



Brent Council
Safer Streets
Environment and Neighbourhood Services
Brent Civic Centre
Engineers Way
Wembley HA9 0FJ

Our Ref: cdp/esm/206087/8

Date: 15 January 2014

When calling please ask for: Chris Pritchett

e-mail: cdp@footanstey.com

Direct Line: +44 (0)117 915 4928

Direct Fax: +44 (0)117 915 4999

Dear Sir or Madam

Peaches 177-179 Kenton Road

We act for the licence holder at the above premises, Rajesh Rai. Please find enclosed an application to vary the premises licence to remove condition 24 which states:

"No shisha to be served after 0000 hrs. Mon-Sun"

From recent experience and consultation, it is our firm view that regulation of this activity by way of a premises licence condition is not appropriate. This is for a variety of reasons.

Firstly, smoking of shisha is not a licensable activity within the scope of the Licensing Act 2003. Secondly, attempting to impose restrictions on the smoking of shisha in this way is incompatible with article 10 of the Human Rights Act. Finally, conditions of this nature attempting to control Shisha are incompatible with the duties placed on local authorities by the EU Services Directive and under its transposition in the Provision of Services Regulations 2009. Moreover, we do not believe this is consistent with local policy in respect of other shisha premises in Brent.

Accordingly, please find enclosed:

1. Variation application
2. Copy premises licence
3. Cheque in the sum of £315.00

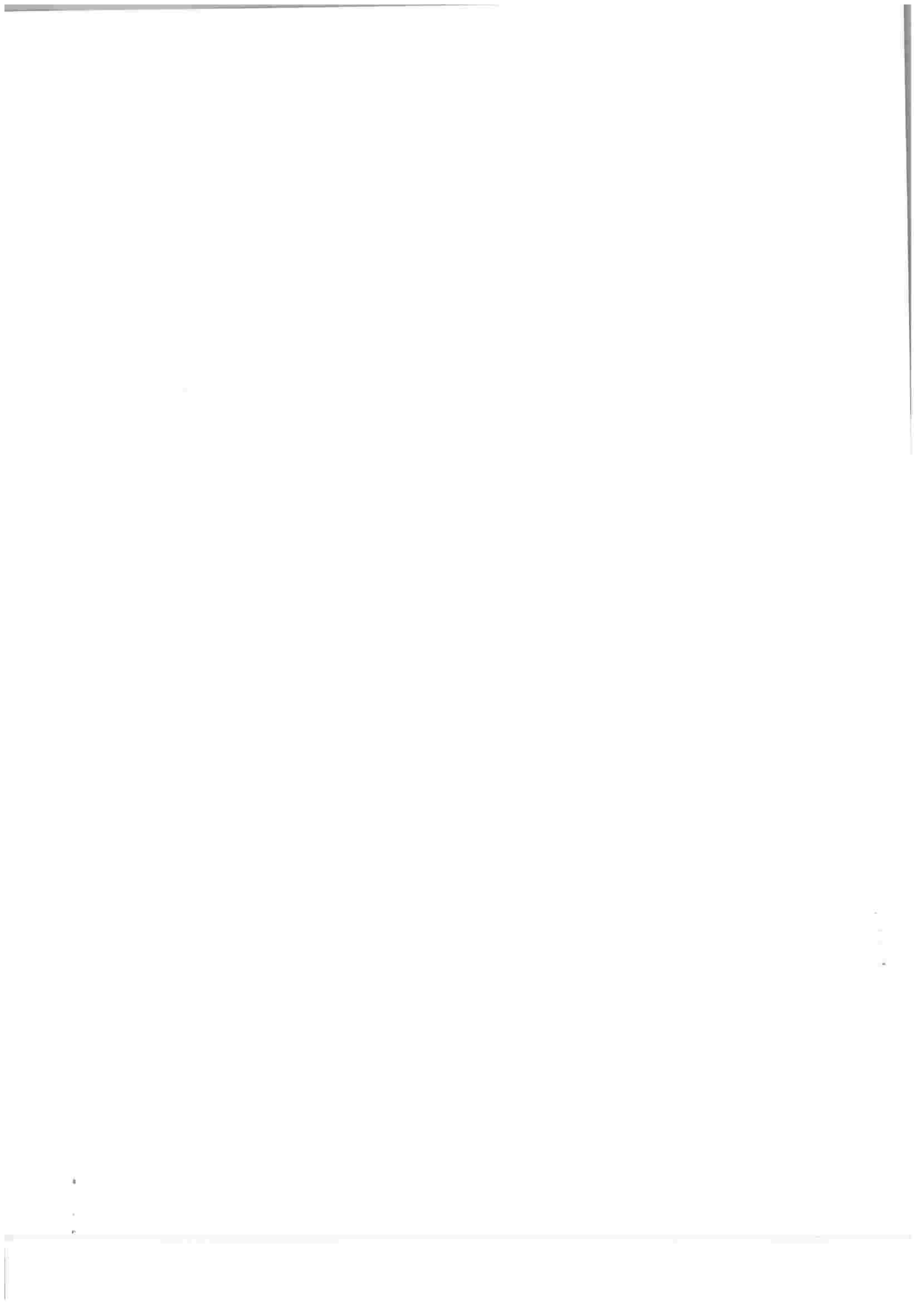
We confirm that the application will be advertised on site and in a local newspaper in accordance with the regulations, and that this has been copied to the statutory consultees listed below.

In the meantime, please do not hesitate to contact the writer, Chris Pritchett, with any queries.

Yours faithfully

Chris Pritchett
Partner
Foot Anstey LLP

Foot Anstey LLP, 100 Victoria Street, Bristol, BS1 6HZ
Tel: +44 (0)117 915 4900 Fax: +44 (0)117 915 4999 DX: 151765 BRISTOL 30



Application to vary a premises licence 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 Rajesh Rai

(Insert name(s) of applicant)

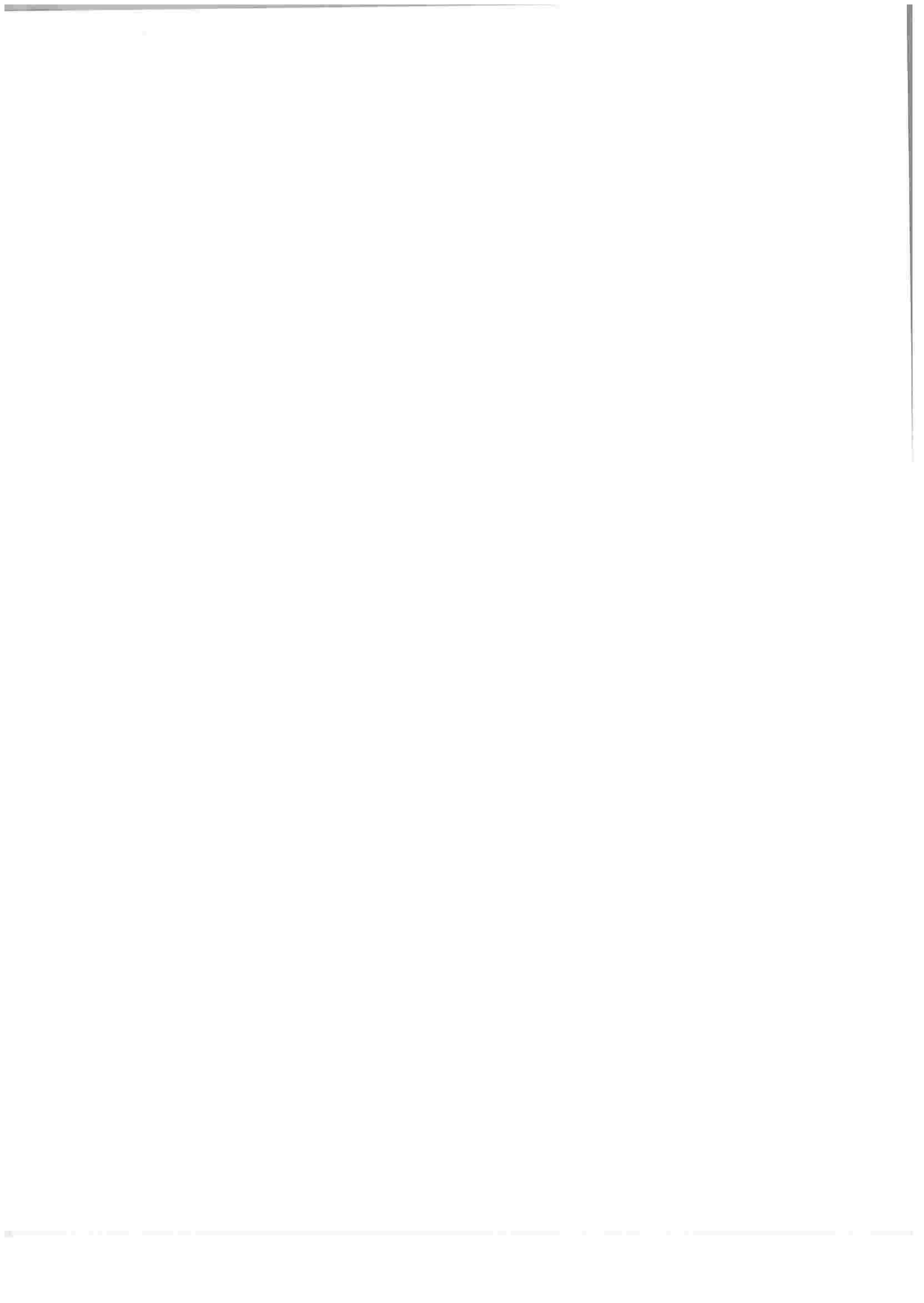
being the premises licence holder, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number 176158

Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description Peaches Bar and Restaurant 177-179 Kenton Road			
Post town	Harrow	Postcode	HA3 0EY
Telephone number at premises (if any)	0208 89077518		
Non-domestic rateable value of premises	£315.00 (43,300)		

Part 2 – Applicant details



Daytime contact telephone number	0117 9154928		
E-mail address (optional)			
Current postal address if different from premises address			
Post town		Postcode	

Part 3 - Variation

Please tick as appropriate

Do you want the proposed variation to have effect as soon as possible? Yes No

If not, from what date do you want the variation to take effect?

