

6

**Licensing Act 2003 Sub-Committee on 1<sup>st</sup> AUGUST 2006**

Report title: Application for a Premises Licence For 90 TRINITY ROAD, LONDON, N22 8YB

Report of: The Lead Officer Licensing

Ward(s) affected BOUNDS GREEN

**1. Purpose**

To consider an application by ERDAL CELEBI to provide a licensable activity in the Supply of alcohol

**2. Recommendations**

- 2.1 (a) Grant the application as asked  
(b) Modify the conditions of the licence, by altering or omitting or adding to them  
(c) Reject the whole or part of the application

The Committee is asked to note that it may not modify the conditions or reject the whole or part of the application unless it is necessary to promote the licensing objectives.

Report authorised by: Robin Payne.....



Assistant Director Enforcement Services

Contact Officer: Ms Daliah Barrett

Telephone: 020 8489 5103

**3. Executive summary**

For consideration by Sub Committee under Licensing Act 2003 for a New Premises licence

**4. Access to information:**

Local Government (Access to Information) Act 1985  
Background Papers

The following Background Papers are used in the preparation of this Report:

**File: 90 TRINITY ROAD, LONDON, N22 8YB**

The Background Papers are located at Enforcement Service, Civic Centre, High Road Wood Green N22



**6.1 Comments of Metropolitan Police**

The Police have no objections to this application.

**6.2 Comments of Enforcement Services**

Noise team have not commented on this application.

**Food Team**

Have no objections to this application

**Health and Safety**

Have not commented on this application.

**Trading Standards**

Have no objections to this application

**6.3 Fire Officer**

The Fire Officer has made a representation against this application.

**6.4 Planning Officer**

Planning has no objection to this application.

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

No comments to make on this application.

**7.0 Interested Parties**

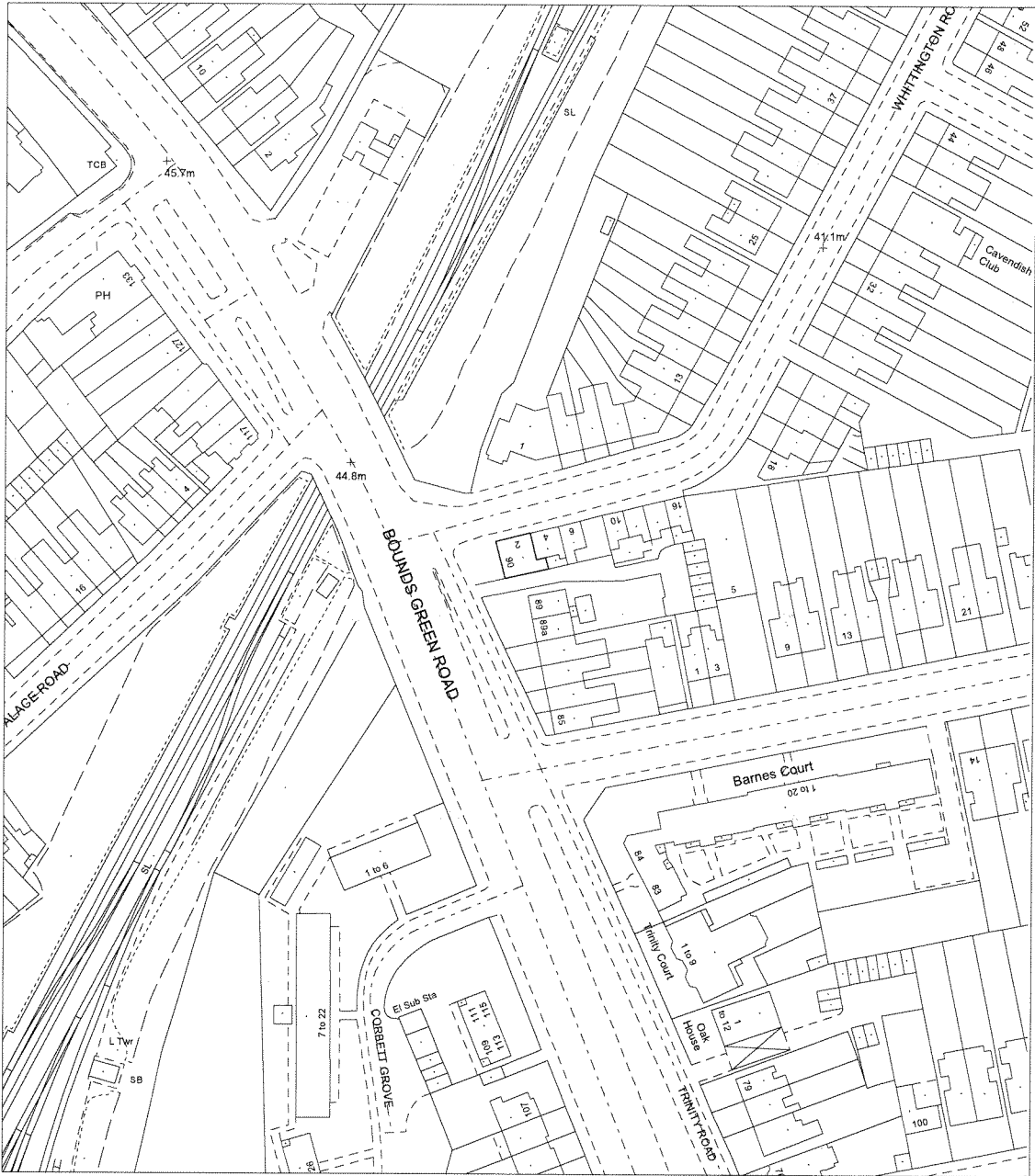
3 letters of representation have been received against this application.

