

**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 Tops Pizza Limited

(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 | | | |
| Tops Pizza 769 Harrow Road | | | |
| Post town | Wembley | Postcode | HA0 2LW |

| | |
|---|----------------------|
| Telephone number at premises (if any) | 020 3793 6951 |
| Non-domestic rateable value of premises | £14,500 |

Part 2 - Applicant details

Please state whether you are applying for a premises licence as Please tick as appropriate

- | | | |
|--|-------------------------------------|-----------------------------|
| a) an individual or individuals * | <input type="checkbox"/> | please complete section (A) |
| b) a person other than an individual * | | |
| i as a limited company/limited liability partnership | <input checked="" type="checkbox"/> | please complete section (B) |
| ii as a partnership (other than limited liability) | <input type="checkbox"/> | please complete section (B) |
| iii as an unincorporated association or | <input type="checkbox"/> | please complete section (B) |
| iv other (for example a statutory corporation) | <input type="checkbox"/> | please complete section (B) |
| c) a recognised club | <input type="checkbox"/> | 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 (by ticking yes to one box below):

- 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 | | |
| Date of birth | | I am 18 years old or over | | <input checked="" type="checkbox"/> | Please tick yes |
| Nationality | | | | | |
| Current residential address if different from premises address | | | | | |
| Post town | Greenford | | | 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 | |
| Date of birth over | | I am 18 years old or | <input type="checkbox"/> Please tick yes |
| Nationality | | | |
| 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 Tops Pizza limited |
| Address [REDACTED] |
| Registered number (where applicable) [REDACTED] |
| Description of applicant (for example, partnership, company, unincorporated association etc.) Company |
| Telephone number (if any) [REDACTED] |
| E-mail address (optional) |

Part 3 Operating Schedule

When do you want the premises licence to start?

| | | |
|----------------------|----------------------|----------------------|
| DD | MM | YYYY |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

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

| | | |
|----------------------|----------------------|----------------------|
| DD | MM | YYYY |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Please give a general description of the premises (please read guidance note 1)
A franchise take away (Tops Pizza), situated on the ground floor of a two story building, facing a main road.

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 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all 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 7) | | | <u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3) | Indoors | <input type="checkbox"/> |
|---|-------|--------|---|----------|--------------------------|
| Day | Start | Finish | | Outdoors | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Mon | | | <u>Please give further details here</u> (please read guidance note 4) | | |
| Tue | | | | | |
| Wed | | | <u>State any seasonal variations for performing plays</u> (please read guidance note 5) | | |
| Thur | | | | | |
| Fri | | | <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 6) | | |
| Sat | | | | | |
| Sun | | | | | |

H

| | | | | | |
|--|-------|--------|--|----------|--------------------------|
| Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7) | | | Please give a description of the type of entertainment you will be providing | | |
| Day | Start | Finish | <u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3) | Indoors | <input type="checkbox"/> |
| Mon | | | | Outdoors | <input type="checkbox"/> |
| | | | | Both | <input type="checkbox"/> |
| Tue | | | <u>Please give further details here</u> (please read guidance note 4) | | |
| Wed | | | | | |
| Thur | | | <u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5) | | |
| Fri | | | | | |
| Sat | | | <u>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</u> (please read guidance note 6) | | |
| Sun | | | | | |

I

| Late night refreshment Standard days and timings (please read guidance note 7) | | | Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3) | Indoors | <input type="checkbox"/> |
|--|-------|--------|---|----------|-------------------------------------|
| Day | Start | Finish | | Outdoors | <input type="checkbox"/> |
| Mon | 23:00 | 02:30 | <u>Please give further details here</u> (please read guidance note 4) Please Note: | Both | <input checked="" type="checkbox"/> |
| Tue | 23:00 | 02:30 | | | |
| Wed | 23:00 | 02:30 | <u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5) | | |
| Thur | 23:00 | 02:30 | | | |
| Fri | 23:00 | 02:30 | <u>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</u> (please read guidance note 6) | | |
| Sat | 23:00 | 02:30 | | | |
| Sun | 23:00 | 02:30 | | | |

J

| | | | | | | | | |
|---|--------------|---------------|--|------------------|--------------------------|---|--|--|
| Supply of alcohol Standard days and timings (please read guidance note 7) | | | Will the supply of alcohol be for consumption – please tick (please read guidance note 8) | On the premises | <input type="checkbox"/> | | | |
| | | | | Off the premises | <input type="checkbox"/> | | | |
| | | | | Both | <input type="checkbox"/> | | | |
| Day | Start | Finish | State any seasonal variations for the supply of alcohol (please read guidance note 5) | | | | | |
| Mon | | | | | | | | |
| Tue | | | | | | | | |
| Wed | | | | | | | | |
| Thur | | | | | | 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 6) | | |
| Fri | | | | | | | | |
| Sat | | | | | | | | |
| Sun | | | | | | | | |

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

| | |
|--|--|
| Name | |
| Date of birth | |
| | |
| Postcode | |
| Personal licence number (if known) | |
| 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 9).

