



FJF Licensing Solutions

Safer Streets (Licensing)
Brent Council
Brent House, 3rd Floor West
349-357 High Road
Wembley
Middlesex
HA9 6EP

Date: 6th September 2012

Our Ref: FJFLS/FF/23/12

Your Ref:

E.mail: see below

Tel: 07846 747833

Dear Sirs

Application for a Premises Licence in respect of premises known as Unit 24a, Unimix House, Abbey Road, London NW10 7TR

We have been instructed to act on behalf of Opendoor Card Ltd and make an application for the grant of a new premises licence for premises to be known as Unit 24a, Unimix House, Abbey Road, London NW10 7TR.

We therefore enclose:-

1. Application form
2. Cheque for £100.00
3. A copy of the plan for the premises
4. Consent of Designated Premises Supervisor (Kunle Omilana)
5. Certificate of service

The premises licence, if granted, will allow alcohol to be delivered to customers who have placed orders via an internet website, or by telephone. Such deliveries are intended to take place between 0800hrs and 0400hrs each day.

The premises to be licensed comprise of a small office which is situated on the second floor of an office block building, situated within a large industrial area of North London. This office will be used to process orders and to store the alcohol prior to delivery.



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The licensable activity being applied for is the sale of alcohol for consumption off the premises only. Alcohol which is ordered will be delivered to the purchaser by drivers who are in the sole employ of the applicant.

All drivers shall receive training in respect of their responsibilities, and in particular the measures outlined in Appendix A of the application in respect of promoting the licensing objectives.

We have only submitted the relevant pages of the application form i.e. pages where there is added text. Blank pages have been omitted.

We are arranging for the public notice to be displayed on the premises and in the local newspaper as if you have received the application two working days after we post it, in accordance with the deemed service provisions contained within the Magistrates Court's Rules 1981

If there is anything in the way that we have completed the attached forms that causes you concern, or if you believe there is some omission, please contact Frank Fender on the above number so we can discuss it with you.

We would be grateful if you would acknowledge safe receipt of this letter and the relevant enclosures.

Yours faithfully

FJF Licensing Solutions

E-mail: frank@fjflicensingsolutions.co.uk

Certificate of Service

I, Frank Fender in the firm of FJF Licensing Solutions of Regent House, 5-7
Melbourne Street, Bedford, MK42 9AX refer to the following:

1. Letter to Brent District Council dated 6th September 2012
2. Application Form
3. Copy of plans
4. Consent of Designated Premises Supervisor (Kunle Omilana)
5. Cheque in the sum of £100.00

I CERTIFY that I have served documents 1-5 upon the following:

1. Safer Streets(Licensing), Brent Council, Brent House, 3rd Floor West, 349-357 High Road, Wembley, Middlesex HA9 6EP.

I FURTHER CERTIFY that I have served a true copy of documents 1-4 upon the following:

2. Chief Officer of Police, Brent Licensing Department, Wembley Police Station, 603 Harrow Road, Wembley, Middlesex HA0 2HH.
3. North West Area 1, London Fire Brigade, 169 Union Street, London SE1 0LL.
4. Trading Standards, Brent Council, Brent House 3rd Floor East Wing, 349-357 High Road, Wembley, Middlesex HA9 6BZ
5. Environmental Health, Brent Council, Brent House, 349-357 High Road, Wembley, Middlesex HA9 6EP.
6. Childrens Services, Brent Council, Chesterfield House, 9 Park Lane, Wembley, HA9 7RJ.
7. Area Planning Service, Brent Council, Brent House, 349-357 High Road, Wembley, Middlesex HA9 6EP
8. Public Safety Team, Health, Safety and Licensing, Brent Council, Brent House, 349-357 High Road, Wembley, Middlesex HA9 6BZ

I effected service by sending the said documents by post, to each and every one of them on 6th September 2012

Signed..........

**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** Opendoor Card 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 Unit 24a Unimix House Abbey Road			
Post town	London	Post code	NW10 7TR

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£3250 £965 65

Part 2 - Applicant Details

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

- a) an individual or individuals * please complete section (A)
- b) a person other than an individual *
 - i. as a limited company please complete section (B)
 - ii. as a partnership please complete section (B)
 - iii. as an unincorporated association or please complete section (B)
 - iv. other (for example a statutory corporation) please complete section (B)
- c) a recognised club 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:

Please tick yes

- 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		
I am 18 years old or over					<input type="checkbox"/> Please tick yes
Current postal address if different from premises address					
Post Town				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		

I am 18 years old or over		<input type="checkbox"/> Please tick yes	
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 Opendoor Card Limited
Address 413 Crown House North Circular Road London NW10 7PN
Registered number (where applicable) 7685920
Description of applicant (for example, partnership, company, unincorporated association etc.) Limited Company
Telephone number (if any) 0208 9618893
E-mail address (optional) ivonnedrimal@gmail.com

Part 3 Operating Schedule

When do you want the premises licence to start?

