

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 LAXMI DEVELOPMENTS 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

Postal address of premises or, if none, ordnance survey map reference or description
59 High Street
Post town Edgware Postcode HA8 7DD
Telephone number at premises (if any)
Non-domestic rateable value of premises £ 24,250

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- a) an individual or individuals * [] please complete section (A)
b) a person other than an individual *
i. as a limited company [x] 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 in Wales please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England 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)

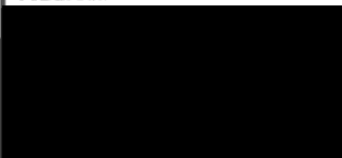
Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
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
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 LAXMI DEVELOPMENTS LTD
Address 
Registered number (where applicable) 07331336
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited company
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
1	8	04
2	0	14

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

DD	MM	YYYY
±	±	±
±	±	±

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

Bar/Restaurant located adjacent to office building and set back from main road with patio area to the front.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

N/A

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 any that apply

- a) plays (if ticking yes, fill in box A)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)
- f) recorded music (if ticking yes, fill in box F)
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)

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

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

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 6)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors <input type="checkbox"/>
					Outdoors <input type="checkbox"/>
					Both <input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 4)		
Thur			<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> (please read guidance note 5)		
Fri					
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 6)			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors <input type="checkbox"/>
				Outdoors <input type="checkbox"/>
Day	Start	Finish		Both <input type="checkbox"/>
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 to those listed in the column on the left, please list (please read guidance note 5)	
Sat				
Sun				

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Tue			
Wed			
Thur			<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> (please read guidance note 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)	Both	<input type="checkbox"/>
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Thur					
Fri			<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> (please read guidance note 5)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (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 performance of live music (please read guidance note 4)	
Thur						
Fri					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 (please read guidance note 5)	
Sat						
Sun						

F

Recorded music Standard days and timings (please read guidance note 6)			Will the playing of recorded music 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	Please give further details here (please read guidance note 3)		
Mon	12:00	00:00			
Tue	12:00	00:00			
Wed	12:00	00:00	State any seasonal variations for the playing of recorded music (please read guidance note 4)		
Thur	12:00	00:00			
Fri	00:00	02:00	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 (please read guidance note 5)		
	12:00	00:00			
Sat	00:00	02:00			
	12:00	00:00			
Sun	00:00	02:00			
	12:00	00:00			

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 (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 performance of dance (please read guidance note 4)			
Thur			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 (please read guidance note 5)			
Fri						
Sat						
Sun						

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	Will this entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			Please give further details here (please read guidance note 3)		
Wed					
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)		
Fri					
Sat			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 (please read guidance note 5)		
Sun					


I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon	23:00	00:00			
Tue	23:00	00:00	State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Wed	23:00	00:00			
Thur	23:00	00:00	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 (please read guidance note 5)		
Fri	00:00	02:00			
	23:00	00:00			
Sat	00:00	02:00			
	23:00	00:00			
Sun	00:00	02:00			
	23:00	00:00			

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	12:00	00:00			
Tue	12:00	00:00			
Wed	12:00	00:00			
Thur	12:00	00:00			
Fri	00:00	01:30			
	12:00	00:00			
Sat	00:00	01:30			
	12:00	00:00			
Sun	00:00	01:30			
	12:00	00:00			
			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 (please read guidance note 5)		

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

Name Rajinder Singh
Address 
Personal licence number (if known) APPLICATION IN PROGRESS
Issuing licensing authority (if known)

K

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

None

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			<u>State any seasonal variations</u> (please read guidance note 4)
Day	Start	Finish	
Mon	12:00	00:00	<u>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</u> (please read guidance note 5)
Tue	12:00	00:00	
Wed	12:00	00:00	
Thur	12:00	00:00	
Fri	00:00	02:00	
	12:00	00:00	
Sat	00:00	02:00	
	12:00	00:00	
Sun	00:00	02:00	
	12:00	00:00	

M Describe the steps you intend to take to promote the four licensing objectives:

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

Any off-sales of alcohol after 21:00 shall only be undertaken in conjunction with the purchase of a meal.