**8.0 Financial Comments**

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

**APP 1**

**APPLICATION FORM**



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## Site plan

### 90 Trinity Road N22 8YB

**HARINGEY COUNCIL**  
**Directorate of  
 Environmental  
 Services**

Robin Payne  
 Assistant Director  
 Enforcement Service  
 639 High Road  
 London N17 8BD  
 Tel 020 8489 0000  
 Fax 020 8489 5525

	Drawn by	DW
	Scale	1:1250
	Date	20/07/2006



# Application for a premises licence to be granted under the Licensing Act 2003

£ 190,00

(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 90 Trinity Road London N.22 8Y.B. / (90 TRINITY ROAD LONDON N.22.8Y.B)	
Post town London	Postcode N.22.8Y.B

Telephone number at premises(if any)

Non-domestic rateable value of premises £ 7000 =

### Part 2 - Applicant details

Please state whether you are applying for a premises licence as

- Please tick  yes
- a) an individual or individuals\*  please complete section (A)
  - b) a person other than an individual\*
    - i. as a limited company  please complete section (B)
    - ii. as a partnership  please complete section (B)
    - iii. as an unincorporated association; or  please complete section (B)
    - iv. other (for example a statutory corporation)  please complete section (B)

(1) Insert name and address of relevant licensing authority and its reference number (optional)  
(2) Insert name(s) of applicant

- c) a recognised club  please complete section (B)
- d) a charity  please complete section (B)
- e) the proprietor of an educational establishment  please complete section (B)
- f) a health service body  please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital  please complete section (B)
- h) the chief officer of police of a police force in England and Wales  please complete section (B)

\* If you are applying as a person described in (a) or (b) please confirm:

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or  Please tick  yes
- I am making the application pursuant to
  - a statutory function; or
  - a function discharged by virtue of Her Majesty's prerogative

**(A) INDIVIDUAL APPLICANTS** (fill in as applicable)

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

Surname  First names

I am 18 years old or over  Please tick  yes Date of birth 

Day	Month	Year
02	03	1972

 ✓

\* Current postal address if different from premises address  
 123A - BOUNDS GREEN ROAD LONDON N.11.  
 2 P.P.

Post town  Postcode

Daytime contact telephone number

E-mail address (optional)



**SECOND INDIVIDUAL APPLICANT** (if applicable) *none*

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

Surname  First names

I am 18 years old or over  Please tick  yes  
Date of birth Day  Month  Year

Current postal address if different from premises address

Post town  Postcode

Daytime contact telephone number

E-mail address (optional)

**(B) OTHER APPLICANTS** *none*

**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**

2nd - 5/2006

When do you want the premises licences to start?

Day	Month	Year
29	05	2006

✓

If you wish the licence to be valid only for a limited period, when do you want it to end? *no*

Day	Month	Year

Please give a general description of the premises (please read guidance note 1)

*Will be operating as a Supermarket.  
Has been decorated and is to be  
stocked to begin trading as  
a Continental Super market.*

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**

*no*

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:**

*no*

- 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)

*no*

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

**In all cases complete boxes N, O and P**

**A** *no*

<b>Plays</b>			Will the performance of a play take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Standard days and timings (please read guidance note 6)			
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 performing plays (please read guidance note 4)
Wed			Non-standard timings. Where you intend to use the premises for the performance of plays at different times from those listed in the column on the left, please list (please read guidance note 5)
Thur			
Fri			
Sat			
Sun			

**B** *no*

<b>Films</b>			Will the exhibition of films take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Standard days and timings (please read guidance note 6)			
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 exhibition of films (please read guidance note 4)
Wed			Non-standard timings. Where you intend to use the premises for the exhibition of films at different times from those listed in the column on the left, please list (please read guidance note 5)
Thur			
Fri			
Sat			
Sun			

**C**

<b>Indoor sporting events</b>			Please give further details here (please read guidance note 3)
Standard days and timings (please read guidance note 6)			
Day	Start	Finish	
Mon			
Tue			
Wed			
State any seasonal variations for indoor sporting events (please read guidance note 4)			
Thur			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)
Fri			
Sat			
Sun			

**D**

*no*

<b>Boxing or wrestling entertainments</b>			Will the boxing or wrestling entertainment take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Standard days and timings (please read guidance note 6)			
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** *no*

<b>Live music</b>			Will the performance of live music take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)  Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Standard days and timings (please read guidance note 6)			
Day	Start	Finish	Please give further details here (please read guidance note 3)
Mon			
Tue			
Wed			State any seasonal variations for the performance of live music (please read guidance note 4)
Thur			
Fri			
Sat			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)
Sun			

**F** *no*

<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 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			
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 4)
Thur			
Fri			
Sat			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)
Sun			

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Day	Start	Finish	Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Mon			Please give further details here (please read guidance note 3)
Tue			
Wed			State any seasonal variations for the performance of dance (please read guidance note 4)
Thur			
Fri			Non-standard timings. Where you intend to use the premises for the performance of dance entertainment at different times from those listed in the column on the left, please list (please read guidance note 5)
Sat			
Sun			

**H**

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Mon			Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
			Please give further details here (please read guidance note 3)
Tue			
Wed			
			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)
Thur			
Fri			
Sat			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)
Sun			

no

<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) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>	
Day	Start	Finish	Please give further details here (please read guidance note 3)	
Mon				
Tue				
Wed				State any seasonal variations for the provision of facilities for making music (please read guidance note 4)
Thur				
Fri				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)
Sat				
Sun				

J no

<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) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>	
Day	Start	Finish	Please give further details here (please read guidance note 3)	
Mon				
Tue				
Wed				State any seasonal variations for providing dancing facilities (please read guidance note 4)
Thur				
Fri				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)
Sat				
Sun				



