

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 be logged in when you resume. This is the unique reference for this System reference Not Currently In Use application generated by the system. You can put what you want here to help you Your reference 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 Yes ○ No work for. **Applicant Details** Doru - Alin * First name * Family name Golescu * E-mail Main telephone number Include country code. Other telephone number Indicate here if the applicant would prefer not to be contacted by telephone Is the applicant: 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 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	1	
* Street		
District		
City or town		
County or administrative area		
* Postcode		
* Country	United Kingdom	
Agent Details		
* First name	Puthrasingam	
# Family name	Sivashankar	
* E-mail		
Main telephone number		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.
	ng as an agent	person without any special legal structure.
Agent Business		
* Is your business registered in the UK with Companies House?	● Yes	
* Registration number	8832658	
* Business name	Compliance Direct Ltd	If your business is registered, use its registered name.
* VAT number GB	204915133	Put "none" if you are not registered for VAT.
* Legal status	Private Limited Company	
* Your position in the business	Director	
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.
* Building number or name	52	
* Street	Roxeth Green Avenue	
District		
* City or town	Harrow	
County or administrative area		
* Postcode	HA2 8AF	
* Country	United Kingdom	
Section 2 of 19		
PREMISES DETAILS		
	oply for a premises licence under section 17 of the premises) and I/we are making this applicat of the Licensing Act 2003.	
Premises Address		
Are you able to provide a post	al address, OS map reference or description of t	the premises?
	p reference C Description	
Postal Address Of Premises		
Building number or name	Parade Corner Shop, 10	
Street	Palmerston Road	
District		
City or town	Harrow	
County or administrative area		
Postcode	HA3 7FA	
Country	United Kingdom	
Further Details		
Telephone number		
Non-domestic rateable value of premises (£)	0	

Sectio	n 3 of 19		
APPLI	CATION DETAILS		
In wha	t capacity are you applyi	ng for the premises licence?	
	An individual or individu	als	
	A limited company		
	A partnership		
	An unincorporated assoc	iation	
	A recognised club		
	A charity		
י 🗆 י	The proprietor of an educ	cational establishment	
	A health service body		
1 1 1	· ·	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	
ו 🗆 ו	The chief officer of police	of a police force in England and Wales	
	Other (for example a statutory corporation)		
Confir	rm The Following		
	am carrying on or propo the use of the premises for	osing to carry on a business which involves or licensable activities	
	am making the applicati	ion pursuant to a statutory function	
	am making the applicati virtue of Her Majesty's pro	ion pursuant to a function discharged by erogative	
Section	n 4 of 19		
INDIVI	DUAL APPLICANT DETA	AILS	
1	cant Name		
Is the r	name the same as (or sim	nilar to) the details given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as required.
(€ Ye	25	C No	Select "No" to enter a completely new set of details.
First na	ame	Doru - Alin]
Family	name	Golescu	
Is the applicant 18 years of age or older?			
(● Ye	25	○ No	

Continued from previous page		
Applicant Postal Address		
is the address the same as (or s	similar to) the address given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as
	○ No	required. Select "No" to enter a completely new set of details.
Building number or name		
Street	2	
District		
City or town		
County or administrative a		
Postcode		
Country		
Applicant Contact Details		
Are the contact details the san	ne as (or similar to) those given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as
	← No	required. Select "No" to enter a completely new set of details.
E-mail	none@available.com	
Telephone number		
Other telephone number		
	Add another applicant	
Section 5 of 19		
OPERATING SCHEDULE		
When do you want the premises licence to start?	27 / 05 / 2015 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	
Provide a general description	of the premises	
licensing objectives. Where yo	ises, its general situation and layout and any oth our application includes off-supplies of alcohol a plies you must include a description of where t	and you intend to provide a place for
General Grocery store selling specialist Eastern European products. Once the licence is granted, alcohol and tobacco products will also be sold. The premises has not received a visit by VOA to assess for rates yet, hence we are paying the £100 fee.		

Continued from previous page	
If 5,000 or more people are	
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?	
1 1 2 2	• No
Section 7 of 19	
PROVISION OF FILMS	
Will you be providing films?	
← Yes (€ No
Section 8 of 19	
PROVISION OF INDOOR SPORT	TING EVENTS
Will you be providing indoor sp	orting events?
← Yes (€ No
Section 9 of 19	
PROVISION OF BOXING OR WR	ESTLING ENTERTAINMENTS
Will you be providing boxing or	wrestling entertainments?
← Yes (€ No
Section 10 of 19	
PROVISION OF LIVE MUSIC	
Will you be providing live music	?
○ Yes (No
Section 11 of 19	
PROVISION OF RECORDED MU	SIC
Will you be providing recorded	music?
(Yes	● No
Section 12 of 19	
PROVISION OF PERFORMANCE	S OF DANCE
Will you be providing performa	nces of dance?
(Yes	€ No
Section 13 of 19	
PROVISION OF ANYTHING OF A	A SIMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF
Will you be providing anything performances of dance?	similar to live music, recorded music or
<u> </u>	No
, ,	• • •

