

Harrow Application for a premises licence Licensing Act 2003

For help contact licensing@harrow.gov.uk

Telephone: 020 8901 2600

* required information

Section 1 of 19		
You can save the form at any	time and resume it later. You do not need to b	oe logged in when you resume.
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference	PRE-LIC-APP-396-398-RYN-LNE	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
Are you an agent acting on b	pehalf of the applicant?	Put "no" if you are applying on your own behalf or on behalf of a business you own or
• Yes	No	work for.
Applicant Details		
* First name	Satheeskumar	
* Family name	Kanapathippillai	
* E-mail		
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if the ap	olicant would prefer not to be contacted by tel	ephone
Is the applicant:		
 Applying as a business 	or organisation, including as a sole trader	A sole trader is a business owned by one
 Applying as an individ 	ual	person without any special legal structure. Applying as an individual means the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.

Continued from previous page			
Address			
* Building number or name	396-398		
* Street	Rayners Lane		
District			
* City or town	Pinner		
County or administrative area	Middlesex		
* Postcode	HA5 5DY		
* Country	United Kingdom		
Agent Details			
* First name	Joshua Simons & Associates		
* Family name	Limited		
		Include country code.	
Other telephone number			
☐ Indicate here if you wou	ld prefer not to be contacted by telephone		
Are you:			
An agent that is a busine	ess or organisation, including a sole trader	A sole trader is a business owned by one person without any special legal structure.	
A private individual acting as an agent			
Agent Business			
* Is your business registered in the UK with Companies House?	Yes		
* Registration number	8030680		
* Business name	Joshua Simons & Associates Limited	If your business is registered, use its registered name.	
* VAT number GB	154176021	Put "none" if you are not registered for VAT.	
* Legal status	Private Limited Company		
* Your position in the business	Proprietor		
Home country	United Kingdom	The country where the headquarters of your business is located.	

Continued from previous page		
Agent Registered Address		Address registered with Companies House.
* Country	United Kingdom	
Section 2 of 19		
PREMISES DETAILS		
	ply for a premises licence under section 17 of the premises) and I/we are making this application the Licensing Act 2003.	
Premises Address		
Are you able to provide a post	al address, OS map reference or description of t	he premises?
AddressOS ma	p reference O Description	
Postal Address Of Premises		
Building number or name	396-398	
Street	Rayners Lane	
District		
City or town	Pinner	
County or administrative area	Middlesex	
Postcode	HA5 5DY	
Country	United Kingdom	
Further Details		
Telephone number		
Non-domestic rateable value of premises (£)	31,250	
		•

Secti	on 3 of 19				
APPL	ICATION DETAILS				
In wh	nat capacity are you apply	ing for the premises licence?			
\boxtimes	An individual or individuals				
	A limited company				
	A partnership				
	An unincorporated associ	ciation			
	A recognised club				
	A charity				
	The proprietor of an edu	cational establishment			
	A health service body				
	_	ed under part 2 of the Care Standards Act in independent hospital in Wales			
	A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England				
	The chief officer of police of a police force in England and Wales				
	Other (for example a statutory corporation)				
Conf	firm The Following				
\boxtimes	I am carrying on or proposing to carry on a business which involves the use of the premises for 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 19				
INDI	VIDUAL APPLICANT DET	AILS			
	licant Name e name the same as (or sin	nilar to) the details given in section one?	If "Yes" is selected you can re-use the details		
•	Yes		from section one, or amend them as required. Select "No" to enter a completely new set of details.		
First	First name Satheeskumar				
Fami	ily name	Kanapathippillai			
Is the	e applicant 18 years of age	e or older?			
•	Yes	○ No			

Continued from previous page			
Applicant Postal Address			
Is the address the same as (or s	imilar to) the address given in section one?	If "Yes" is selected you can re-use the details	
Yes	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.	
Building number or name	396-398		
Street	Rayners Lane		
District			
City or town	Pinner		
County or administrative area	Middlesex		
Postcode	HA5 5DY		
Country	United Kingdom		
Applicant Contact Details			
Are the contact details the sam	ne as (or similar to) those given in section one?		
Yes	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.	
Telephone number			
Other telephone number			
	Add another applicant		
Section 5 of 19			
OPERATING SCHEDULE			
When do you want the premises licence to start?	28 / 04 / 2014 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 yyyyy			
Provide a general description of 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.			
The premises consist of two single front shops that are being joined together by the removal of an internal partition wall to create a double fronted premises. The premises is to be a grocery shop with off licence subject to a licence being granted.			
The application proposed the retail off sale of alcohol Mondays to Sundays inclusive from 08:00 until 00:00. The premises propose to open from 07:00 until 00:15.			