**K**      *no*

<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)			
<b>Day</b>	<b>Start</b>	<b>Finish</b>	Will the entertainment facility be 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"/>
Mon			Please give further details here (please read guidance note 3)
Tue			State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within I or J (please read guidance note 4)
Wed			Non-standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times from those listed in the column on the left, please list (please read guidance note 5)
Thur			
Fri			
Sat			
Sun			

L 70

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Day	Start	Finish	Indoors <input 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 late night refreshment (please read guidance note 4)
Wed			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)
Thur			
Fri			
Sat			
Sun			

yes M

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption - please tick box <input checked="" type="checkbox"/> (please read guidance note 7)
Day	Start	Finish	On the premises <input type="checkbox"/> Off the premises <input checked="" type="checkbox"/> Both <input type="checkbox"/>
Mon	7am	11 pm	State any seasonal variations for the supply of alcohol (please read guidance note 4)
	7:00	23:00	
Tue	7am	11 pm	
	7:00	23:00	
Wed	7am	11 pm	
	7:00	23:00	
Thur	7am	11 pm	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)
	7:00	23:00	
Fri	7am	11 pm	
	7:00	23:00	
Sat	7am	11 pm	
	7:00	23:00	
Sun	7am	11 pm	
	7:00	23:00	

7-12

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

Yes

Name **Mr MEHMET GUNDUZ**  
 Address **90 DOWNSPARK ROAD LONDON E.5.8.JE**  
 Postcode  
 Personal Licence number (if known) **LBH-PER-T-0196**  
 Issuing licensing authority (if known) **HACKNEY COUNCIL**

no **N** no

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)

(Empty space for highlighting concerns)

7:00-23:00

**O**

**Hours premises are open to the public**

Standard days and timings (please read guidance note 6)

Day	Start	Finish
Mon	7am	11 pm
	7:00	23:00
Tue	7am	11 pm
	7:00	23:00
Wed	7am	11 pm
	7:00	23:00
Thur	7am	11 pm
	7:00	23:00
Fri	7am	11 pm
	7:00	23:00
Sat	7am	11 pm
	7:00	23:00
Sun	7am	11 pm
	7:00	23:00

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: <sup>yes</sup>

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

See below. i

- 1 - prevention of crime
- 2 - public safety
- 3 - prevention of public safety
- 4 - protection of children from harm.

yes

b) The prevention of crime and disorder

provide locks to all windows and doors entering the building.  
This shop has shop front shutters.  
provide security cameras.  
don't serve drunken people.

c) Public safety

provide smoke detectors, fire escape route lights, fire escape route signs.  
provide fire escape extinguisher and fire blanket.

d) The prevention of public nuisance

Don't serve drunken people and police officers.

e) The protection of children from harm

Don't serve person's under 18 year of age.  
If in doubt request photo identification or a passport or photo driving licence.

CHECKLIST:

yes

Please tick ✓

- 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) yes

yes 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 B. Hussein

Date 1.5.2006

Capacity Agent

no For joint applications signature of 2nd applicant, 2nd applicant's solicitor or other authorised agent. (Please read guidance note 12)

If signing on behalf of the applicant please state in what capacity.

Signature

Date

Capacity Agent

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

Mr. B. Hussein I. Civil Eng.  
60 Ardgowan Road, Catford,

Post town London

Postcode SE6 4UU

Telephone number (if any) 0208 6989599 / 07903305903

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.

*Time*

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

Reference number:

[full name of prospective premises supervisor]

Mr MEHMET GÜNDÜZ

[home address of prospective premises supervisor]

99 Downs Park Rd  
London E5 8JE

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

[type of application]

premises licence at Supermarket

by

[name of applicant]

Mr Erdal Çelebi (ERDAL ÇELEBI)

relating to a premises licence

[number of existing licence, if any]

none

for

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

Supermarket  
90 Trinity Road London N.22.8.Y.B.

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

[name of applicant]

Mr. Erdal Çelebi  
(ERDAL ÇELEBI)

concerning the supply of alcohol at

[name and address of premises to which application relates]

Supermarket  
90 Trinity Road London N.22.8.Y.B.

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  LBH-PER-T-0196

[insert personal licence number, if any]

Personal licence issuing authority

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

HACKNEY (Licensing Act 2003)  
DOROTHY HODGKINS HOUSE  
12 - READING LANE LONDON E.8.1H.J.  
Tel: 0208 3564970.

Signed

~~[Signature]~~ / [Signature]