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

Do you want the proposed variation to have effect in relation to the introduction of the late night levy?
(Please see guidance note 1) Yes No

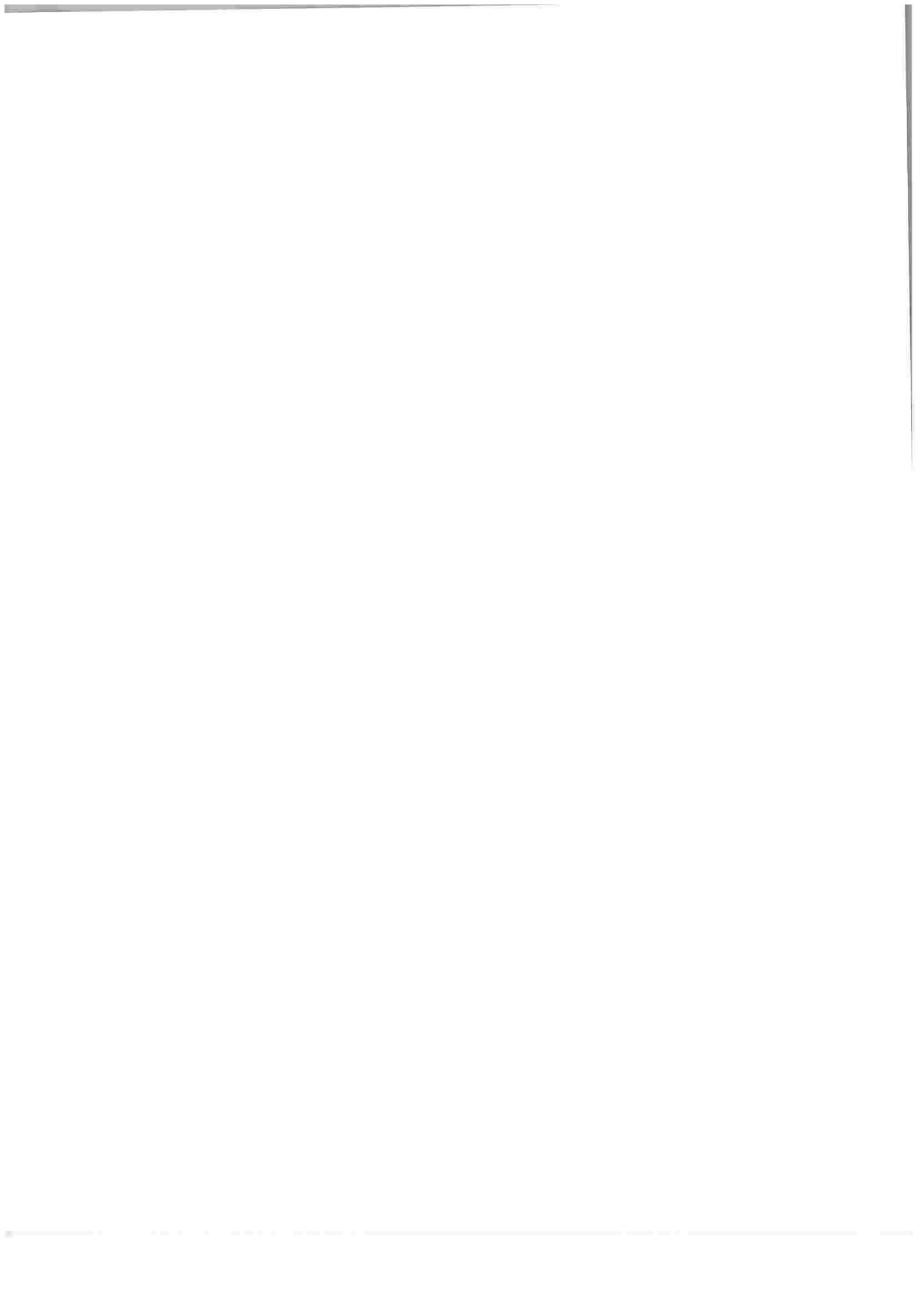
Please describe briefly the nature of the proposed variation (Please see guidance note 2)

Remove condition 24 of the licence

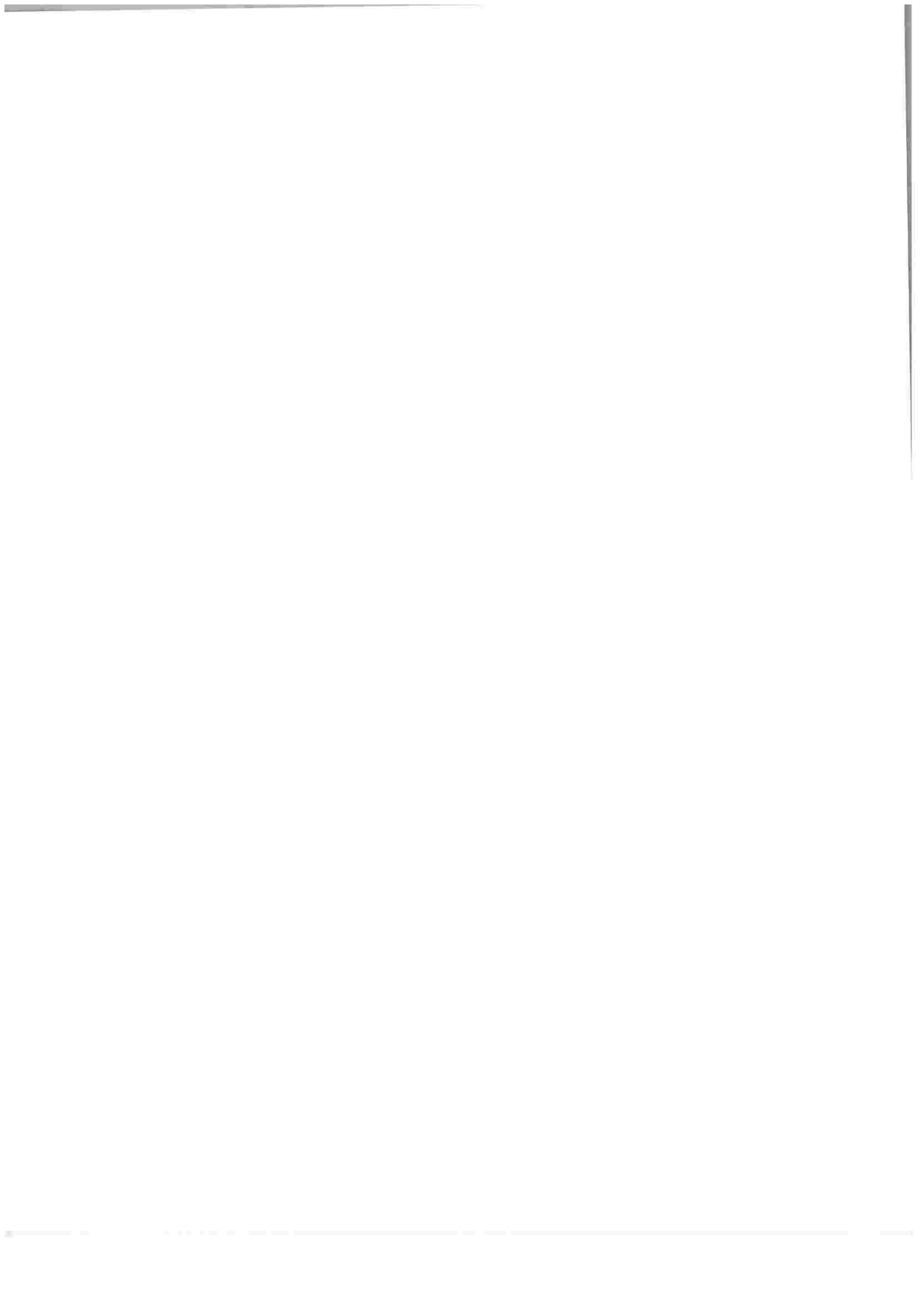
“No Shisha to be served after 0000 hrs Mon-Sun”.

This is not within scope of the Licensing Act 2003, and is incompatible with Article 10 Human Rights Act and EU Services Directive.

If your proposed variation would mean that 5,000 or more people are expected to attend the premises at any one time, please state the number



expected to attend:



Part 4 Operating Schedule

Please complete those parts of the Operating Schedule below which would be subject to change if this application to vary is successful.