Continued from previous page	
If 5,000 or more people are	part of the operating schedule contained in this application for a new premises licence.
expected to attend the	
premises at any one time,	
state the number expected to attend	
Section 6 of 19	
PROVISION OF PLAYS	
Will you be providing plays?	
○ Yes	No
Section 7 of 19	
PROVISION OF FILMS	
Will you be providing films?	
○ Yes ● 1	No
Section 8 of 19	
PROVISION OF INDOOR SPORTING	G EVENTS
Will you be providing indoor sporti	ng events?
○ Yes	No
Section 9 of 19	
PROVISION OF BOXING OR WREST	TLING ENTERTAINMENTS
Will you be providing boxing or wre	estling entertainments?
○ Yes	No
Section 10 of 19	
PROVISION OF LIVE MUSIC	
Will you be providing live music?	
○ Yes ● 1	No
Section 11 of 19	
PROVISION OF RECORDED MUSIC	
Will you be providing recorded mus	sic?
○ Yes ● 1	No
Section 12 of 19	
PROVISION OF PERFORMANCES O	OF DANCE
Will you be providing performances	s of dance?
○ Yes	No
Section 13 of 19	
PROVISION OF ANYTHING OF A SI DANCE	IMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF
Will you be providing anything simi	ilar to live music, recorded music or

Continued from previous	page				○ Yes	•	No
Section 14 of 19							
LATE NIGHT REFRESHM	MENT						
Will you be providing la	te night	refreshment?					
○ Yes	(● No					
Section 15 of 19							
SUPPLY OF ALCOHOL							
Will you be selling or su	pplying	alcohol?					
Yes		No					
Standard Days And Tir	mings						
MONDAY					Give timings in 24 hour clock.		
	Start	08:00	End	00:00	(e.g., 16:00) and only give det	ails f	
	Start		End		of the week when you intend to be used for the activity.	the	premises
THECDAY					to be used for the activity.		
TUESDAY	s [00.00			
	Start (08:00	End	00:00			
	Start		End				
WEDNESDAY							
	Start	08:00	End	00:00			
	Start		End				
THURSDAY	_						
777075777	Start	08:00	End	00:00			
		00.00		00.00			
	Start		End				
FRIDAY	_						
	Start (08:00	End	00:00			
	Start		End				
SATURDAY							
	Start	08:00	End	00:00			
	Start		End				
SUNDAY	L						
JUNDAT	C+ [7	08-00	FJ	00.00			
	Start	00:00	End	00:00			
	Start		End				

Continued from previous page					
Will the sale of alcohol be for o	Will the sale of alcohol be for consumption: If the sale of alcohol is for consumption the premises select on if the sale of all of al				
On the premises	Off the premisesBoth	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 occur on additional da	ays during the summer months.			
Not applicable.					
Non-standard timings. Where column on the left, list below	the premises will be used for the supply of alcoh	nol at different times from those listed in the			
For example (but not exclusive	ely), where you wish the activity to go on longer	on a particular day e.g. Christmas Eve.			
Not applicable.					
State the name and details of licence as premises supervisor	the individual whom you wish to specify on the				
Name					
First name	Satheeskumar				
Family name	Kanapathippillai				
Enter the contact's address					
Country	United Kingdom				
Personal Licence number (if known)	LBHIL0469				
Issuing licensing authority (if known)	Hillingdon Council				

Continued from previous p	page		
PROPOSED DESIGNATI	ED PREMISES SUPERVIS	SOR CONSENT	
How will the consent fo be supplied to the auth		ignated premises superviso	r
Electronically, by t	the proposed designated	d premises supervisor	
As an attachment	to this application		
Reference number for c form (if known)	DPS-CON-S-KAN	IAPATHIPPILLAI	If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.
Section 16 of 19			
ADULT ENTERTAINME	NT		
premises that may give Give information about	rise to concern in respectantly anything intended to oc	ct of children ccur at the premises or ancil	nent or matters ancillary to the use of the lary to the use of the premises which may give
-		s of whether you intend child s for restricted age groups e	dren to have access to the premises, for example tc gambling machines etc.
No adult entertainment	is to be provided from t	he premises.	
Section 17 of 19			
HOURS PREMISES ARE	OPEN TO THE PUBLIC		
Standard Days And Ti	mings		
MONDAY			Give timings in 24 hour clock.
	Start 07:00	End 00:15	(e.g., 16:00) and only give details for the days
	Start	End	of the week when you intend the premises to be used for the activity.
TUESDAY			
	Start 07:00	End 00:15	
	Start	End	
WEDNESDAY			
	Start 07:00	End 00:15	
	Start	End	
THURSDAY			
	Start 07:00	End 00:15	
	Start	End	
FRIDAY			
	Start 07:00	End 00:15	
	Start	End	