MEHMET GUNDUZ

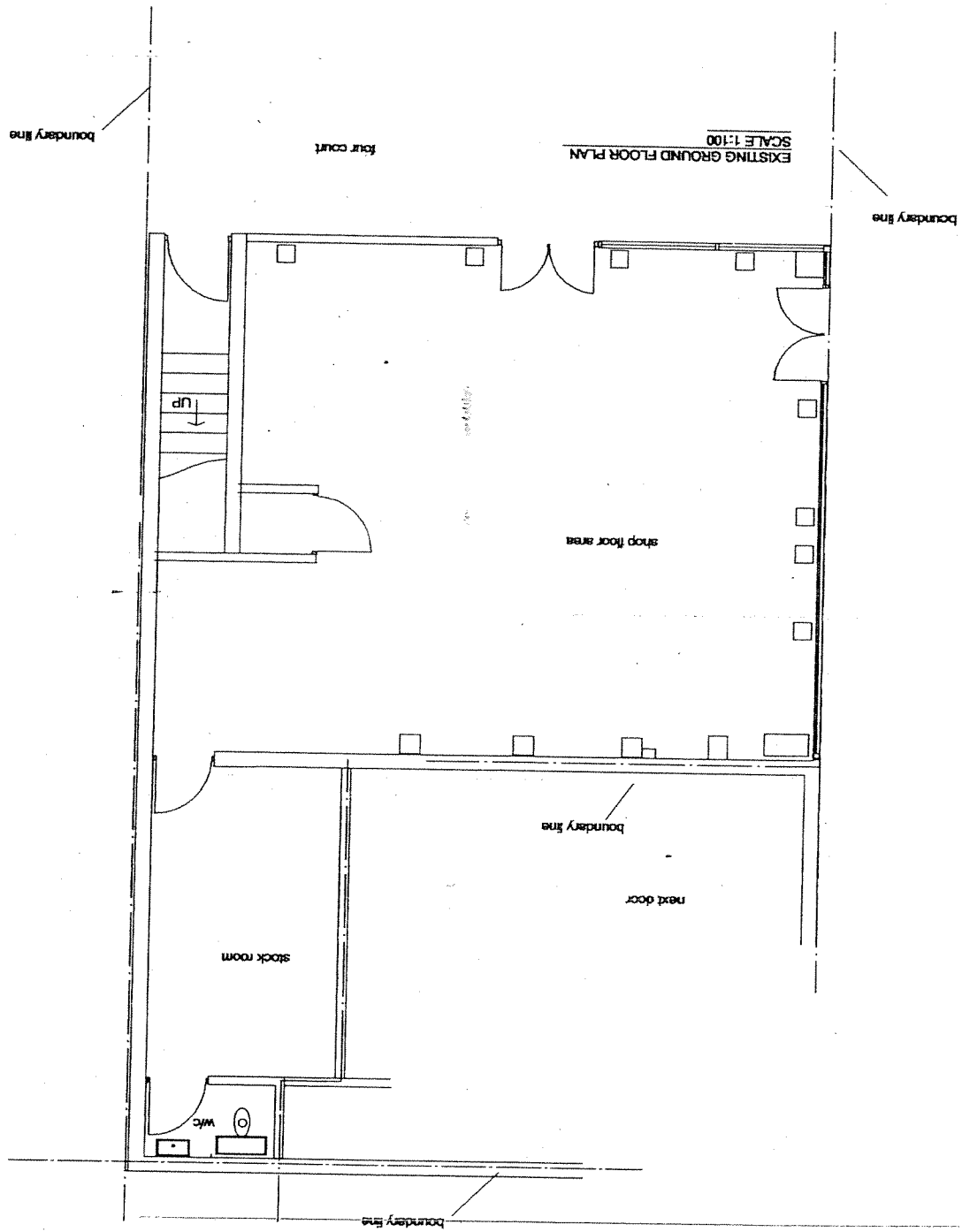
Name (please print)

