music be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 3)	
Mon				
Tue				
Wed				
Thur				
Fri				
Sat				
Sun			<b><u>State any seasonal variations for the provision of facilities for making music</u></b> (please read guidance note 4)	
			<b><u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)	

**J**

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			<b><u>Will the facilities for dancing be indoors or outdoors or both – please tick</u></b> (see guidance note 2)	Indoors <input type="checkbox"/>	
				Outdoors <input type="checkbox"/>	
				Both <input type="checkbox"/>	
			<b><u>Please give a description of the facilities for dancing you will be providing</u></b>		
Day	Start	Finish			
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Tue					
Wed			<b><u>State any seasonal variations for providing dancing facilities</u></b> (please read guidance note 4)		
Thur					
Fri			<b><u>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sat					
Sun					

K

<b>Provision of facilities for entertainment of a similar description to that falling within i or j</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the type of entertainment facility you will be providing</u></b>		
Day	Start	Finish	<b><u>Will the entertainment facility be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed					
Thur			<b><u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u></b> (please read guidance note 4)		
Fri					
Sat			<b><u>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 to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sun					

L

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	05.00	<b>Please give further details here</b> (please read guidance note 3) THE PROVISION OF HOT PIES, SAVOURIES, SOUP, HOT DRINKS ETC CONSISTENT WITH A TAKEOUT SERVICE FOR CONSUMPTION ON OR OFF THE PREMISES		
Tue	23.00	05.00			
Wed	23.00	05.00	<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 4)		
Thur	23.00	05.00			
Fri	23.00	05.00	<b>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</b> (please read guidance note 5)		
Sat	23.00	05.00			
Sun	23.00	05.00			

M

<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 checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Mon	06.00	22.00			
Tue	06.00	22.00			
Wed	06.00	22.00			
Thur	06.00	22.00			
Fri	06.00	22.00			
Sat	06.00	22.00			
Sun	06.00	22.00			
			<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)		

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

<b>Name</b> BEATA GRAZYNA SAJA	
<b>Address</b> 107 WESTMINSTER GARDENS HOUGHTON REGIS DUNSTABLE BEDFORDSHIRE	
<b>Postcode</b>	LU5 5RU
<b>Personal Licence number (if known)</b> LN/20012576	
<b>Issuing licensing authority (if known)</b> LONDON BOROUGH OF BARNET	

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)

NONE

O

<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	00.00	24.00	<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)
Tue	00.00	24.00	
Wed	00.00	24.00	
Thur	00.00	24.00	
Fri	00.00	24.00	
Sat	00.00	24.00	
Sun	00.00	24.00	

**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)

-CCTV SYSTEM WITH RECORDING FACILITIES IN PLACE AT SITE, IMAGES CAN BE MADE AVAILBALE UPON REASONABLE REQUEST BY A RELEVANT OFFICER OF A RESPONSIBLE AUTHORITY.  
-APPROPRIATE STAFF TRAINING TO BE SATISFACTORILY COMPLETED AND RECORDED. TRAINING RECORDS CAN BE MADE AVAILABLE FOR INSPECTION UPON REASONABLE REQUEST BY A RELEVANT OFFICER OF A RESPONSIBLE AUTHORITY.  
-REFUSALS BOOK WILL BE OPERATED AND MAINTAINED.  
-CHALLENGE 25 POLICY WILL BE OPERATED AT THE PREMISES, ACCEPTABLE FORMS OF PROOF OF AGE WILL BE A PASSPORT, A PHOTO CARD DRIVING LICENCE OR PASS ACCREDITED IDENTIFICATION CARD.

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

-CCTV SYSTEM WITH RECORDING FACILITIES IN PLACE AT SITE, IMAGES CAN BE MADE AVAILABLE UPON REASONABLE REQUEST BY A RELEVANT OFFICER OF A RESPONSIBLE AUTHORITY.  
-SPIRITS LOCATED BEHIND THE COUNTER.  
-APPROPRIATE STAFF TRAINING TO BE SATISFACTORILY COMPLETED AND RECORDED. TRAINING RECORDS CAN BE MADE AVAILABLE FOR INSPECTION UPON REASONABLE REQUEST BY A RELEVANT OFFICER OF A RESPONSIBLE AUTHORITY.

**c) Public safety**

-CCTV SYSTEM WITH RECORDING FACILITIES IN PLACE AT SITE, IMAGES CAN BE MADE AVAILABLE UPON REASONABLE REQUEST BY A RELEVANT OFFICER OF A RESPONSIBLE AUTHORITY.

**d) The prevention of public nuisance**

-APPROPRIATE STAFF TRAINING TO BE SATISFACTORILY COMPLETED AND RECORDED. TRAINING RECORDS CAN BE MADE AVAILABLE FOR INSPECTION UPON REASONABLE REQUEST BY A RELEVANT OFFICER OF RESPONSIBLE AUTHORITY.