None

L

| Hours premises are open to the public Standard days and timings (please read guidance note 7) | | | State any seasonal variations (please read guidance note 5) |
|---|-------|--------|---|
| Day | Start | Finish | |
| Mon | 11:00 | 02:30 | 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 (please read guidance note 6) |
| | | | |
| Tue | 11:00 | 02:30 | |
| | | | |
| Wed | 11:00 | 02:30 | |
| | | | |
| Thu | 11:00 | 02:30 | |
| | | | |
| Fri | 11:00 | 02:30 | |
| | | | |
| Sat | 11:00 | 02:30 | |
| | | | |
| Sun | 11:00 | 02:30 | |
| | | | |

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 10)

It will be ensured that all four licensing objectives will be promoted as detailed in each section below:

- Appropriate staff training to be completed, training records shall be made available for inspection upon request by a relevant officer of a responsible authority.
- Part A (the full Premises Licence) either the original or a certified copy should be retained at the premises for production to an authorised person.
- Part B (the summary of the Premises Licence) should be prominently displayed at the venue where it can be easily read by anyone wishing to do so. Please note that both pages of the summary should be visible
- Vehicles used for delivery must switch off their engines when waiting outside of the Premises for the collection of food for delivery.
- Drivers shall wait inside the premises between deliveries/for deliveries.
- A notice shall be displayed by the front door stating the restaurant opening hours.
- Home deliveries shall only be carried out by in-house employees of the business
- No noise generated on the premises, or by its associated plant or equipment, shall emanate from the premises nor vibration be transmitted through the structure of the premises which gives rise to a nuisance.

b) The prevention of crime and disorder

- The premises shall install and maintain a comprehensive CCTV system as per the minimum requirements of a Metropolitan Police Crime Prevention Officer. All entry and exit points will be covered enabling frontal identification of every person entering in any light condition.
- The CCTV system shall continually record whilst the premises is open for licensable activities and during all times when customers remain on the premises. All recordings shall be stored for a minimum period of 31 days with date and time stamping. Recordings shall be made available immediately upon the request of Police or authorised officer throughout the preceding 31-day period.
- A staff member from the premises who is conversant with the operation of the CCTV system shall be on the premises at all times when the premises is open to the public. This staff member shall be able to show Police recent data or footage with the absolute minimum of delay when requested.
- Joining neighbourhood schemes and liaising with the local police.
- Prominent signage indicating the permitted hours for the late night refreshment shall be displayed so as to be visible before entering the premises.
- Adequate lighting provided inside and outside the premises.
- Abide by the law

c) Public safety

- To comply with all current, fire and health and safety legislation as required by the law.
- Health and safety risk assessments to be carried out regularly
- All employees will receive training on health and safety & food safety
- Staff to be trained in fire evacuation procedures
- Installation of appropriate and adequate safety equipment

d) The prevention of public nuisance

- Notice to customers regarding consideration shall be displayed at the entrance and exit
- Deliveries of goods will be carried out at such a time or in such a manner as to prevent nuisance and disturbance to nearby businesses and residents. Staff who arrive in the morning or depart late at night will be asked not to cause disturbance to nearby residents.
- Depositing of waste will be at times that minimise any nuisance to nearby neighbours.
- All waste shall be properly presented and placed out for collection no earlier than 30 minutes before the scheduled collection times.
- No rubbish will be moved, removed or placed outside between the hours of 23:00 and 08:00.
- Monitor anti-social behaviour through CCTV.
- The premises manager contact details shall be clearly displayed for the public living with the vicinity
- An incident log shall be kept at the premises, and made available on request to an authorised officer or the Police

e) The protection of children from harm

Order is received over the phone by a person who sounds like they may be under 16 years old, staff member will ask to speak to a parent or responsible adult.

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.
- [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15).

IT IS AN OFFENCE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION. THOSE WHO MAKE A FALSE STATEMENT MAY BE LIABLE ON SUMMARY CONVICTION TO A FINE OF ANY AMOUNT.

IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIABLE TO A CIVIL PENALTY UNDER SECTION 15 OF THE IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006 AND PURSUANT TO SECTION 21 OF THE SAME ACT, WILL BE COMMITTING AN OFFENCE WHERE THEY DO SO IN THE KNOWLEDGE, OR WITH REASONABLE CAUSE TO BELIEVE, THAT THE EMPLOYEE IS DISQUALIFIED.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

| | |
|--------------------|--|
| Declaration | <ul style="list-style-type: none"> • [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15). • The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15) |
|--------------------|--|

| | |
|-----------|-------------------|
| | |
| Signature | <i>J. Cameron</i> |
| Date | 24/11/2023 |
| Capacity | Agent |

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 13). 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 14) | | | |
| LQAA | | | |
| Westminster Business Centre | | | |
| Printing House Lane | | | |
| Post town | Hayes | Postcode | UB3 1AP |
| Telephone number (if any) | | | |
| If you would prefer us to correspond with you by e-mail, your e-mail address (optional) | | | |
| [REDACTED] | | | |

Notes for Guidance

- 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.
- In terms of specific regulated entertainments please note that:
 - Plays: no licence is required for performances between 08:00 and 23.00 on any day, provided that the audience does not exceed 500.
 - Films: no licence is required for 'not-for-profit' film exhibition held in community premises between 08.00 and 23.00 on any day provided that the audience does not exceed 500 and the organiser (a) gets consent to the screening from a person who is responsible for the premises; and (b) ensures that each such screening abides by age classification ratings.
 - Indoor sporting events: no licence is required for performances between 08.00 and 23.00 on any day, provided that the audience does not exceed 1000.
 - Boxing or Wrestling Entertainment: no licence is required for a contest, exhibition or display of Greco-Roman wrestling, or freestyle wrestling between 08.00 and 23.00 on any day, provided that the audience does not exceed 1000. Combined fighting sports – defined as a contest, exhibition or display which