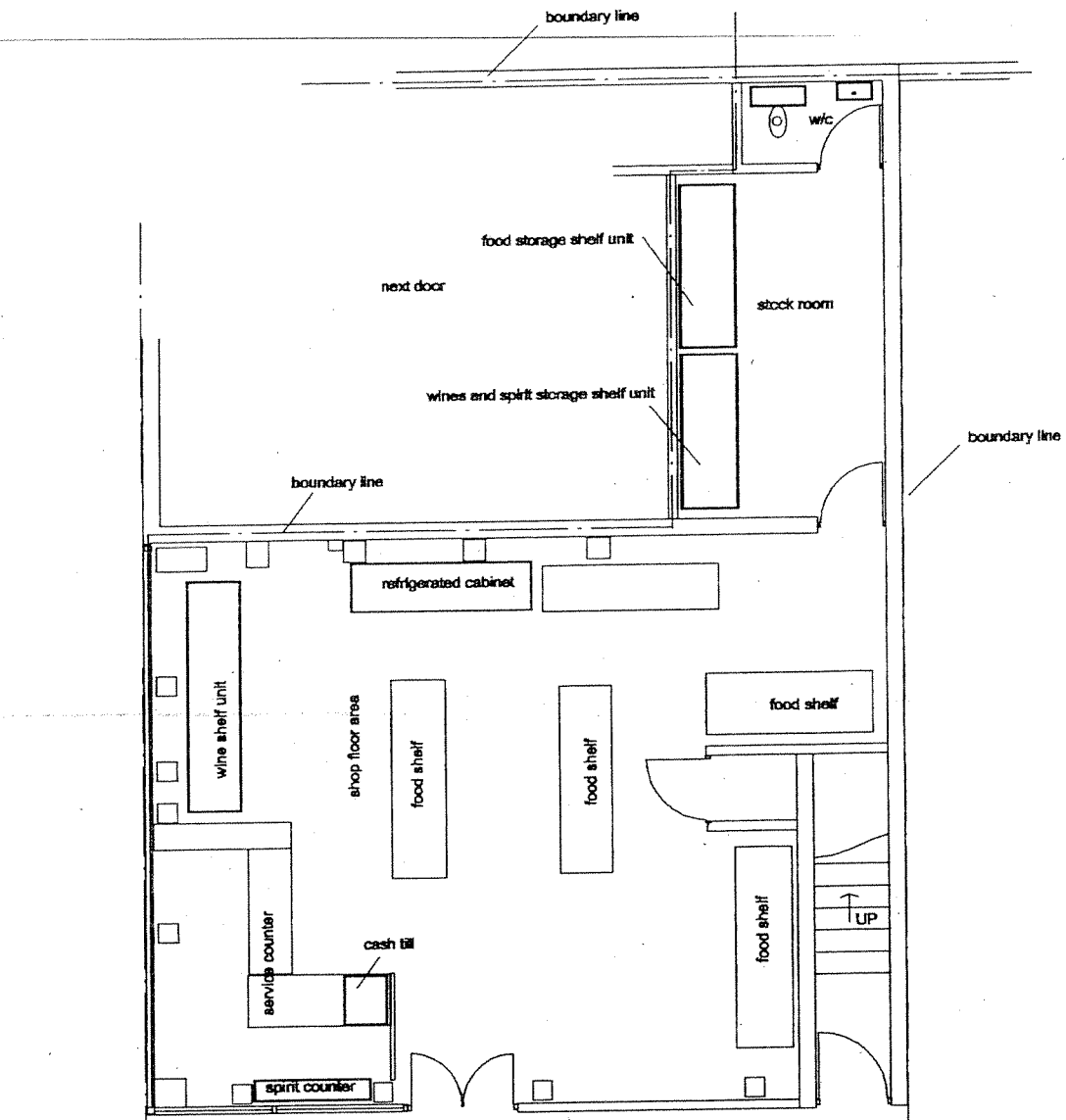
~~ERDAL GUNDUZ~~

Date

15/5/06





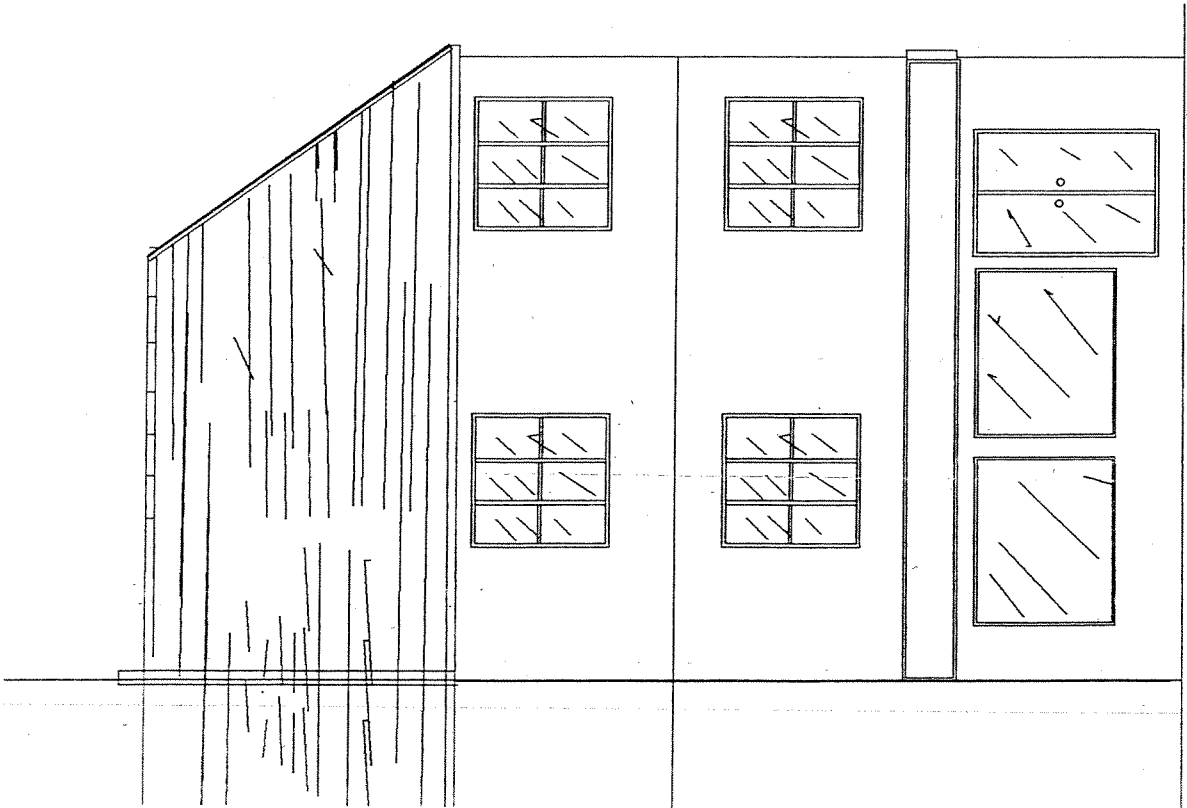


PROPOSED GROUND FLOOR PLAN  
SCALE 1:100

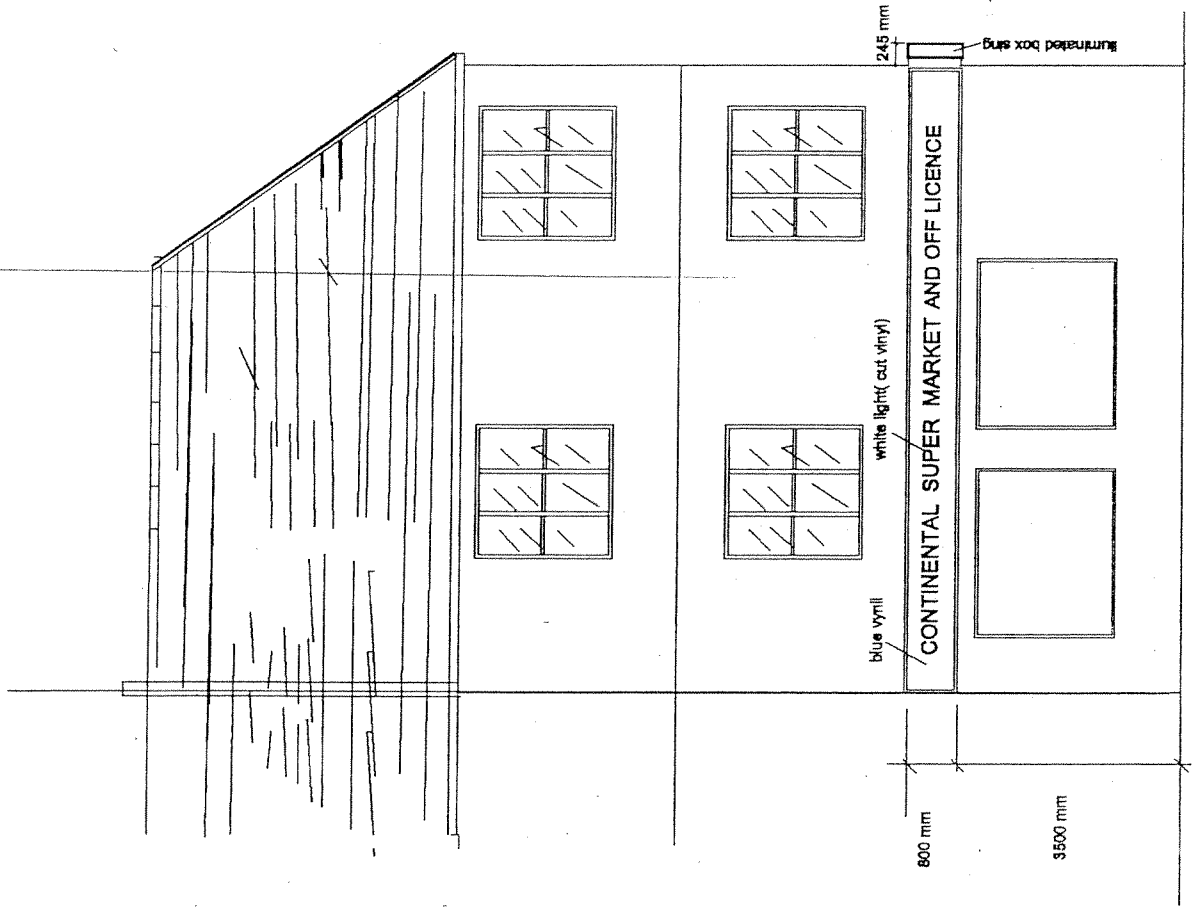