Provision of regulated entertainment

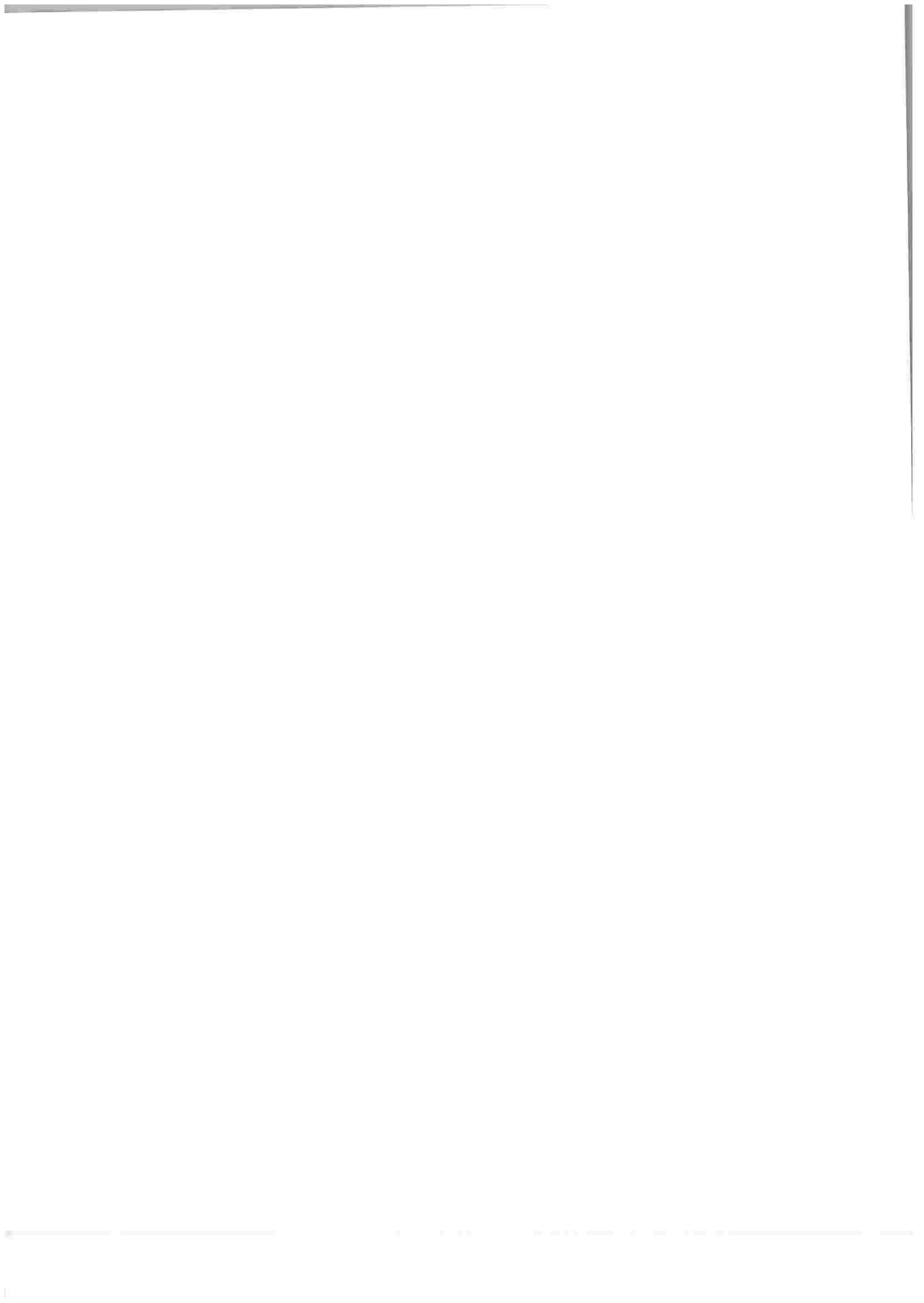
Please tick all that apply

- 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)

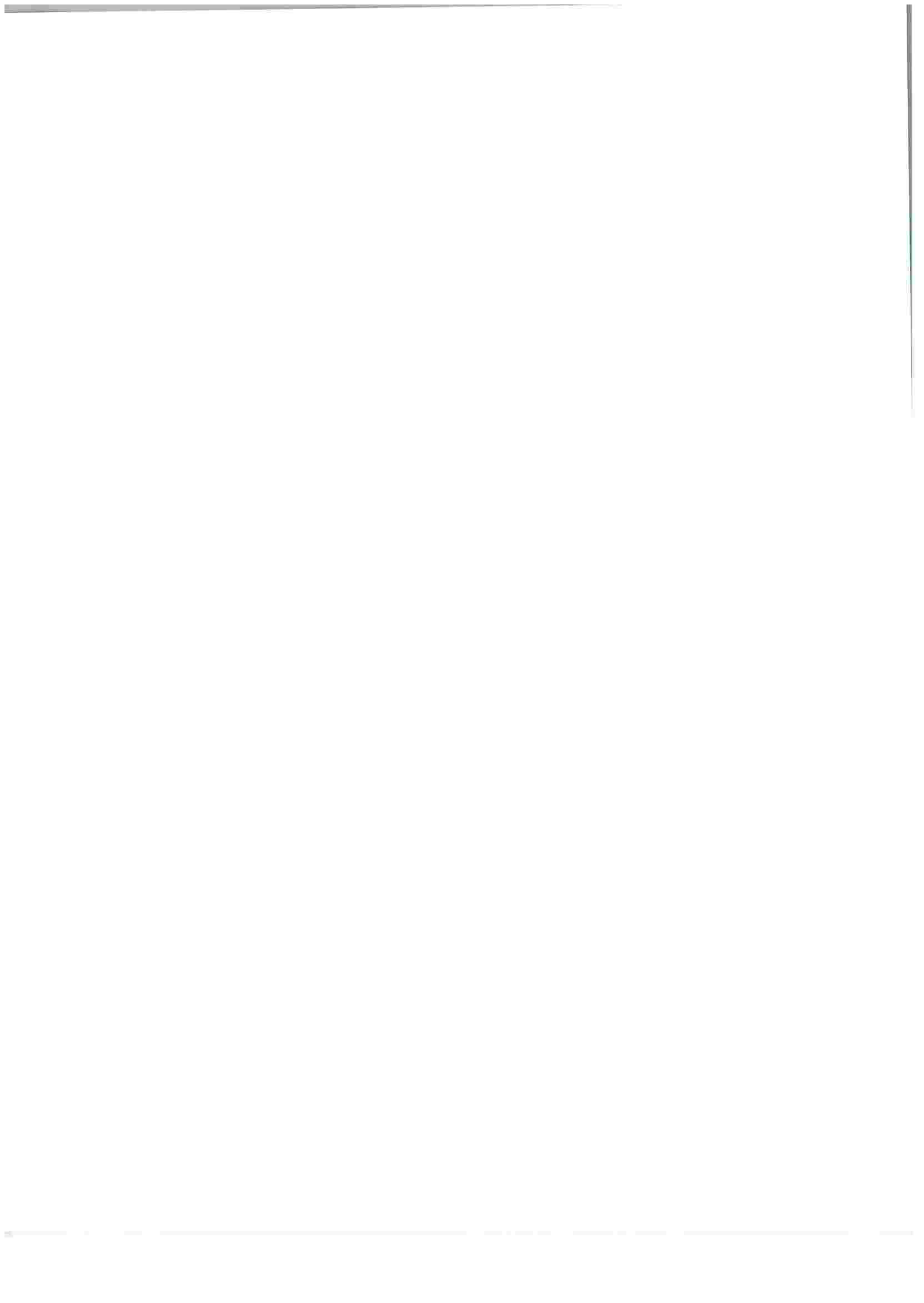
Supply of alcohol (if ticking yes, fill in box J)