A Closed Circuit Television system shall be installed at the premises with cameras located at positions indicated on the approved plan. The cameras shall be capable of capturing images at the normal ambient light level within the premises.

Images from all cameras shall be recorded whilst licensable activities are being conducted and retained for a minimum period of 28 days from the date recorded.

The CCTV recording system shall be capable of producing copies of recorded images in a format that can be viewed on a computer or domestic-quality video reproduction equipment.

A log book shall be maintained at the premises which shall be used to record details of any incidents that come to the attention of the staff or management that have an impact upon the licensing objectives, including complaints in relation to noise, visits by enforcement officers, attempts to purchase alcohol by persons who appear to be under age and ejections from the premises. The log book shall be reviewed on a regular basis and where corrective action is taken, this shall be noted next to the entry.

Staff engaged in the sale of alcohol shall be provided with training in relation to the licensing objectives and the requirements in relation to alcohol sales. This training shall be to a recognised level, such as that provided by the British Institute of Innkeeping, the Licensing Authority or a Trading Standards department. This training shall be refreshed at 6-monthly intervals or more frequently if demonstrated to be necessary. A record of training shall be maintained in a log book at the premises, which shall be kept for a period of no less than 12 months from the date that the record is made.

b) The prevention of crime and disorder

On Saturday and Sunday evenings, security staff shall be engaged at the public entrance to the premises from 21:00 until 15 minutes after the premises close. Details of the persons on duty shall be logged in a diary or incident book, which shall be retained at the premises for at least two calendar months from the date of the record being made. At other times, the need for security staff will be assessed having regard to advice provided in writing by the police. Where this assessment indicates that security staff should be engaged at a specific time, this will accordingly be implemented.

c) Public safety

All matters of public safety are considered to be met by virtue of the provisions of the Health and Safety at Work etc Act 1974 and the Regulatory Reform (Fire Safety) Order 2005

d) The prevention of public nuisance

Noise from licensable activities at the premises shall be controlled so as not to give rise to a public nuisance. Measures to achieve this standard may include monitoring of the area by staff or keeping doors and windows closed unless being used for access/egress.

The smoking area shall regularly be monitored by staff to ensure that noise from patrons is minimised.

Door staff engaged at the premises shall encourage patrons to move away from the area as they leave, having respect for local residents.

Signs shall be displayed at the public exit from the premises asking patrons to leave quietly and with respect to local residents.

e) The protection of children from harm

A 'Challenge 21' scheme shall be adopted whereby any person who attempts to purchase alcohol appears to be under the age of 21 will be required to produce satisfactory proof of age identification.

From 21:00 on Saturday and Sunday, no person aged under 18 years shall be permitted to enter the premises unless they are accompanied by a parent or guardian. A notice to this effect will be displayed at the public entrance.

Checklist:

Please tick to indicate agreement

- 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 designated 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 SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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	19 March 2014
Capacity	Solicitor for the Applicant

For joint applications, signature of 2nd applicant or 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	

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



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 or 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, each of the applicant or their respective agent 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

RAJINDER KUMAR SINGH

I
[full name of prospective premises supervisor]

of



.....
[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 new Premises Licence

.....
[type of application]

by

Laxmi Developments Limited

.....
[name of applicant]

relating to a premises licence

.....
[number of existing licence, if any]

for

Classy Junction
59 High Street
Edgware
Middlesex
HA8 7DD

.....
[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

Laxmi Developments Ltd

[name of applicant]

concerning the supply of alcohol at

Classy Junction
59 High Street
Edgware
Middlesex
HA8 7DD

[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

Awaiting issue

[insert personal licence number, if any]

Personal licence issuing authority

London Borough of Barnet, Licensing Department, North London Business Park,
Oakleigh Road South, London N11 1NP Telephone No: 020 8359 2000

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

Signed



Name (please print)

RAJINDER KUMAR SINGH

Date

14.3.14