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# AMBA PROPERTIES LIMITED

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*Administrative office:*

First Floor  
40 Esplanade  
St Helier  
Jersey, C.I.  
JE2 3QB  
Tel: 01534 785300  
Telefax: 01534 785399

Our ref: AG/LW/AMB501

12<sup>th</sup> April 2013

Safer Streets (Licensing)  
Brent Council  
Brent House  
3<sup>rd</sup> Floor West  
349-357 High Road

Wembley  
Middlesex  
HA9 6BZ

R'cd 15/4/13  
AM

Dear Sirs

**Amba Properties Limited**  
**Premises Licence Number 204969**  
**Heather Park Drive, Wembley, Middlesex, HA0 1SN**

Please find enclosed herewith an Application to Vary a Premises Licence, together with a cheque in the sum of £190.00 regarding the above-mentioned Property.

We look forward to receiving confirmation from you that the application has been successful.

Yours faithfully  
For and on behalf of  
**AMBA PROPERTIES LIMITED**



Timothy C Gavey  
Director  
**W.S.W Directors Limited**  
Corporate Director



## APPLICATION TO VARY A PREMISES LICENCE

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.

We AMBA PROPERTIES LIMITED

..... [insert name of applicant(s)] 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

204969

### Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description

ASK LOUNGE LIMITED, HEATHER PARK DRIVE,  
WEMBLEY, HA0 1SN

Post Town WEMBLEY

Post Code HA0 1SN

Telephone number at premises (if any)

07862 73 4605

Non-domestic rateable value of premises

£125,001 AND ABOVE.

**Part 2 - Applicant details**

Daytime contact telephone number		01534 785303	
E-mail address (optional)		lisa.woodford@seymourtrust.co.je	
Current postal address if different from premises address		FIRST FLOOR 40 ESPLANADE ST HELIER JERSEY	
Post Town		Post Code	JEZ 3QB.

**Part 3 - Variation**

Please tick  Yes

Do you want the proposed variation to have effect as soon as possible?

If not do you want the variation to take effect from

Day	Month	Year

Please describe briefly the nature of the proposed variation (Please see guidance note 1)

NAME OF PREMISES  
 PROPOSED CLOSING TIMES - EXTENDING  
 INCREASE NUMBER OF LIVE PERFORMANCES/  
 MUSICIANS TO EIGHT TO MEET REQUIREMENTS  
 OF ASIAN PERFORMANCES.  
 NAME CHANGE  
 CONFIRMING CURRENT LAYOUT

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

400

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## 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 ✓ Yes

- |  |                                     |
|--|-------------------------------------|
| a) plays (if ticking yes, fill in box A)   | <input type="checkbox"/>            |
| b) films (if ticking yes, fill in box B)   | <input type="checkbox"/>            |
| c) indoor sporting events (if ticking yes, fill in box C)  | <input type="checkbox"/>            |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D)   | <input type="checkbox"/>            |
| e) live music (if ticking yes, fill in box E)  | <input checked="" type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F)  | <input checked="" type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G)   | <input checked="" type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g)<br>(if ticking yes, fill in box H) | <input type="checkbox"/>            |

### Provision of entertainment facilities:

- |  |                                     |
|--|-------------------------------------|
| i) making music (if ticking yes, fill in box I)  | <input type="checkbox"/>            |
| j) dancing (if ticking yes, fill in box J)   | <input checked="" type="checkbox"/> |
| k) entertainment of a similar description to that falling within (i) or (j)<br>(if ticking yes, fill in box K) | <input type="checkbox"/>            |

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

### Sale by retail of alcohol (if ticking yes, fill in box M)

In all cases complete boxes N, O and P

N/A

**A**

<b>Plays</b> Standard days and timings (please read guidance note 6)			Will the performance of a play take place indoors or outdoors or both – please tick [✓] (please read guidance note 2).	Indoors	
Day	Start	Finish		Outdoors	
Mon			<b>Please give further details here</b> (please read guidance note 3)	Both	
Tue					
Wed			<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Thur					
Fri			<b>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</b> (please read guidance note 5)		
Sat					
Sun					

N/A

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			Will the exhibition of films take place indoors or outdoors or both – please tick [✓] (please read guidance note 2).	Indoors	
Day	Start	Finish		Outdoors	
Mon			<b>Please give further details here</b> (please read guidance note 3)	Both	
Tue					
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
Thur					
Fri			<b>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</b> (please read guidance note 5)		
Sat					
Sun					

C N/A

Indoor sporting events Standard days and timings (please read guidance note 6)			Please give further details (please read guidance note 3)
Day	Start	Finish	
Mon			State any seasonal variations for indoor sporting events (please read guidance note 4)
Tue			
Wed			
Thur			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 (please read guidance note 5)
Fri			
Sat			
Sun			