In all cases complete boxes K, L and M



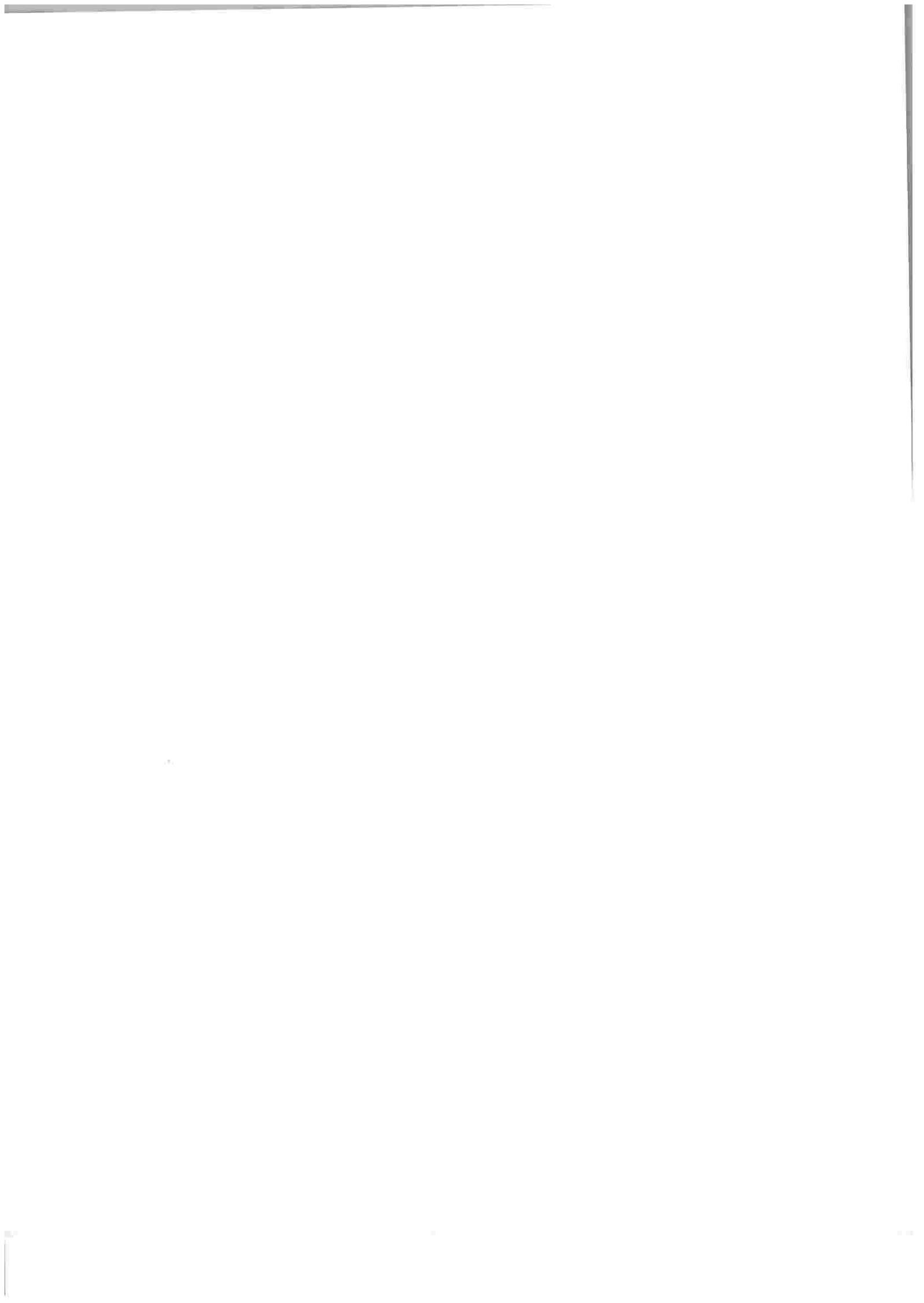
A

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				Outdoors	<input type="checkbox"/>
Start	Finish			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	-----	-----			



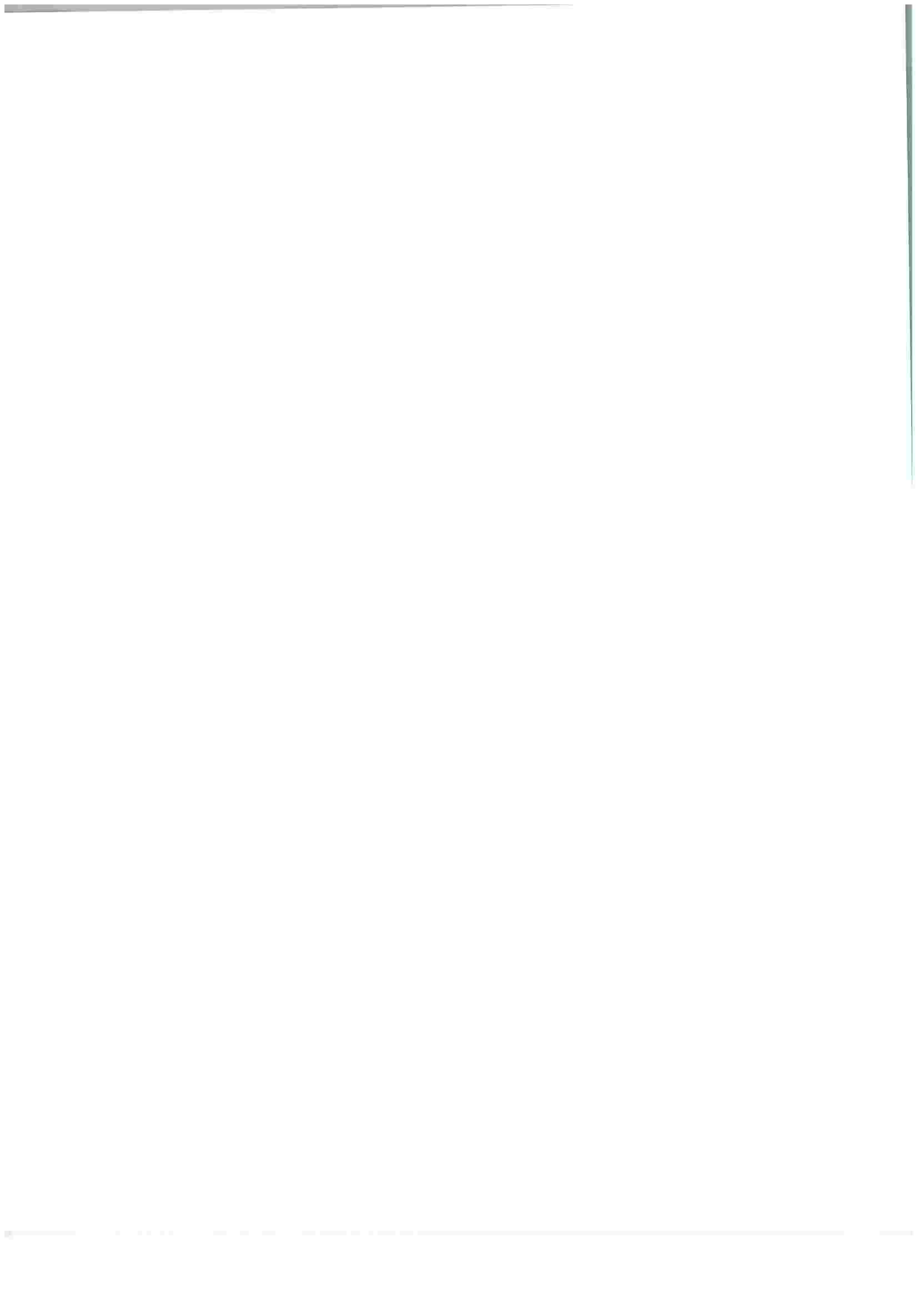
B

Films Standard days and timings (please read guidance note 7)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	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 4)		
Mon					
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)		
Thur					
Fri			<u>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</u> (please read guidance note 6)		
Sat					
Sun					



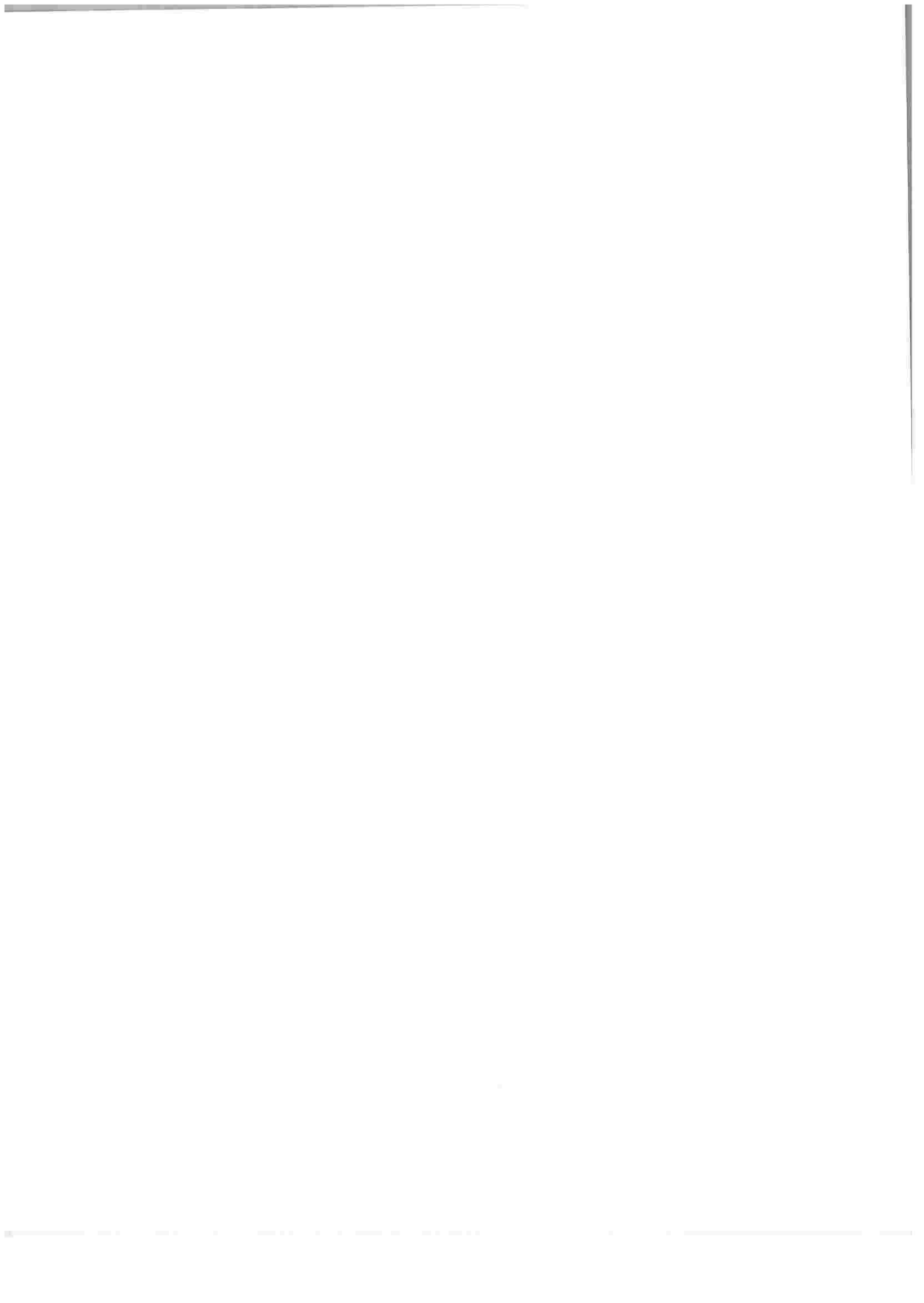
C

Indoor sporting events Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
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 6)
Fri			
Sat			
Sun			



