

Harrow Council Application for a premises licence Licensing Act 2003

For help contact licensing@harrow.gov.uk Telephone: 020 8901 2600

04 OCT 2012

TIME

* required information Section 1 of 22 You can save the form at any time and resume it later. You do not need to be logged in when you resume. This is the unique reference for this System reference application generated by the system. You can put what you want here to help you Your reference Alcohol Premises Licence track applications if you make lots of them. It is passed to the authority. Put "no" if you are applying on your own Are you an agent acting on behalf of the applicant? behalf or on behalf of a business you own or C Yes No work for. **Applicant Details** * First name Lynne * Family name Gould * E-mail Include country code. Main telephone number Other telephone number ☐ Indicate here if you would prefer not to be contacted by telephone Are you: Applying as a business or organisation, including as a sole trader A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are Applying as an individual applying so you can be employed, or for somé other personal reason, such as following a hobby. **Applicant Business** * Is your business registered Yes No in the UK with Companies House? 2828013 * Registration number If your business is registered, use its * Business name Reflex Office Products Ltd registered name. Put "none" if you are not registered for VAT. * VAT number * Legal status Private Limited Company RECEIVED AT

Continued from previous page		
•		
* Your position in the business	Director	
Home country	United Kingdom	The country where the headquarters of your business is located.
Registered Address		Address registered with Companies House.
* Building number or name	Unit 11 Barratt Way Industrial Estate	
* Street	Tudor Road	
District		
* City or town	Harrow	
County or administrative area	Middlesex]
* Postcode	HA3 5TJ	
* Country	United Kingdom	
The information given here will be pre-filled in future form		
Section 2 of 22		
PREMISES DETAILS		
I/we, as named in section 1, ap described in section 2 below (t in accordance with section 12	ply for a premises licence under section 17 of the premises) and I/we are making this applicat of the Licensing Act 2003.	he Licensing Act 2003 for the premises ion to you as the relevant licensing authority
Premises Address		
Are you able to provide a post	al address, OS map reference or description of 1	the premises?
♠ Address ← OS ma	p reference C Description	
Postal Address Of Premises		
Building number or name	Unit 11 Barratt Way Industrial Estate]
Street	Tudor Road	
District		
City or town	Harrow	
County or administrative area	Middlesex	
Postcode	HA3 5TJ	_
Country	United Kingdom	
Further Details		
Telephone number		

Cont	inued from previous page	Non-domestic rateable value of premises (£)	
24,0	00		
Secti	ion 3 of 22		
APPI	ICATION DETAILS		
In wh	nat capacity are you applyi	ng for the premises licence?	
	An individual or individu	als	
\boxtimes	A limited company		
	A partnership		
	An unincorporated asspe	iation	
	A recognised club		
	A charity		
	The proprietor of an educ	cational establishment	
	A health service body		
	· ·	ed under part 2 of the Care Standards Act n independent hospital in Wales	
	Social Care Act 2008 in re	ed under Chapter 2 of Part 1 of the Health and espect of the carrying on of a regulated ing of that Part) in an independent hospital in	
	The chief officer of police of a police force in England and Wales		
	Other (for example a statutory corporation)		
Cont	firm The Following		
\boxtimes	I am carrying on or propo the use of the premises fo	osing to carry on a business which involves or licensable activities	
] I am making the application pursuant to a statutory function		
	I am making the application pursuant to a function discharged by virtue of Her Majesty's prerogative		
Secti	on 4 of 22		
NON	INDIVIDUAL APPLICANT	S	
		ddress of applicant in full. Where appropriate give any registered number. In the case of a ure (other than a body corporate), give the name and address of each party concerned.	
Non	Individual Applicant's N	ame	
Nam	e	Reflex Office Products Ltd	

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Details	
Registered number (where applicable)	2828013
Description of applicant (for ex	ample partnership, company, unincorporated association etc)
Limited Company	
Address	
Building number or name	Unit 11 Barratt Way Industrial Estate
Street	Tudor Road
District	
City or town	Harrow
County or administrative area	Middlesex
Postcode	HA3 5TJ
Country	United Kingdom
Contact Details	•
E-mail	
Telephone number	
Other telephone number	
	Add another applicant
Section 5 of 22	
OPERATING SCHEDULE	
When do you want the premises licence to start?	01 / 10 / 2012 dd mm yyyy
If you wish the licence to be valid only for a limited period, when do you want it to end	dd mm yyyy
If 5,000 or more people are expected to attend the premises at any one time, state the number expected to attend	
Provide a general description	of the premises