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Section 14 of 19		
LATE NIGHT REFRESH	MENT	
Will you be providing la	ite night refreshment?	
CYes	No	
Section 15 of 19		
SUPPLY OF ALCOHOL		
Will you be selling or su	ipplying alcohol?	
Yes	C No	
Standard Days And Ti	mings	
MONDAY	Start 07:00	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.
TUESDAY		
	Start 07:00 Start	End 23:00 End
WEDNESDAY		
	Start 07:00	End 23:00
	Start	End
THURSDAY		
	Start 07:00	End 23:00
,	Start	End
FRIDAY		
	Start 07:00	End 23:00
	Start	End
SATURDAY		
2,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Start 07:00	End 23:00
	Start	End End
	Start	Life [
SUNDAY		
	Start 07:00	End 23:00
	Start	End

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Will the sale of alcohol be for o	consumption:	If the sale of alcohol is for consumption on the premises select on, if the sale of alcohol
← On the premises		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 d	ays during the summer months.
None		
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.
On new Years eve to extend o	pening hours from 2300 to next day 0700	
State the name and details of licence as premises supervisor	the individual whom you wish to specify on the	
Name		
First name	Doru -Alin	
Family name	Golescu	
Enter the contact's address		
Building number or name		
Street		
District		
City or town		
County or administrative area		
Postcode		
Country	United Kingdom	
Personal Licence number (if known)	LN/000008091/2015/1	
Issuing licensing authority (if known)	LB Harrow	

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·	ED PREMISES SUPERVISOR CO	DNSENT	
How will the consent for be supplied to the auth	orm of the proposed designated nority?	premises supervisor	
← Electronically, by	the proposed designated premi	ises supervisor	
As an attachment	t to this application		
Reference number for of form (if known)	consent	7 1007-03-007-00-00	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		
	tertainment or services, activitie e rise to concern in respect of ch		ent or matters ancillary to the use of the
rise to concern in respe		ether you intend child	ary to the use of the premises which may give ren to have access to the premises, for example c gambling machines etc.
not applicable			
Section 17 of 19			
HOURS PREMISES ARE	OPEN TO THE PUBLIC		
Standard Days And Ti	mings		
MONDAY			Charles to the back of the second
	Start 07:00	End 23:00	Give timings in 24 hour clock. (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		I—————————————————————————————————————	,
	Start 07:00	End 23:00	
	Start	End	
WEDNESDAY			
WEDNESDAT	Start 07:00	End 23:00	
			_
	Start	End	_
THURSDAY			
	Start 07:00	End 23:00	
	Start	End	
FRIDAY			
	Start 07:00	End 23:00	
	Start	End	7

Continued from previous page
SATURDAY
Start 07:00 End 23:00
Start End
SUNDAY
Start 07:00 End 23:00
State any seasonal variations
For example (but not exclusively) where the activity will occur on additional days during the summer months.
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.
On new Years eve to extend opening hours from 2300 to next day 0700
To the wheat see to extend opening hours from 2500 to hext day 0700
Section 18 of 19
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.
The Licensee and DPS Mr Golsecu has been managing an Off Licence for the past 5 years and has good experience in such management.
The premises is situated in a very urban part of Wealdstone.
b) The prevention of crime and disorder
The Premises are covered by digital CCTV system that operates all times the premises are open. The images are stored for 31
days and will be available to Police and other Statutory Bodies on request. An Incident Book will be kept and maintained at the premises.
All staff will be trained in Licensing laws
c) Public safety
All staff are trained in basic health & Safety and Fire prevention
II.

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d) The prevention of public nuisance

The operating hours set with in the Authoritys core hours to minimise nuisance.

A poster requesting customers to respect near by residents will be displayed at the exit

e) The protection of children from harm

A challenge 21 Policy will be implemented for all age restricted products

A Refusal Register will be maintained and will be available for all Statutory bodies on request

All staff will be trained in the implementation of challenge 21 Policy

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.

C1 000 00

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

C----!h. F000 0000

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* Fee amount (£)	100.00		
DECLARATION			
I/we understand 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.			
Ticking this box indicates you have read and understood the above declaration			
This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"			
* Full name	Puthrasingam Siv	vashankar	
* Capacity	Director		
* Date	28 / 04 / dd mm	уууу	
	Add	another signatory	
Once you're finished you need to do the following: 1. Save this form to your computer by clicking file/save as 2. Go back to https://www.gov.uk/apply-for-a-licence/premises-licence/harrow/apply-1 to upload this file and continue with your application. Don't forget to make sure you have all your supporting documentation to hand.			
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			
OFFICE USE ONLY			
Applicant reference number			
Fee paid			
Payment provider reference			
ELMS Payment Reference			
Payment status			
Payment authorisation code			
Payment authorisation date			
Date and time submitted			
Approval deadline			
Error message			
Is Digitally signed			

Consent of individual to being specified as premises supervisor

Jorn — Alia Goleson [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
NEW france live co
by
Dom - Alia Golescu [name of applicant]
relating to a premises licence [number of existing licence, if any]
for Parade Corner shop 10 Palmuston Road, Wentdetone
[name and address of premises to which the application relates]

and any premises licently	ce to be granted or varied in respect of this application made
Doru [name of applicant]	- Alin Golpson
concerning the supply of	of alcohol at
Ω	
Ya.	rale Corner shop
(0	Palmarston Roud Westerna
[name and address of prem	ses to which application relates)
I also confirm that I am licence, details of which	applying for, intend to apply for or currently hold a personal set out below.
Personal licence number	
[insert personal licence number	0 0 0 0 8 0 9 9 /2015 / 1
Personal licence issuing	authority
LB HARI finsert name and address an	telephone number of personal licence issuing authority, if any]
Signed	

Name (please print)	Don-Alin Golson
Date	28/4/325