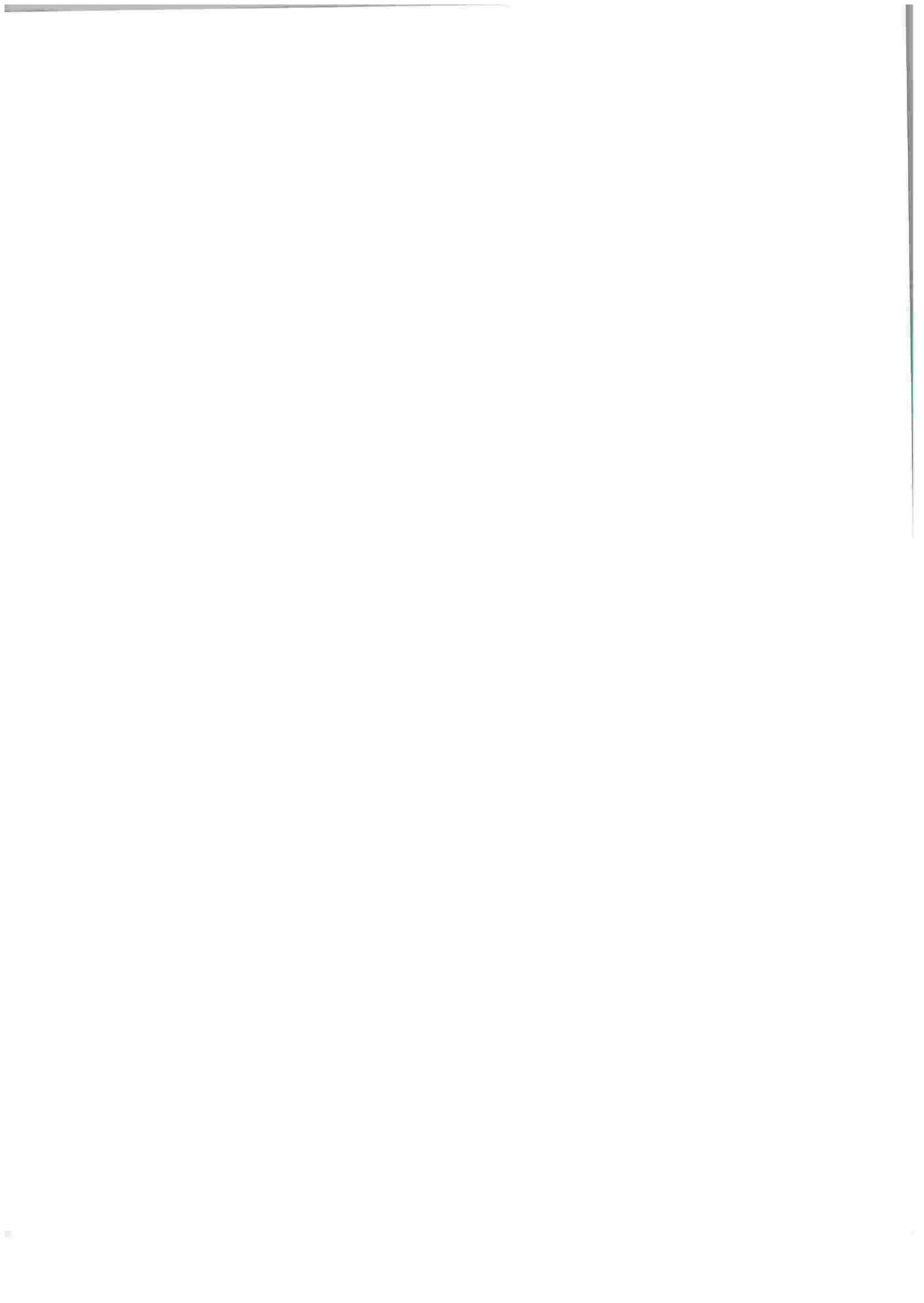
D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	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 4)		
Mon					
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)		
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 6)		
Sat					
Sun					



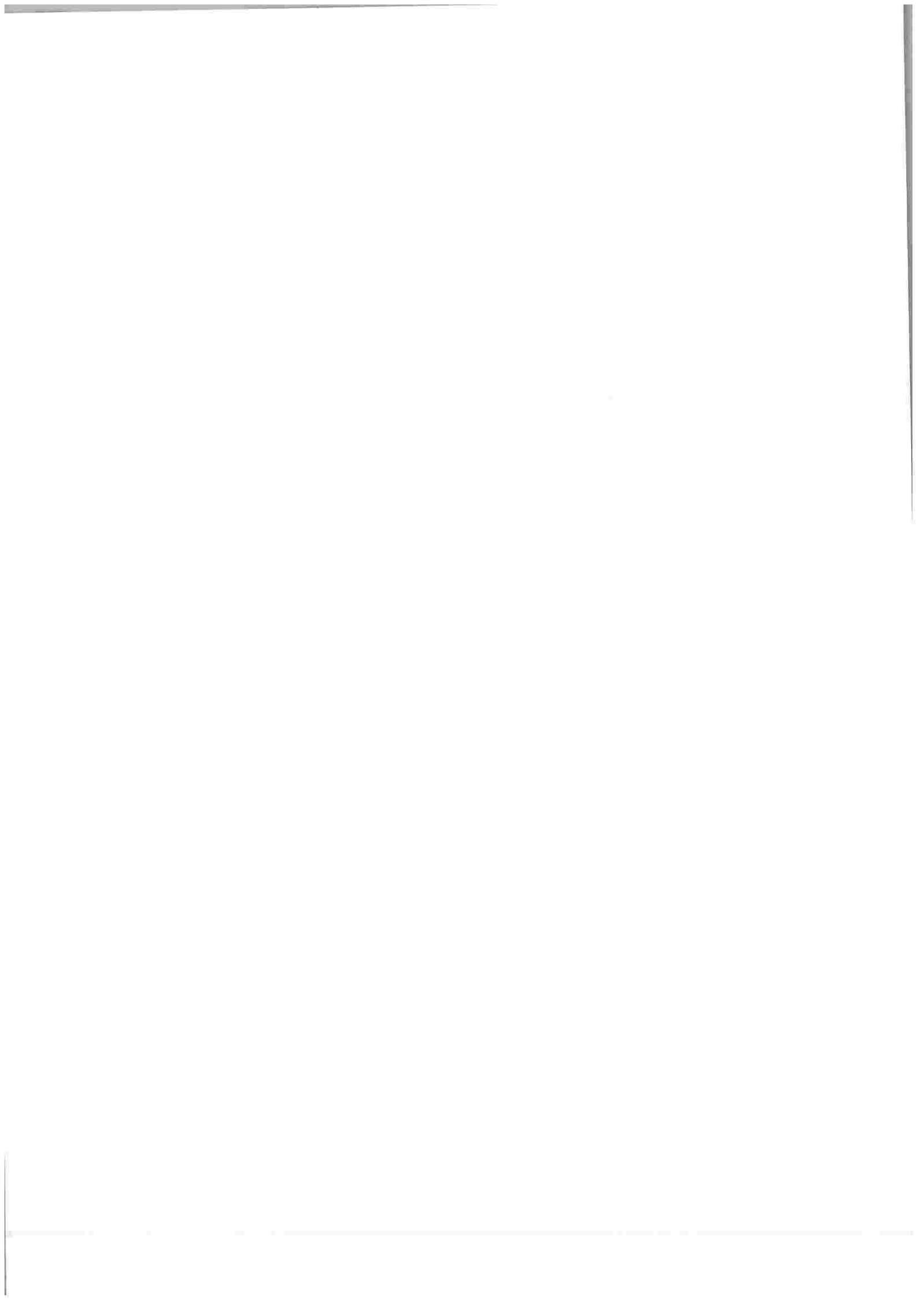
E

Live music Standard days and timings (please read guidance note 7)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon	-----	-----			
Tue	-----	-----	State any seasonal variations for the performance of live music (please read guidance note 5)		
Wed	-----	-----			
Thur	-----	-----	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 6)		
Fri	-----	-----			
Sat	-----	-----			
Sun	-----	-----			