four court

boundary line

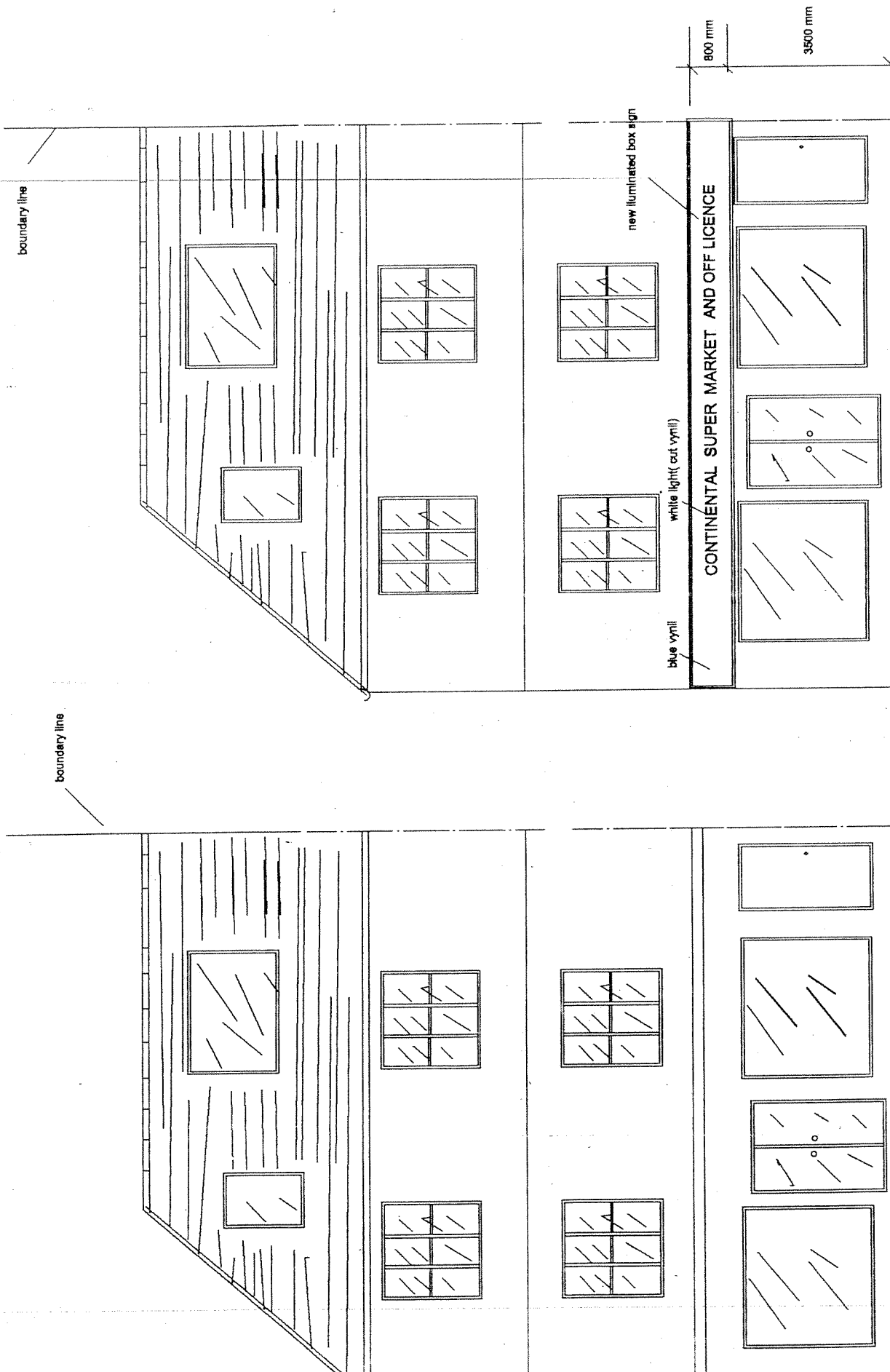
PROJECT : PROPOSED ILLUMINATED SIGN  
SITE: 90 TRINITY ROAD LONDON N.22.8.Y.B.  
SCALE: AS SHOWN