Continued from previous page
SATURDAY
Start 07:00 End 00:15
Start End
SUNDAY
Start 07:00 End 00:15
Start End End
State any seasonal variations
For example (but not exclusively) where the activity will occur on additional days during the summer months.
None
Non standard timings. Where you intend to use the premises to be open to the members and guests at different times from
those listed in the column on the left, list below
For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
None
Section 18 of 19
Section 18 of 19 LICENSING OBJECTIVES
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LICENSING OBJECTIVES Describe the steps you intend to take to promote the four licensing objectives:
Describe the steps you intend to take to promote the four licensing objectives: a) General – all four licensing objectives (b,c,d,e) List here steps you will take to promote all four licensing objectives together. CCTV
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Describe the steps you intend to take to promote the four licensing objectives: a) General – all four licensing objectives (b,c,d,e) List here steps you will take to promote all four licensing objectives together. CCTV Fire fighting equipment Customer Notices Challenge 21 Scheme b) The prevention of crime and disorder CCTV to be installed and in operation. CCTV recordings shall be maintained for 31 days.
Describe the steps you intend to take to promote the four licensing objectives: a) General – all four licensing objectives (b,c,d,e) List here steps you will take to promote all four licensing objectives together. CCTV Fire fighting equipment Customer Notices Challenge 21 Scheme b) The prevention of crime and disorder CCTV to be installed and in operation.
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Describe the steps you intend to take to promote the four licensing objectives: a) General – all four licensing objectives (b,c,d,e) List here steps you will take to promote all four licensing objectives together. CCTV Fire fighting equipment Customer Notices Challenge 21 Scheme b) The prevention of crime and disorder CCTV to be installed and in operation. CCTV recordings shall be maintained for 31 days. CCTV signage shall be displayed in the public area. c) Public safety Fire fighting equipment shall be installed and maintained at the premises.
Describe the steps you intend to take to promote the four licensing objectives: a) General – all four licensing objectives (b,c,d,e) List here steps you will take to promote all four licensing objectives together. CCTV Fire fighting equipment Customer Notices Challenge 21 Scheme b) The prevention of crime and disorder CCTV to be installed and in operation. CCTV recordings shall be maintained for 31 days. CCTV signage shall be displayed in the public area.

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d) The prevention of public nuisance

Notices shall be displayed requesting patrons to leave the premises quietly.

e) The protection of children from harm

A Challenge 21 proof of age scheme shall operate at the premises.

A refusal register will be maintained and record all refused sales of alcohol.

Section 19 of 19

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*

*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

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* Fee amount (£)	190.00				
ATTACHMENTS	ATTACHMENTS				
AUTHORITY POSTAL ADDRESS					
Address					
Building number or name					
Street					
District					
City or town					
County or administrative area					
Postcode					
Country	United Kingdom	1			
DECLARATION					
		riction to a fine up to level 5 on n or in connection with this ap	n the standard scale, under section 158 of the oplication.		
☐ Ticking this box indicat	es you have read	and understood the above de	claration		
This section should be completed behalf of the applicant?"	ted by the applica	ant, unless you answered "Yes	" to the question "Are you an agent acting on		
* Full name					
* Capacity					
Date (dd/mm/yyyy)					
	Add	another signatory			
One you're finished you need to 1. Save this form to your compour 2. Go back to https://www.govyour application Don't forget to make sure you	uter by clicking to .uk/apply-for-a-lio	o file/save as cence/premises-licence/harro	w/apply-1 to upload this file and continue with		

Consent of individual to being specified as premises supervisor

T. W.	tumar Kanapathippillai
[full name of	prospective premises supervisor]
of	
[home address of p	rospective premises supervisor]
hereby confirm supervisor in rela	that I give my consent to be specified as the designated premises ation to the application for
an application f	or a new premises licence
[type of application]	•
by Satheeskumar	Kanapathippillai
[name of applicant]	
relating to a pren	nises licence of existing licence, if any]
for	
396-3	98 Rayners Lane
Pinner	
Middle	
HA5 5	זע
from and addraga	of promises to which the application related

and any premises licenc by	e to be granted or varied in respect of this application made
Satheeskumar Kanap	athippillai
[name of applicant]	***************************************
concerning the supply of	alcohol at
396-398 Rayners Pinner Middlesex HA5 5DY	Lane
name and address of premis	es το wnicn application relates]
I also confirm that I am a licence, details of which I	applying for, intend to apply for or currently hold a personal set out below.
Personal licence number LBHIL0469	
[insert personal licence number	rr, if any]
Personal licence issuing	authority
Hillingdon Council, Civid	c Centre, High Street, Uxbridge, Middlesex, UB8 1UW.
[insert name and address and	telephone number of personal licence issuing authority, if any]
Signed	***************************************
Name (please print)	SKANAPATHIPPILLAT
Date	24/03/14