licensing objectives. Where yo	ur application includes off-supplies of alcohol and you intend to provide a place for olies you must include a description of where the place will be and its proximity to the
and store alcohol products in o	ned to office space with two floors. We require the alcohol licence in order to be able to buy our warehouse and sell them on to our customers. Our customers do not come to the nich would be delivered to their offices by our permanent delivery drivers.
Section 6 of 22	
PROVISION OF PLAYS	
Will you be providing plays?	
← Yes	♠ No
Section 7 of 22	
PROVISION OF FILMS	
Will you be providing films?	
← Yes	No No
Section 8 of 22	
PROVISION OF INDOOR SPOR	TING EVENTS
Will you be providing indoor sp	porting events?
← Yes	No No
Section 9 of 22	
PROVISION OF BOXING OR W	RESTLING ENTERTAINMENTS
Will you be providing boxing o	r wrestling entertainments?
	No No
Section 10 of 22	
PROVISION OF LIVE MUSIC	
Will you be providing live musi	c?
← Yes	No No
Section 11 of 22	
PROVISION OF RECORDED MI	JSIC
Will you be providing recorded	music?
← Yes	No No
Section 12 of 22	
PROVISION OF PERFORMANC	ES OF DANCE
Will you be providing performa	inces of dance?
	No
Section 13 of 22	

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Continued from previous p	page	
PROVISION OF ANYTHI	ING OF A SIMILAR DESC	CRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF
Will you be providing ar performances of dance?	•	usic, recorded music or
← Yes	No	
Section 14 of 22		
PROVISION OF FACILIT	IES FOR MAKING MUSI	C
Will you be providing fa	cilities for making music	:?
← Yes	No	
Section 15 of 22		
PROVISION OF FACILIT	IES FOR DANCING	
Will you be providing fa	cilities for dancing?	
← Yes	No	
Section 16 of 22	· · · · · · · · · · · · · · · · · · ·	
PROVISION OF FACILIT MUSIC OR DANCING	TES FOR ENTERTAINME	ENT OF A SIMILAR DESCRIPTION TO THOSE PROVIDED FOR MAKING
Will you be providing fa music or dancing?	cilities similar in nature	to those provided for making
← Yes	No	
Section 17 of 22		
LATE NIGHT REFRESHA	MENT	
Will you be providing la	te night refreshment?	
← Yes	♠ No	
Section 18 of 22		
SUPPLY OF ALCOHOL		· ·
Will you be selling or su	pplying alcohol?	
	← No	
Standard Days And Ti	mings	
MONDAY		Give timings in 24 hour clock.
	Start 06:00	End 18:00 (e.g., 16:00) and only give details for the days
	Start	of the week when you intend the premises End to be used for the activity.
TUESDAY		
	Start 06:00	End 18:00
	Start	End
WEDNESDAY		
	Start 06:00	End 18:00
	Start	End

Continued from previous page			
THURSDAY			
Start	06:00	End 18:00	
Start		End	
FRIDAY			
Start	06:00	End 18:00	
Start		End	
SATURDAY		<u> </u>	•
Start		End	
Start		End	
SUNDAY		<u> </u>	1
Start		End	
Statt		End	
Will the sale of alcohol be for c	onsumption:		I If the sale of alcohol is for consumption on
← On the premises	Off the premises	Both	the premises select on, if the sale of alcohol is for consumption away from the premises select off. If the sale of alcohol is for consumption on the premises and away from the premises select both.
State any seasonal variations			
For example (but not exclusive	ely) where the activity will occ	ur on additional da	ays during the summer months.
Not Applicable			
column on the left, list below			ool at different times from those listed in the on a particular day e.g. Christmas Eve.
Not Applicable			
,			
State the name and details of t licence as premises supervisor	he individual whom you wish	to specify on the	
Name			
First name	Lynne		
Family name	Gould		

Continued from previous page					
Enter the contact's address					
Building number or name					
Street					
District					
City or town					
County or administrative area					
Postcode					
Country					
Personal Licence number (if known)	LN\0000057	782\2012\1			
Issuing licensing authority (if known)	Harrow				1
PROPOSED DESIGNATED PRE	MISES SUPE	RVISOR CON	SENT		
be supplied to the authority? © Electronically, by the pro © As an attachment to this Reference number for consent form (if known)	application	nated premise:	s supervisor		If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.
Section 19 of 22					
ADULT ENTERTAINMENT					
premises that may give rise to Give information about anythi	concern in re ng intended illdren, regar	espect of child to occur at the dless of wheth	ren e premises o er you inter	or ancillary nd childre	y to the use of the premises which may give in to have access to the premises, for example gambling machines etc.
None Applicable				- '	
					•
Section 20 of 22					
HOURS PREMISES ARE OPEN	TO THE PUB	BLIC			
Standard Days And Timings					
MONDAY Start			End		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
Start			End		to be used for the activity

[□] Oueen's Printer and Controller of HMSO 2009

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TUESDAY	, - 3		
10235/11	Start	End	
	Start	End	
WEDNESDAY		processor and the second	
	Start	End	
	Start	End	
THURSDAY			
	Start	End	
	Start	End	
FRIDAY	<u></u>		
	Start	End	
	Start	End	
	Start	Elia	
SATURDAY			
	Start	End	
	Start	End	
SUNDAY			
	Start	End	
	Start	End	
State any seasonal varia	ations		
		cur on additional days during the sum	mer months
	mises are not open to the public.		
Thou Applicable out pier	mises are not open to the public.		:
	Where you intend to use the premise nn on the left, list below	es to be open to the members and gue	ests at different times from
For example (but not ex	clusively), where you wish the activi	ity to go on longer on a particular day	e.g. Christmas Eve.
Not applicable our pren	nises are not open to the public.		
Section 21 of 22			
LICENSING OBJECTIVE	S		
Describe the steps you	intend to take to promote the four li	icensing objectives:	
a) General – all four lice	nsing objectives (b,c,d,e)		

Continued from previous page...