ASAP

Day	Month	Year

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

Day	Month	Year

Please give a general description of the premises (please read guidance note1)
Premises is a small storage room / office located on the second floor of a large office block situated in an industrial area of North London. Access to the office is via the car park which is also located on the second floor, and reached by a ramp at the side of the building.

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 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick yes

- 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 entertainment facilities:

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

Provision of late night refreshment (if ticking yes, fill in box L)

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

M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	0800	0400			
Tue	0800	0400			
Wed	0800	0400			
Thur	0800	0400			
Fri	0800	0400			
Sat	0800	0400			
Sun	0800	0400			

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name Kunle OMILANA	
Address 413 Crown House North Circular Road London	
Postcode	NW10 7PN
Personal Licence number (if known) 03520	
Issuing licensing authority (if known) Ealing Council	

N

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 8)
 none

O

Hours premises are open to the public Standard days and timings (please read guidance note 6)			<u>State any seasonal variations</u> (please read guidance note 4)
Day	Start	Finish	
Mon			<p><u>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</u> (please read guidance note 5)</p> <p>The premises are not open to the public</p>
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			

Please tick yes

- 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 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

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

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent (See guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	6 th September 2012
Capacity	Licensing Consultant

For joint applications signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent. (please read guidance note 12). **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 13)

Frank Fender
FJF Licensing Solutions
Regent House
5-7 Melbourne Street

Post town	Bedford	Post code	MK42 9AX
Telephone number (if any)	07846 747833		
If you would prefer us to correspond with you by e-mail your e-mail address (optional) frank@fflicensingsolutions.co.uk			

P Describe the steps you intend to take to promote the four licensing objectives:

a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)

The application is for an alcohol delivery service, delivering alcohol to customers who have ordered alcoholic products either via an internet website or via the telephone. The premises to be licensed are a small office contained within a large office block. The office will be used to receive orders and to store the alcohol prior to it being delivered. Delivery will be made by delivery drivers who will be working solely on behalf of the applicant when delivering the alcohol. The website will be www.porterlounge.co.uk (new site, being developed, not yet published)

Please see Appendix A for proposed measures to address the licensing objectives.

b) The prevention of crime and disorder

CCTV is in operation at the premises, along with 24 hour on-site security. The premises are not open to the public and therefore no public access. All staff will be trained in respect of their legal responsibilities when selling alcohol

c) Public safety

Fire risk assessment and health and safety risk assessment shall be carried out as per existing legislation. No additional measures are deemed necessary.

d) The prevention of public nuisance

No additional measures deemed necessary other than those contained within existing legislation.

e) The protection of children from harm

See Appendix A attached to this application.

Appendix A

Proposed measures to address the Licensing Objectives:

1. Alcohol shall only be sold via telephone order or orders placed via the internet. At the time an order is placed, the purchaser will be informed that appropriate ID **MUST** be produced before any alcohol is handed over. The purchaser will also be told that the credit / debit card used to buy the alcohol must also be produced when the delivery is made.
2. Appropriate ID shall be a photo style driving licence, a passport or an ID card bearing the PASS logo in a hologram format. No other form of ID shall be acceptable.
3. The customer will be asked which form of appropriate ID will be produced when the alcohol is delivered. The response from the purchaser will be passed to the delivery driver, and the delivery driver will only accept that form of ID.
4. Delivery drivers will maintain a log book which will record details of every delivery of alcohol. Details to be recorded shall be the name and address of the customer, the alcohol purchased, and the ID produced.
5. When making the delivery, the delivery driver will ask to see the payment card used to purchase the alcohol. ID will also be requested, and only the previously communicated form of ID will be accepted. The ID must show the customer is over the age of 18 years, otherwise the alcohol will not be left at the address.
6. The customers' signature shall also be obtained, and the signature will be checked against the signature on the payment card.
7. The log books maintained by the delivery drivers will be made available for inspection by the police and authorised officers of the licensing authority upon request.
8. All delivery drivers will be employed by the premises licence holder.
9. All delivery drivers will be trained in respect of their responsibilities when delivering alcohol. The training shall be refreshed at 3 monthly intervals. The training shall be documented and the records of training shall be made available for inspection by the police or authorised officer of the licensing authority upon request.

Consent of individual to being specified as premises supervisor

I KUNLE OMILANA
[full name of prospective premises supervisor]

of 413 CROWN HOUSE
NORTH CIRCULAR ROAD
LONDON
NW10 7PN

[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 PREMISES LICENCE

[type of application]

by OPENDOOR CARD LTD

[name of applicant]

relating to a premises licence —

[number of existing licence, if any]

for UNIT 24A UNIMIX HOUSE
ABBAY ROAD
LONDON NW10 7TR

[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

OPENDOOR CARD LTD

[name of applicant]

concerning the supply of alcohol at

UNIT 24 A
UNIMIX HOUSE
ABBAY ROAD
LONDON
NW10 7TR

[name and address of premises to which application relates]

I 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

03520

[insert personal licence number, if any]

Personal licence issuing authority

EALING COUNCIL

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed



Name (please print)

KUNLE OMILANA

Date

22/08/12.