D N/A

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick [✓] (please read guidance note 2).	Indoors	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 3)	Both	
Tue					
Wed					
Thur			State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4)		
Fri					
Sat					
Sun			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 (please read guidance note 5)		

**E**

<b>Live Music</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of live music take place indoors or outdoors or both – please tick [✓] (please read guidance note 2)</b>	Indoors	✓
Day	Start	Finish		Outdoors	
Mon	11:00	00:30	<b>Please give further details here (please read guidance note 3)</b> NOISE EGRESS REDUCED BY BLOCKED UP WINDOWS, DOUBLE GLAZED WINDOWS & DOUBLE GLAZED SEALED DOORS  <b>State any seasonal variations for the performance of live music (please read guidance note 4)</b> OCCASIONAL LIVE MUSIC PERFORMANCE OUTDOOR DURING DAYTIME PARTIES IN THE SUMMER  <b>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 5)</b>	Both	
Tue	11:00	00:30			
Wed	11:00	00:30			
Thur	11:00	00:30			
Fri	11:00	02:00			
Sat	11:00	02:00			
Sun	12:00	23:00			

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b>Will the playing of recorded music take place indoors or outdoors or both – please tick [✓] (please read guidance note 2)</b>	Indoors	✓
Day	Start	Finish		Outdoors	
Mon	11:00	00:30	<b>Please give further details here (please read guidance note 3)</b> SAME AS NOTED IN SECTION 'E'  <b>State any seasonal variations for playing recorded music (please read guidance note 4)</b>  <b>Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)</b>	Both	
Tue	11:00	00:30			
Wed	11:00	00:30			
Thur	11:00	00:30			
Fri	11:00	02:00			
Sat	11:00	02:00			
Sun	12:00	23:00			

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of dance take place indoors or outdoors or both – please tick [✓] (please read guidance note 2).</b>	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here (please read guidance note 3)</b>		
Mon	11:00	00:30			
Tue	11:00	00:30			
Wed	11:00	00:30	<b>State any seasonal variations for the performance of dance (please read guidance note 4)</b>		
Thur	11:00	00:30			
Fri	11:00	02:00			
Sat	11:00	02:00	<b>Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)</b>		
Sun	12:00	23:00			

**H**

N/A

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)			<b>Please give a description of the type of entertainment you will be providing</b>		
			<b>Will this entertainment take place indoors or outdoors or both – please tick [✓] (please read guidance note 2).</b>	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here (please read guidance note 3)</b>		
Mon					
Tue					
Wed			<b>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4)</b>		
Thur					
Fri					
Sat			<b>Non standard timings. Where you intend to use the premises for the entertainment of 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 5)</b>		
Sun					



N/A

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			Please give a description of the facilities for making music you will be providing	
Day      Start      Finish			Will the facilities for making music be indoors or outdoors or both – please tick [✓] (please read guidance note 2).	Indoors
				Outdoors
				Both
Mon			Please give further details here (please read guidance note 3)	
Tue				
Wed				
Thur			State any seasonal variations for the provision of facilities for making music (please read guidance note 4)	
Fri				
Sat				
Sun			Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list (please read guidance note 5)	

N/A

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick [✓] (see guidance note 2).		
Day      Start      Finish			Indoors	Outdoors	
					Both
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed					
Thur			State any seasonal variations for providing dancing facilities (please read guidance note 4)		
Fri					
Sat					
Sun			Non standard timings. Where you intend to use the premises for the provision of facilities for dancing at different times to those listed in the column on the left, please list (please read guidance note 5)		

K

N/A

<b>Provision of facilities for entertainment of a similar description to that falling within (i) or (j)</b> Standard days and timings (please read guidance note 6)			<b>Please give a description of the type of entertainment facility you will be providing</b>		
			<b>Will the entertainment facility be indoors or outdoors or both – please tick [✓] (please read guidance note 2).</b>		Indoors
					Outdoors
					Both
Day	Start	Finish	<b>Please give further details here (please read guidance note 3)</b>		
Mon					
Tue					
Wed					
Thur					
Fri					
Sat					
Sun					
			<b>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within (i) or (j) (please read guidance note 4)</b>		
			<b>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within (i) or (j) at different times to those listed in the column on the left, please list (please read guidance note 5)</b>		