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

-APPROPRIATE STAFF TRAINING TO BE SATISFACTORILY COMPLETED AND RECORDED. TRAINING RECORDS CAN BE MADE AVAILABLE FOR INSPECTION UPON REASONABLE REQUEST BY A RELEVANT OFFICER OF A RESPONSIBLE AUTHORITY.  
 -REFUSALS BOOK WILL BE OPERATED AND MAINTAINED.  
 -SPIRITS LOCATED BEHIND THE COUNTER.  
 -CHALLENGE 25 POLICY WILL BE OPERATED AT THE PREMISES, ACCEPTABLE FORMS OF PROOF OF AGE WILL BE A PASSPORT, A PHOTO CARD DRIVING LICENCE OR PASS ACCREDITED IDENTIFICATION CARD.

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

Signature	
Date	24 <sup>TH</sup> FEBRUARY 2011
Capacity	LOCKETT & CO - DULY AUTHORISED AGENTS

**For joint applications signature of 2<sup>nd</sup> applicant 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)**

LOCKETT & CO  
LOCKETT HOUSE  
13 CHURCH STREET

<b>Post town</b>	KIDDERMINSTER	<b>Post code</b>	DY10 2AH
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<b>Telephone number (if any)</b>	01562 864488
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<b>If you would prefer us to correspond with you by e-mail your e-mail address (optional)</b> info@lockett.uk.com
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### 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, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. 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.

**Consent of individual to being specified as premises supervisor**

I, BEATA GRAZYNA SASA  
[full name of prospective premises supervisor]

of 707 WESTMINSTER LAWYERS, HOUGHTON ROAD, OUNSTABLE BEGS, LUS SRU  
[home address of prospective premises supervisor]

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

A PREMISES LICENCE FOR THE SALE OF ALCOHOL FOR CONSUMPTION OFF THE PREMISES  
[type of application]

by ROCK LTD.  
[name of applicant]

relating to a premises licence: — [number of existing licence, if any]

or WELLINGTON SERVICE STATION, 513 ARCHWAY ROAD, HIGHGATE, LONDON, N6 4HX  
[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made by: ROCK LTD.  
[name of applicant]

concerning the supply of alcohol at:

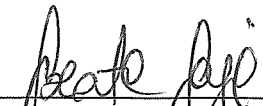
WELLINGTON SERVICE STATION, 513 ARCHWAY ROAD, HIGHGATE, LONDON, N6 4HX  
[name and address of premises to which application relates]

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: AN/20012576.... [insert personal licence number, if any]

Personal licence issuing authority: LONDON BOROUGH OF BARNET  
DAKLEIGH ROAD SOUTH, LONDON, N11 1NP TEL 020 8359 2000

[Insert name and address and telephone number of personal licence issuing authority, if any] BARNET.

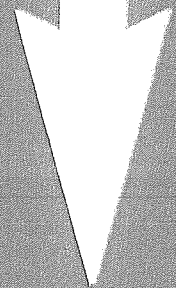
Signed 

Name (please print) BEATA SAJA

Dated 3.2.11.

**It is a criminal  
offence to buy  
alcohol on  
behalf of a child.**

**You could face a  
£5000 fine.**

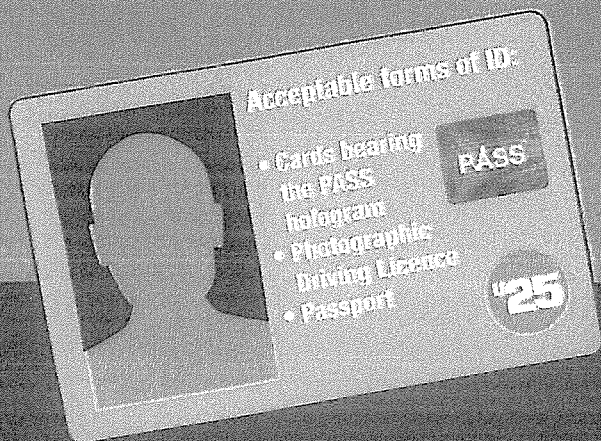
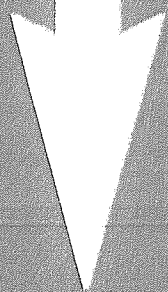


**DRINKAWARE.CO.UK**



# UNDER 25?

Please be  
prepared to show  
proof of age when  
buying alcohol



[DRINKAWARE.CO.UK](http://DRINKAWARE.CO.UK)





# Analysis of Customer Flow, Shop v Forecourt

Wellington Service Station

Source: Epos - 1st to 31st December 2010 incl.

	Non-Fuel Only	Mixed	Fuel Only	Total
1st to 31st December 2010.	21383	7146	8946	37475
Total	21383	7146	8946	37475

# Analysis of Customer Flow - Shop v Forecourt

Wellington Service Station, 513 Archway Road, Highgate, London. 1st to 31st December 2010 incl