List here steps you will take to promote all four licensing objectives together.

Contact the Police to prevent crime and disorder

Contact Health & Safety in the event of requiring help for Public Safety

Contact Environmental Health for the prevention of Public Nuisance

Ensure all the above and the employees in our premises take responsibility for the protection of children from harm

b) The prevention of crime and disorder

As we are not a retail premises and not open to the general public, only our existing customers will be aware that we will be selling alcohol for their purchase. Alcohol will only be available for purchase by orders placed during office hours. Our Warehouse and Offices are always staffed during working hours and secured and alarmed, with Police response, at all other times.

c) Public safety

We do not open to the general public and will only be supplying alcohol to our existing customer base. No alcohol will be consumed on or near the premises thereby minimising any possible Health & Safety risks.

d) The prevention of public nuisance

We do not open to the general public and will only be supplying alcohol to our existing customer base. No alcohol will be consumed on or near the premises thereby minimising any possible Environmental Health risks.

e) The protection of children from harm

We do not open to the general public and will only be supplying alcohol to our existing customer base. No alcohol will be consumed on or near the premises thereby minimising any possible risk of harm to children.

Section 22 of 22

PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card. Premises Licence Fees are determined by the non domestic rateable value of the premises.

To find out a premises non domestic rateable value go to the Valuation Office Agency site at http://www.voa.gov.uk/business_rates/index.htm

Band A - No RV to £4300	£100.00
Band B - £4301 to £33000	£190.00
Band C - £33001 to £8700	£315.00
Band D - £87001 to £12500	£450.00°

Band E - £125001 and over £635.00*

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*If the premises rateable value is in Bands D or E and the premises is primarily used for the consumption of alcohol on the premises then your are required to pay a higher fee

Band D - £87001 to £12500

£900.00

Band E - £125001 and over

£1,905.00

There is an exemption from the payment of fees in relation to the provision of regulated entertainment at church halls, chapel halls or premises of a similar nature, village halls, parish or community halls, or other premises of a similar nature. The costs associated with these licences will be met by central Government. If, however, the licence also authorises the use of the premises for the supply of alcohol or the provision of late night refreshment, a fee will be required.

Schools and sixth form colleges are exempt from the fees associated with the authorisation of regulated entertainment where the entertainment is provided by and at the school or college and for the purposes of the school or college.

If you operate a large event you are subject to ADDITIONAL fees based upon the number in attendance at any one time

Capacity 5000-9999	£1,000.00
Capacity 10000 -14999	£2,000.00
Capacity 15000-19999	£4,000.00
Capacity 20000-29999	£8,000.00
Capacity 30000-39000	£16,000.00
Capacity 40000-49999	£24,000.00
Capacity 50000-59999	£32,000.00
Capacity 60000-69999	£40,000.00
Capacity 70000-79999	£48,000.00
Capacity 80000-89999	£56,000.00
Capacity 90000 and over	£64,000.00
* Fee amount (£)	190.00

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ATTACHMENTS		
	Premises plan	
	Consent form of premises supervisor	
AUTHORITY POSTAL ADDRES	SS	
Address		
Building number or name	FREEPOST HA4 343	
Street	PO Box 18	
District	Civic Centre, Station Road	1
City or town	line4	1
County or administrative area		
Postcode	HA1 2XY	
Country	Middlesex	
DECLARATION		
	nce, liable on conviction to a fine up to level 5 on a false statement in or in connection with this ap	
☐ Ticking this box indica	tes you have read and understood the above de	claration
This section should be comple behalf of the applicant?"	eted by the applicant, unless you answered "Yes"	to the question "Are you an agent acting on
* Full name		
* Capacity		
Date (dd/mm/yyyy)		
	Add another signatory	

Consent of individual to being specified as premises supervisor

LYNNE TRACEY GOULD
[full name of prospective premises supervisor]
[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
APREMISES LICENCE [type of application]
by LINNE GOULD [name of applicant]
relating to a premises licence[number of existing licence, if any]
for REFLEX OFFICE PRODUCTS LTD,
UNITH BARRATT WAY INDUSTRIAL
[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 LYNNE GOULD [name of applicant]
concerning the supply of alcohol at UNITH BARRATT WAY
INDUSTRIAL ESTATE, TUDOR ROAD
[name and address of premises to which application relates].
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 LN 00005782 2012 [insert personal licence number, if any]
Personal licence issuing authority HARPON (0208 736 6257 [insert name and address and telephone number of personal licence issuing authority, if
signed
LINNE GOWD name (please print)
1/10/2012 dated