EXISTING SIDE ELEVATION  
SCALE 1:100



PROPOSED SIDE ELEVATION  
SCALE 1:100



PROJECT : PROPOSED ILLUMINATED SIGN  
 SITE: 90 TRINITY ROAD LONDON N.22.8.Y.B.  
 SCALE: AS SHOWN

PROPOSED FRONT ELEVATION  
 SCALE 1:100

EXISTING FRONT ELEVATION  
 SCALE 1:100

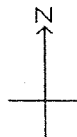
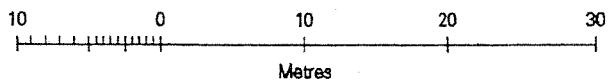


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Centre Coordinates: 530180 191243

National Grid sheet reference at centre of this Siteplan: TQ3091SW

Supplied by: National Map Centre St A  
Serial Number: 01578100

90 Trinity Road  
London  
N22 8YB

MEMORANDUM

**HARINGEY COUNCIL**

Date: 6<sup>th</sup> June 2006      Tel: 5103      My Ref: DB/KB/ANN/LIC      Your Ref:  
From: Daliah Barrett      To: See below  
Licensing  
Section: Enforcement



Building Control  
Food Group  
Health & Safety  
Noise Team  
Planning  
Planning Enforcement  
Waste Enforcement  
Legal  
Cleansing Dept.  
Trading Standards

**APPLICATION FOR A PREMISES LICENSE – 90 TRINITY ROAD, WOOD GREEN, LONDON, N22 8YB**

Please find enclosed a copy of an application for a Premises License for 90 Trinity Road, Wood Green, London, N22 8YB. Details of the application are as follows

**Supply of Alcohol**  
**Monday to Sunday      0700 to 2300**

All responses must be received within in 21 days, even if you have no comments a response would still be appreciated.

Daliah Barrett  
Licensing Lead Officer

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Late night refreshment			Will the provision of late night refreshment take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2)
Day	Start	Finish	
Mon			Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/>
Tue			Please give further details here (please read guidance note 3)
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)
Thur			
Fri			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			
Sun			

4-8 M

Supply of alcohol			Will the sale of alcohol be for consumption - please tick box <input checked="" type="checkbox"/> (please read guidance note 7)
Day	Start	Finish	
Mon	7am	11pm	On the premises <input type="checkbox"/> Off the premises <input checked="" type="checkbox"/> Both <input type="checkbox"/>
	7:00	23:00	
Tue	7am	11pm	State any seasonal variations for the supply of alcohol (please read guidance note 4)
	7:00	23:00	
Wed	7am	11pm	
	7:00	23:00	
Thur	7am	11pm	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)
	7:00	23:00	
Fri	7am	11pm	
	7:00	23:00	
Sat	7am	11pm	
	7:00	23:00	
Sun	7am	11pm	
	7:00	23:00	

**APP 2**

**REPRESENTATION FROM RESIDENTS**



## LICENSING ACT 2003 - REPRESENTATION FORM

To make a representation in respect of an application for a Premises Licence or Club Premises Certificate please complete the following form. For representations to be considered relevant they must relate to one or more of the four "Licensing Objectives" (listed below).

Please note all representations will be made available for applicants to view. If you make a representation objecting to the application it is likely that you will be called upon to attend a hearing and present your objection before a Licensing Committee.

### Personal Details

Name NAOMI RICH

Address 16A WHITTINGTON RD  
LONDON

Postcode N22 8YD

### Licence application you wish to make a representation on

*You do not need to answer all of the questions in this section, but please give as much information as you can.*

Application Number DB/KB/ANN/LIC

Name of Licensee DA LIAW BAKER TJ

Name of Premises (if applicable) .....

Premises Address (where the Licence will take effect) 90 TRINITY  
RD, WOOD GREEN, LONDON

Postcode N22 8YB

### Reason/s for representation

*Under the Licensing Act 2003, for a representation to be relevant it must be one that is about the likely effect of the application on the promotion of the four licensing objectives. Any representations that are considered to be vexatious or frivolous will not be considered (please see Haringey Council's leaflet **Variations, Representations and Appeals for Premises Licences and Club Premises Certificates**).*

*Fill in reason/s for your representation in the space provided under each Licensing Objective it relates to.*



The Prevention of Crime and Disorder

THIS AREA HAS A GROWING NUMBER OF SIMILAR SHOPS AND A GROUPS OF PEOPLE HANGING OUTSIDE THEM. THIS SHOP IS POSITIONED AT THE TOP OF AN ALLEYWAY THAT, OVER THE PAST 12 MONTHS, HAS PROVIDED ACCESS FOR NUMEROUS ~~Public Safety~~ BREAKINS TO THE FLATS ON WHITTINGTON ROAD. I WOULD NOT WANT TO SEE ATTENTION BROUGHT TO THE ALLEYWAY IN LIGHT OF THIS.

The Prevention of Public Nuisance

The Protection of Children from Harm

I, NASIM RICH, hereby declare that all information I have submitted is true and correct.

Signed:



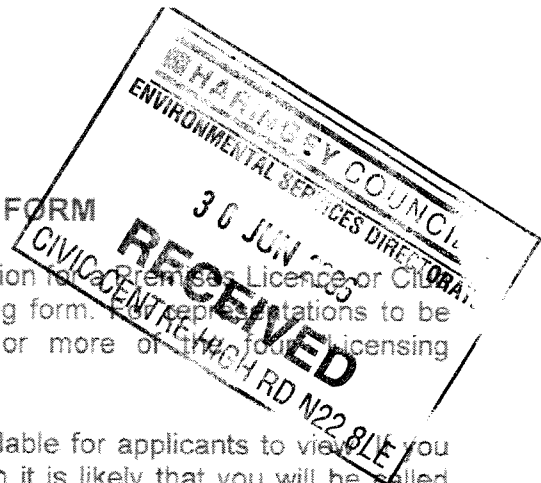
Date:

21/06/06

Please send completed form to:

Haringey Council Licensing Team  
2<sup>nd</sup> Floor  
Civic Centre  
High Road  
Wood Green  
London  
N22 8LE

**LICENSING ACT 2003 - REPRESENTATION FORM**



To make a representation in respect of an application for a Premises Licence or Club Premises Certificate please complete the following form. For representations to be considered relevant they must relate to one or more of the four Licensing Objectives" (listed below).