L

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick [✓] (please read guidance note 2).</b>		Indoors	✓
					Outdoors	
					Both	
Day	Start	Finish	<b>Please give further details here (please read guidance note 3)</b>			
Mon	11:00	00:30	<p>LAST DRINK SERVED AT 00:00 ; 30 MINUTES            DRINK UP TIME MONDAY TO THURSDAY.            LAST DRINK ON FRIDAY &amp; SATURDAY / 01:30,            SUNDAY AT 11:30</p>			
Tue	11:00	00:30				
Wed	11:00	00:30				
Thur	11:00	00:30				
Fri	11:00	02:00				
Sat	11:00	02:00				
Sun	12:00	23:00				
			<b>State any seasonal variations for the provision of late night refreshment (please read guidance note 4)</b>			
			<b>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 5)</b>			

**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 checked="" type="checkbox"/>
Day	Start	Finish		Off the premises	<input type="checkbox"/>
Mon	11:00	00:00	State any seasonal variations for the supply of alcohol (please read guidance note 4)  PREMISES CLOSE AFTER 30 MINUTES DRINK UP TIME	Both	<input type="checkbox"/>
Tue	11:00	00:00			
Wed	11:00	00:00	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 5)		
Thur	11:00	00:00			
Fri	11:00	01:30			
Sat	11:00	01:30			
Sun	12:00	22:30			

**IN ALL CASES PLEASE COMPLETE N, O, & P BELOW**

**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)

CHILDREN MAY ACCOMPANY PARENTS FOR DINING AT THE RESTAURANT. THE RESTAURANT IS COMPLETELY SEPARATED FROM THE PUBLIC BAR BY WALLS & DOOR. NOTICES WILL BE DISPLAYED TO PREVENT UNDER AGE CHILDREN ACCESS & ACCESS TO BAR COUNTERS.

THERE ARE NO GAMING MACHINES & <sup>NUDE/SEMI NUDE</sup> ADULT FILMS SHOWN IN RESTAURANT AREA OR IN THE BAR.

PREMISES MANAGED BY DESIGNATED LICENCED SUPERVISOR.

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variation (please read guidance note 4)</b>
Day	Start	Finish	
Mon	11:00	00:30	<b>Non-standard timings. Where you intend the premises to be open to the public at different times to those listed in the column on the left, please list (please read guidance note 5)</b>
Tue	11:00	00:30	
Wed	11:00	00:30	
Thur	11:00	00:30	
Fri	11:00	02:00	
Sat	11:00	02:00	
Sun	12:00	23:00	

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

- INCREASE NUMBER OF LIVE MUSIC PERFORMERS TO EIGHT AS ASIAN PERFORMANCES DICTATE LARGE GROUPS.
- EXTEND HOURS OF PREMISES OPEN AS STATED IN SECTION '0'

- Please tick ✓ Yes
- 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 failed to enclose the premises licence or relevant part of premises licence

**P** Describe any additional steps that 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, e) (please read guidance note 9)

• SENSE OF COMMUNAL FEEL, WELCOMING, SENSE OF SECURITY & PRIVACY. CONFORM TO SECURE BY DESIGN STANDARDS, 24HR/7DAY CCTV FULL COVERAGE, CLEAN, HYGIENIC, CONTEMPORARY INTERIOR, RESTAURANT SEPARATED FROM PUBLIC BAR, CHILDREN PROTECTED FROM HARM, PROMOTE & FOSTER ASIAN COMMUNITY ACTIVITIES AS WELL AS OTHER MULTICULTURAL ACTIVITIES.

b) The prevention of crime and disorder

• PREMISES & BOUNDARIES SECURED BY LOCKABLE DOORS/WINDOWS & 2.4 METER HIGH CLOSE BOARD FENCES  
• 24HR/7DAY FULL CCTV COVERAGE  
• ADEQUATELY LIT, SURROUNDED BY PUBLIC ROADS  
• MANAGED BY PROFESSIONAL LICENSED/PREMISES MANAGER & STAFF 24HR/7DAYS.  
• GLAZING/DOOR WINDOWS COMPLY WITH SECURE BY DESIGN STANDARDS.

c) Public safety

• SECURE BOUNDARY  
• MANAGER/STAFF TAKE ACTIONS TO KEEP ~~REF~~ CUSTOMERS WITHIN PREMISES  
• PROMOTION OF SENSE OF SECURITY & COMMUNITY FEEL  
• GOOD RELATIONSHIP WITH COMMUNITY POLICE & NEIGHBOURHOOD WATCH.

d) The prevention of public nuisance

• PERFORMANCES, MUSIC ACTIVITIES KEPT INDOORS, WINDOWS & DOORS DOUBLE GLAZED & SEALED TO PREVENT LOUD SOUND EGRESS.  
• ACTIVITIES LIMITED TO TAKE PLACE DURING LICENSED TIME PERIODS  
• CUSTOMER ALCOHOL CONSUMPTION LEVEL MONITORED TO PREVENT INTOXICATION & BAD BEHAVIORS.

e) The protection of children from harm

• CHILDREN ARE WELCOME TO BE IN THE RESTAURANT WITH PARENTS.  
• CHILDREN ARE PREVENTED TO GO TO PUBLIC BAR AREA BY SECURE DOOR & STAFF  
• DISPLAY WARNING NOTICES LOCATED IN KEY PLACES.  
• SENSE OF PROTECTION & SECURITY OFFERED BY THE COMMUNITY WHO COMES TO THE PREMISES.