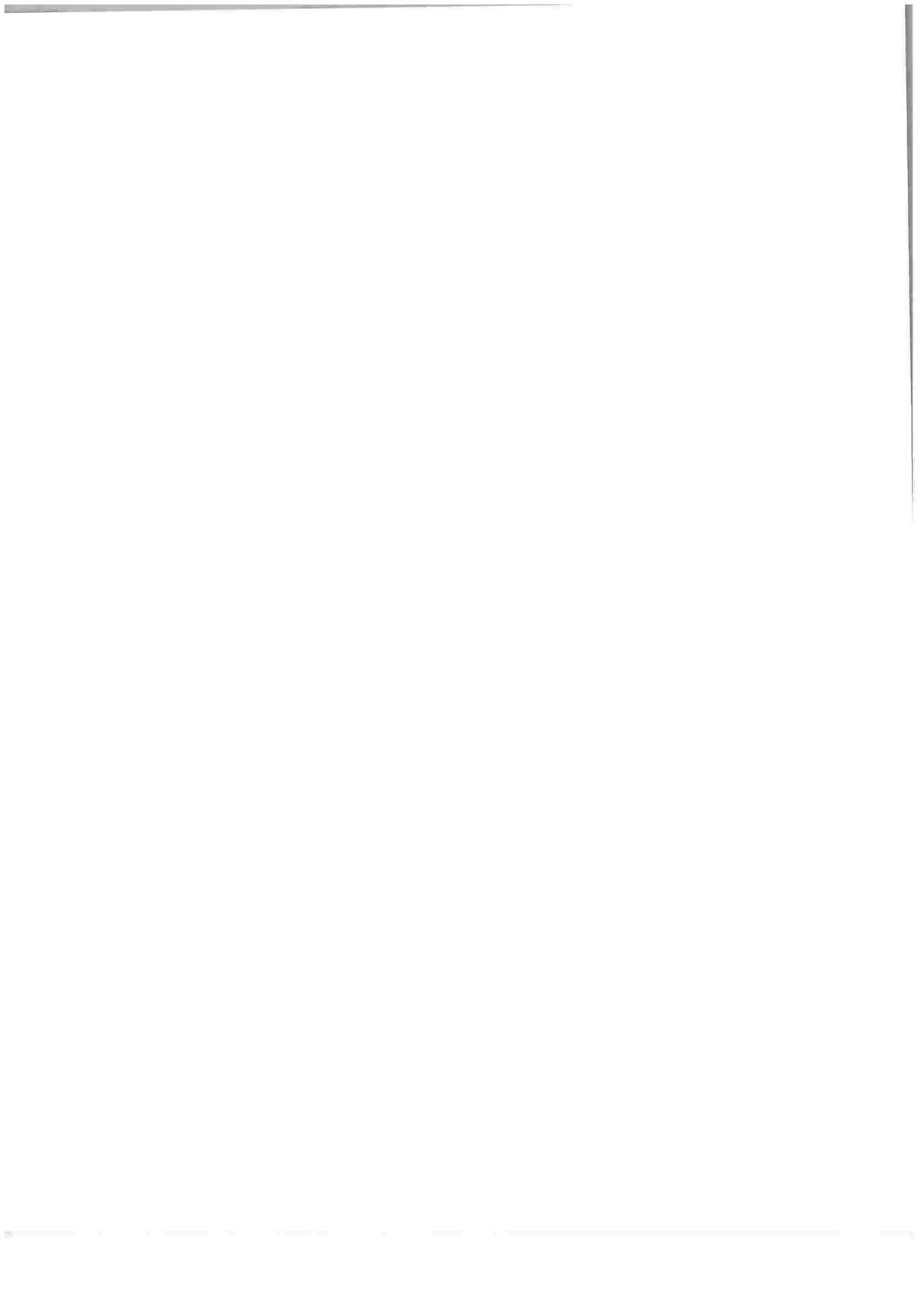
F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 4)		
	-----	-----			
Tue					
	-----	-----			
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 5)		
	-----	-----			
Thur					
	-----	-----			
Fri			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 6)		
	-----	-----			
Sat					
	-----	-----			
Sun					
	-----	-----			



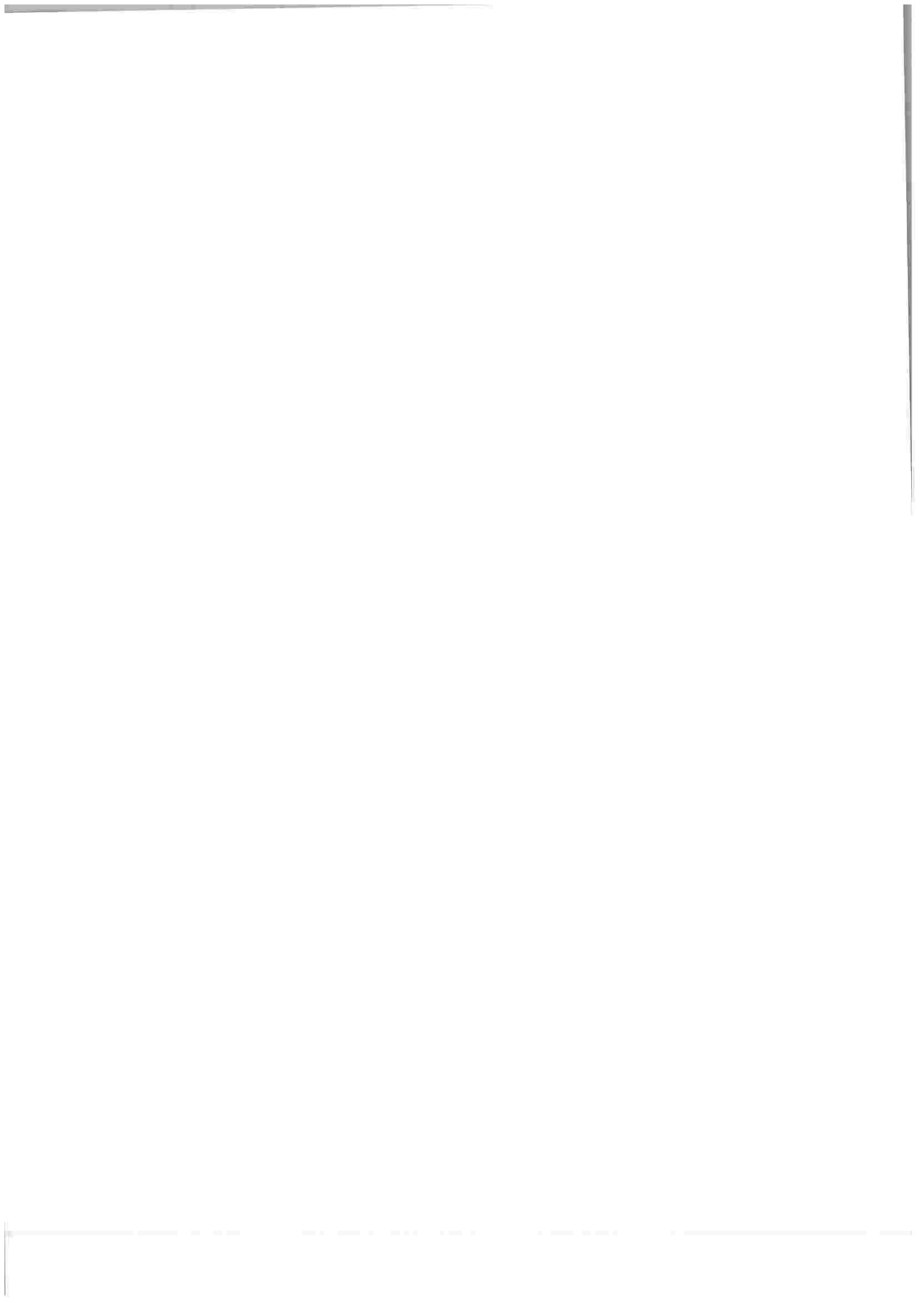
G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon					
Tue			State any seasonal variations for the performance of dance (please read guidance note 5)		
Wed					
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 6)		
Fri					
Sat					
Sun					



H

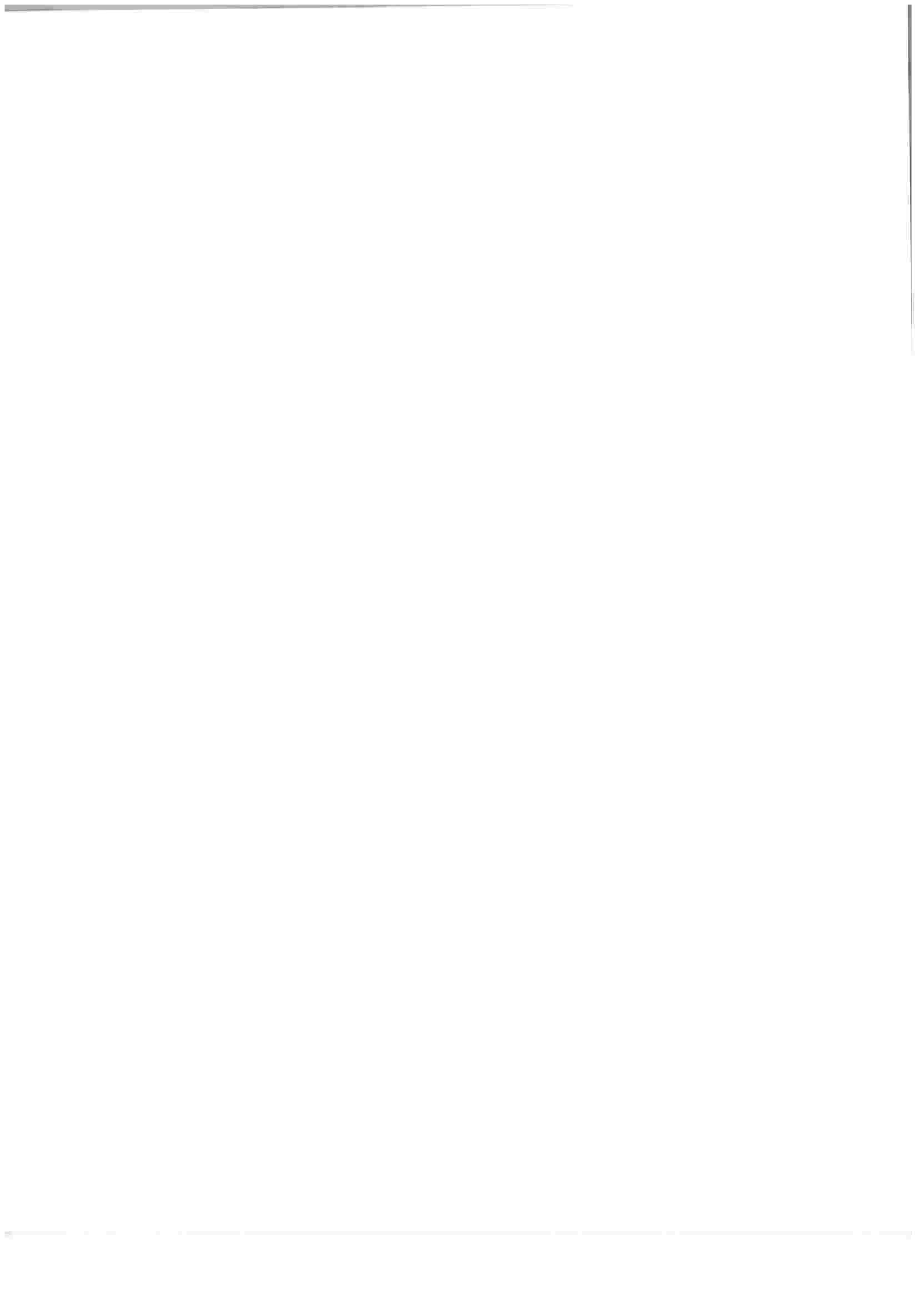
Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick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