Please note all representations will be made available for applicants to view. If you make a representation objecting to the application it is likely that you will be called upon to attend a hearing and present your objection before a Licensing Committee.

**Personal Details**

Name..... Ms. D. Lockett .....

Address..... 3 Whittington Rd .....

.....

Postcode N22 8TS

**Licence application you wish to make a representation on**

*You do not need to answer all of the questions in this section, but please give as much information as you can:*

Application Number..... ? .....

Name of Licensee..... } Do not have these details.

Name of Premises (if applicable)..... }

Premises Address (where the Licence will take effect).....

..... 90 Trinity Road .....

.....

Postcode..... N22 8M3

**Reason/s for representation**

*Under the Licensing Act 2003, for a representation to be relevant it must be one that is about the likely effect of the application on the promotion of the four licensing objectives. Any representations that are considered to be vexatious or frivolous will not be considered (please see Haringey Council's leaflet **Variations, Representations and Appeals for Premises Licences and Club Premises Certificates**).*

*Fill in reason/s for your representation in the space provided under each Licensing Objective it relates to.*

1) The Prevention of Crime and Disorder

I believe that the sale of alcohol for off-site consumption will increase the amount of people loitering in the area, disposing of bottles in residents gardens and using foliage areas to urinate in/vomit.

Public Safety

2) I believe <sup>see 1)</sup> that the sale of alcohol for off-site consumption between 7-11pm will increase the risk of theft from residents as well as increase in attraction of numbers of the public to the area who are prepared to take risks to ~~real-achieve outcomes~~ <sup>is. stabbing @ off-licence @</sup>

The Prevention of Public Nuisance

3) as per 1).  
I believe that the sale of alcohol for off-site consumption <sup>7-11pm</sup> will increase the already high level of noise levels after 11pm at the top and <sup>Whittington Rd @ Lost 45</sup> of the street.

The Protection of Children from Harm

4) A shop selling alcohol - which is a thoroughfare for 3 main schools in the area will increase in the risk of theft for youngsters passing (mobile phone). It will also encourage the gathering of youths who are out of school / college in gangs, threatening younger children. (as already is the case at Dornford Park as reported in the Times 27.6.06.)

I, Donna Lockett, hereby declare that all information I have submitted is true and correct.

Signed: Donna Lockett

Date: 24.6.06

Please send completed form to:

Haringey Council Licensing Team  
2<sup>nd</sup> Floor  
Civic Centre  
High Road  
Wood Green  
London  
N22 8LE

## LICENSING ACT 2003 - REPRESENTATION FORM

To make a representation in respect of an application for a Premises Licence or Club Premises Certificate please complete the following form. For representations to be considered relevant they must relate to one or more of the four "Licensing Objectives" (listed below).

Please note all representations will be made available for applicants to view. If you make a representation objecting to the application it is likely that you will be called upon to attend a hearing and present your objection before a Licensing Committee.

Personal Details	
Name	CAROLINE SIMPSON
Address	9 Whittington Rd Bourds Green N2
Postcode	N22 8YS

Licence application you wish to make a representation on	
<i>You do not need to answer all of the questions in this section, but please give as much information as you can:</i>	
Application Number	(no Ref no. on the App. / was sent a copy of.)
Name of Licensee	ERDAL CELERI
Name of Premises (if applicable)	
Premises Address (where the Licence will take effect)	90 TRINITY RD. BOURDS GREEN
Postcode	N22 8YB. (the app says Wood Green - but it's Bourds Green)

Reason/s for representation
<i>Under the Licensing Act 2003, for a representation to be relevant it must be one that is about the likely effect of the application on the promotion of the four licensing objectives. Any representations that are considered to be vexatious or frivolous will not be considered (please see Haringey Council's leaflet <b>Variations, Representations and Appeals for Premises Licences and Club Premises Certificates</b>).</i>
<i>Fill in reason/s for your representation in the space provided under each Licensing Objective it relates to.</i>

**The Prevention of Crime and Disorder**

1. We already suffer from people going home drunk along the road in the evenings, and from many cars being driven fast along this road late in the evening. I believe that both of these things would get worse.

2. The area around the end of the pathway that comes out next to the garage and around the bridge often has undesirable people hanging around in the evenings and at night. People are routinely begging and asking passers by for cigarettes. Additional availability of alcohol, and the place to buy it, will, I believe, only make this worse.

3. Many of the law and order problems on streets and in public places today are caused by people who have drunk too much. It is a further encouragement to greater drinking to have yet another outlet when there are already so many in the near vicinity.

4. There is an on/off problem of cars and drug dealers at the end of this road, opposite and near my house, and I believe that this proposed facility will only make this worse also.

5. There are at least 4 shops which sell alcohol all day long near Bounds Green Tube, (about 250 metres away) and Michael at the shop over the Bounds Green Road is only 65 metres away. There is also the pub, which has extended hours 70 metres away, and there are the two shops in Myddleton Road, the nearest of which is about 300 metres. It is therefore no additional convenience to local residents.

+ Public Safety

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Public Nuisance

**The Protection of Children from Harm**

I, Caroline SIMPSON, hereby declare that all information I have submitted is true and correct.

Signed:

Caroline Simpson

Date:

June 20th 2006

Please send completed form to:

Haringey Council Licensing Team  
2<sup>nd</sup> Floor  
Civic Centre  
High Road  
Wood Green  
London  
N22 8LE