Please tick ✓ Yes

- I have made or enclosed payment of the fee
- 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 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 5 – Signatures** (please read guidance note 10)

Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent. (Please read guidance note 11). If signing on behalf of the applicant please state in what capacity.

Signature ..... 

Date ..... 11 APRIL 2013

Capacity ..... W. S. W DIRECTORS LIMITED FOR AND ON BEHALF OF AMBA PROPERTIES LIMITED (DIRECTOR)

Where the premises licence is jointly held signature of 2<sup>nd</sup> applicant (the current premises licence holder) or 2<sup>nd</sup> 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)	
Post town	Post code
Telephone number	
If you would prefer us to correspond with you by e-mail your e-mail address (optional)	

THIS FORM IS TO BE GIVEN / SENT TO THE NEWSPAPER OFFICE

**LICENSING ACT 2003  
Notice of Application**

NOTICE IS GIVEN THAT an application has been made to Brent Council (the Licensing Authority) for a VARIATION OF TO THE PREMISES LICENCE (options at bottom of page) by AMBA PROPERTIES LIMITED (insert name of Applicant/Club) in respect of ASK LOUNGE LIMITED, HEATHER PARK DRIVE, (insert full name and postal address of Premises/Club) WEMBLEY, HA0 1SN

The details of the application are as follows: TO CONFIRM THE CHANGE OF OWNERSHIP, PREMISES NAME, EXISTING PREMISES PLAN, AND PROPOSED CLOSING TIME, INCREASE OF LIVE MUSICIANS TO EIGHT. (include the details of the activities/changes to the activities, type of entertainment and appropriate days and times).

Details of the application may be inspected between the hours of 9am and 4pm at Brent Council, Safer Streets, Brent House, 3<sup>rd</sup> Floor West, 349-357 High Road, Wembley, HA9 6BZ or by visiting the authority's website: [www.brent.gov.uk](http://www.brent.gov.uk)

Any interested party or responsible authority may make representations in respect of the application, which must be submitted, in writing, to the above address within 28 days of the date below.

This notice remains in force from and including the day after the giving of this notice to the licensing authority, namely ..... 20....., for 28 consecutive days.

It is an offence knowingly or recklessly to make a false statement in connection with an application. The maximum fine on summary conviction is £5,000.

- Premises Licence
- Variation to the Premises Licence
- Club Premises Certificate
- Variation to the Club Premises Certificate

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# LONDON BOROUGH OF BRENT

## LICENSING ACT 2003

### NOTICE OF APPLICATION FOR LICENCES

Date: \_\_\_\_\_

(a) Full names of applicant

NOTICE IS GIVEN THAT (a) AMISA PROPERTIES LIMITED

(b) Name & address of premises

trading at: (b) ASK LOUNGE LIMITED, HEATHER PARK DRIVE, WEMBLEY, HA0 1SN

(c) A new premises licence or a variation to the existing licensable activities

has applied to Brent Council for (c) VARIATION TO THE EXISTING LICENSABLE ACTIVITIES

as stated below:

Licensable Activities	Mon		Tues		Wed		Thur		Fri		Sat		Sun	
	Start	Finish	Start	Finish	Start	Finish	Start	Finish	Start	Finish	Start	Finish	Start	Finish
	11:00	00:30	11:00	00:30	11:00	00:30	11:00	00:30	11:00	02:00	11:00	02:00	12:00	23:00

Anyone wishing to oppose the application must give notice in writing to the:

**SERVICE DIRECTOR, SAFER STREETS DIVISION  
BRENT HOUSE, 3<sup>rd</sup> FLOOR EAST, 349-357 HIGH ROAD, WEMBLEY, MIDDX, HA9 6EP.  
TEL: (020) 8937 5359 WITHIN 28 DAYS OF THE DATE OF THIS NOTICE,  
specifying the grounds of opposition.**

Persons objecting to the grant of licences must be prepared to attend in person at a hearing before a committee of the Council.

**NOTE: Your objection will form part of the committee report and forwarded to the applicant. Please let us know if you have a valid reason for your personal details to be removed.**

This notice must be completed and on the same day on which the application is made must be exhibited on a conspicuous part of the premises where it can easily be seen and read by persons in the street. The notice must be kept exhibited for not less than 28 days.