L

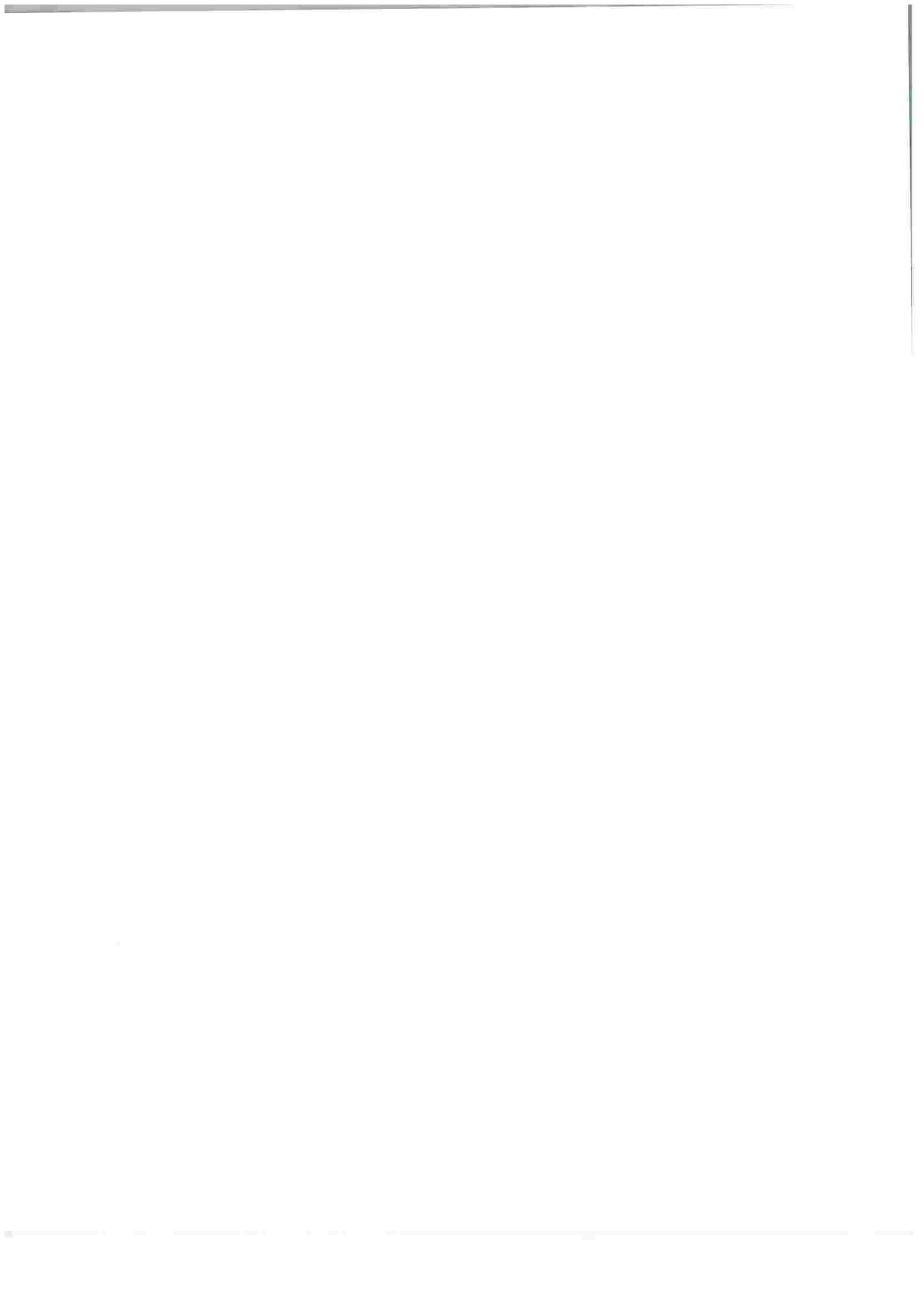
Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 6)

Please identify those conditions currently imposed on the licence which you believe could be removed as a consequence of the proposed variation you are seeking.

Condition 24

“No Shisha to be served after 0000 hrs Mon-Sun”.

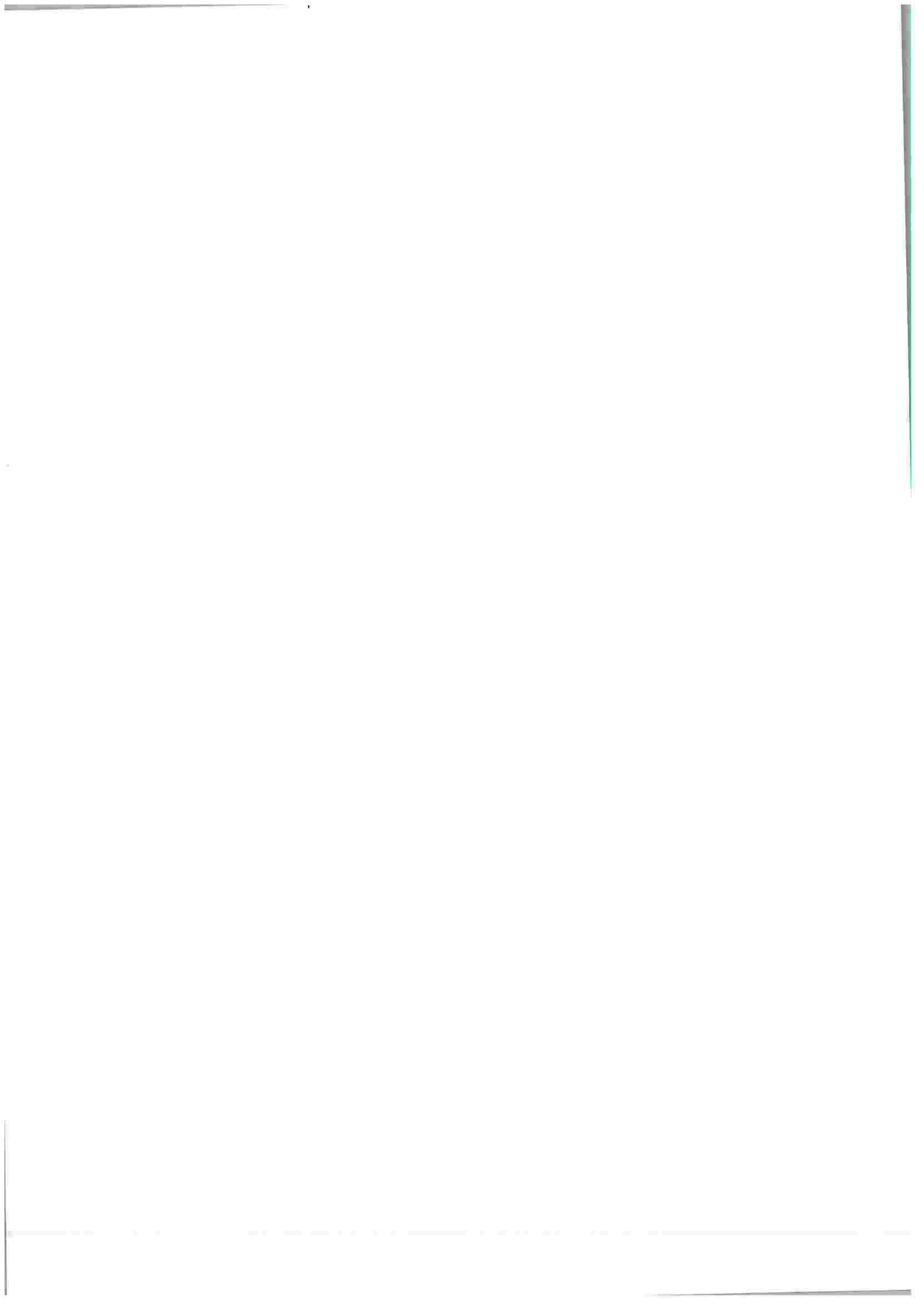
Please tick as appropriate



- I have enclosed the premises licence
- I have enclosed the relevant part of the premises licence

If you have not ticked one of these boxes, please fill in reasons for not including the licence or part of it below

Reasons why I have not enclosed the premises licence or relevant part of premises licence.



M

Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

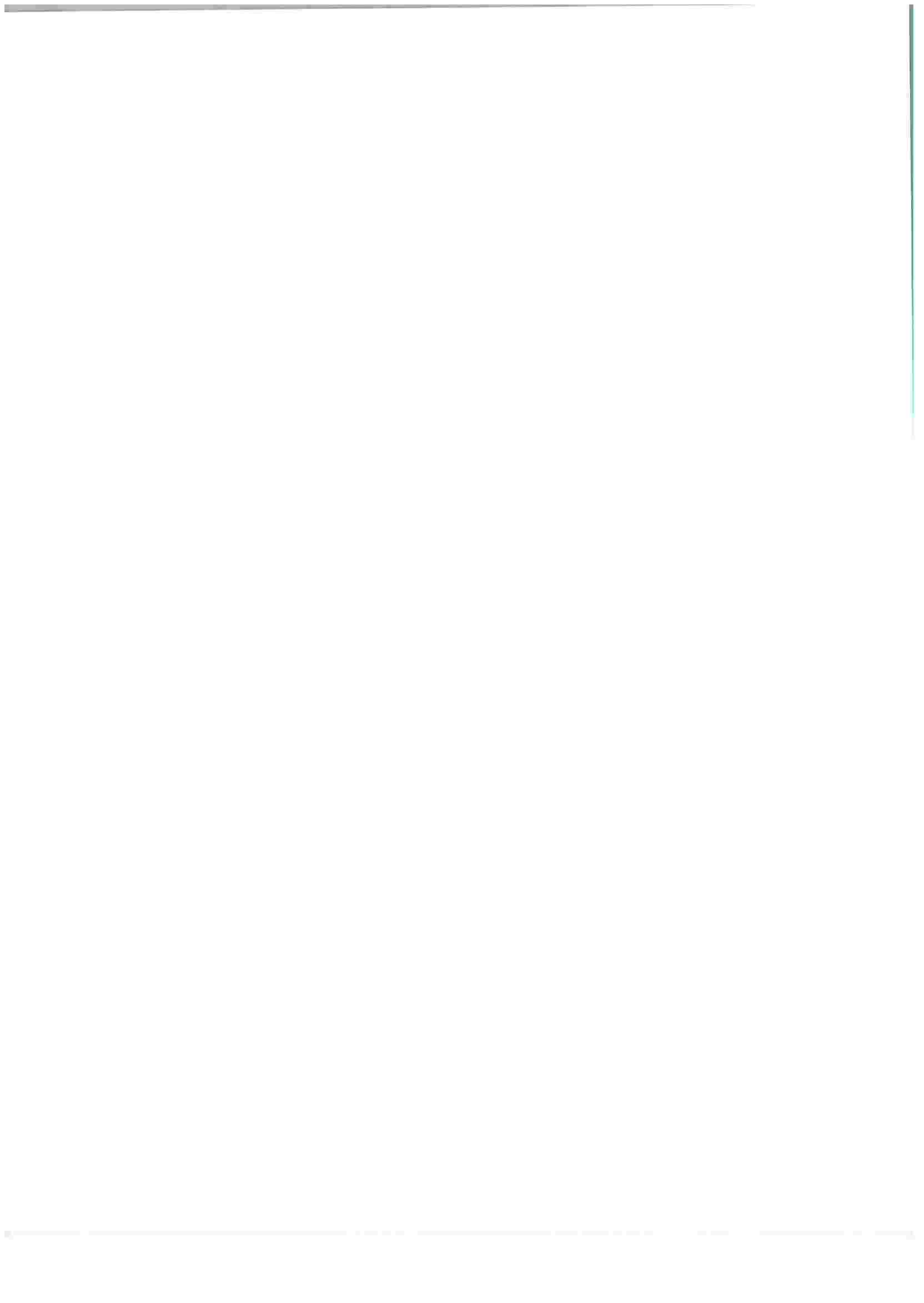
a) General – all four licensing objectives (b, c, d and e) (please read guidance note 10)

b) The prevention of crime and disorder

c) Public safety

d) The prevention of public nuisance

e) The protection of children from harm

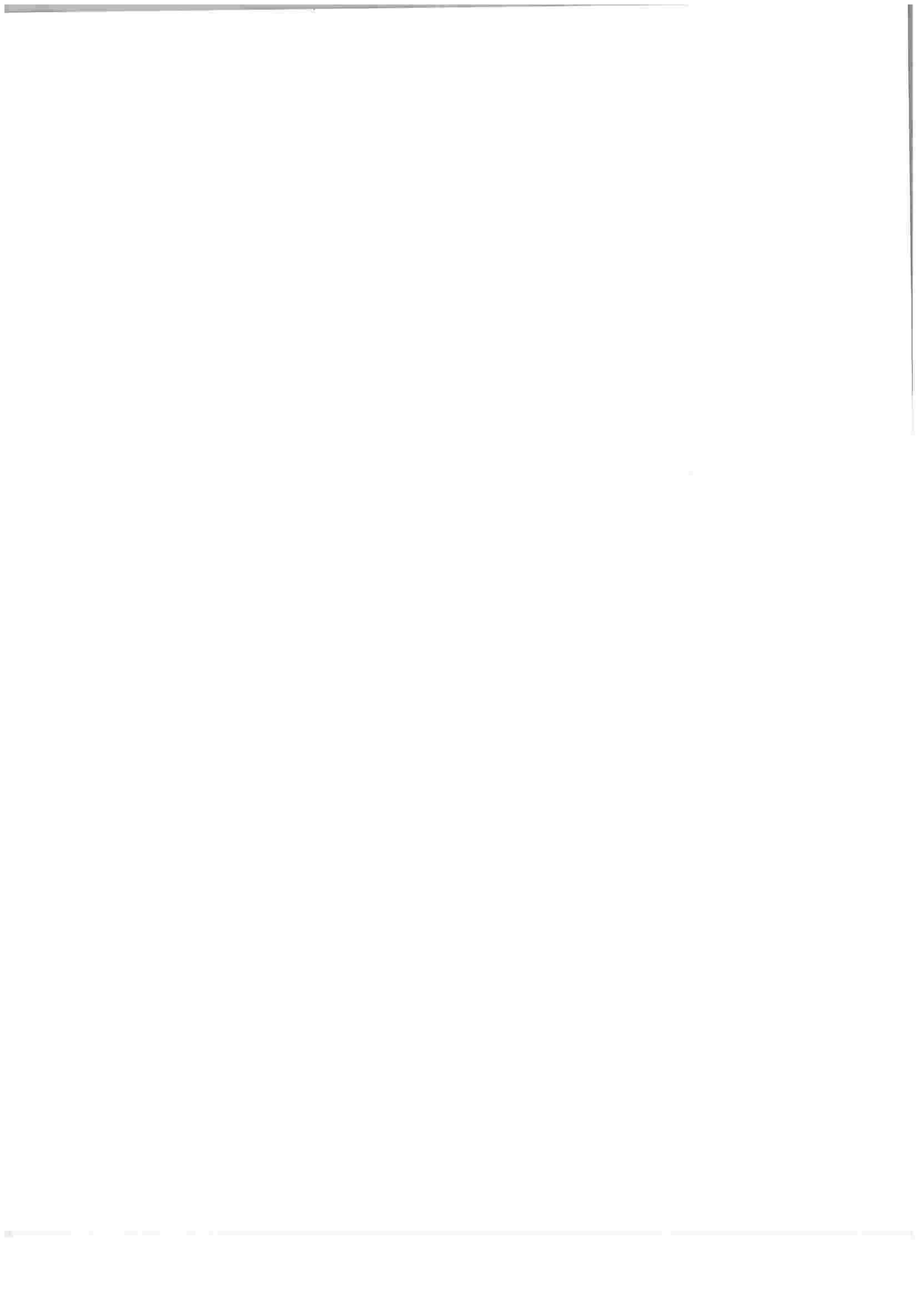


Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee; or
I have not made or enclosed payment of the fee because this application has been made in
relation to the introduction of the late night levy.
- I have sent copies of this application and the plan to responsible authorities and others where
applicable.
- I understand that I must now advertise my application.
- I have enclosed the premises licence or relevant part of it or explanation.
- 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 5 – Signatures (please read guidance note 11)

Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (please read guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Signature	<i>Foot Anstey LLP</i>
Date	15/01/2014
Capacity	Solicitor to the Applicant

Where the premises licence is jointly held, signature of 2nd applicant (the current premises licence holder) 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 address for correspondence associated with this application (please read guidance note 14)

Chris Pritchett
Foot Anstey LLP
100 Victoria Street

Post town	Bristol	Post code	BS1 6HZ
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Telephone number (if any)	0117 9154928
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If you would prefer us to correspond with you by e-mail, your e-mail address (optional)

Chris.pritchett@footanstey.com

