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.

I/We MR (Insert apply for a r	PRITECHE VELGI name(s) of applicant) oremises licence under section 17 of the sylvant application of the Licensing Act 2003 nises details			for the premises desc at licensing authority	ribed in Part 1 below y in accordance with	
238A EALI	ss of premises or, if none, ordnance surv ESTAURANT NG ROAD	ey map referen	nce or de	scription		
Post town	WEMBLEY			Postcode	HA0 4QIL	
Telephone nu	umber at premises (if any)					
	rateable value of premises	£ 25000.00				
art 2 - Applic						
	ether you are applying for a premises lice	ence as P	ease tick	as appropriate		
	ividual or individuals * on other than an individual *			please complete se	ection (A)	
ii i	as a limited company/limited liability pa as a partnership (other than limited liabil as an unincorporated association or	ity)		please complete se please complete se please complete se	ction (B)	
	other (for example a statutory corporation nised club v	1)		please complete section (B) please complete section (B)		
the prop	orietor of an educational establishment service body			please complete sec please complete sec please complete sec	etion (B)	

	a persor	n who is 1 10 (c14) i	registere n respec	d under Pai t of an inde	t 2 of the C pendent ho	Care Standa spital in W	rds [ales	נ	please complete s	ection (B)	
a)	a persor	n who is	registere	1dan Ch	apter 2 of I	Part 1 of the	e	ב	please complete		
)	the chic	the chief officer of police of a police force in England and please Wales					please complete				
Ifv	ou are api	olying as	a persor	n described	in (a) or (b) please co	nfirm (by	tickii	ng yes to one box	below):	
am	carrying (on or pro	posing to	carry on a	business v	vhich invol	ves the w	se of t	he premises for li	censable	\boxtimes
activi am	ities; or making tl statut a fun	he applic tory func action dis	ation pur tion or charged	rsuant to a	f Her Maje	sty's prerog					
11 (<i>1</i>	JOIVIDA	JAL AP	PLICAN	ITS (fill in	as applicab	ole) 					
Mr		Mrs		Miss		Ms			er Title (for nple, Rev)		
	name LGI					P	irst nam RITEC	HE_	57 pl	tiple yes	<u></u>
	te of birtl	h marie			I am	18 years o	ld or ove	er	⊠ Plea	se tick yes	
	tionality		GUESE								
die	ILLETIF TOST		ioress ::	l l							
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Po Di E- (o	ferent fro dress ost town aytime co -mail add optional)	ontact tel	lephone	PLICAN	(if applica	able)		e	Postcode ther Title (for kample, Rev)		
Po Da E- (o	est town aytime co mail add optional)	ontact tel	lephone UAL AP	PLICAN			s 🗆	e	ther Title (for kample, Rev)	ages tink yes	
Po Di E-(o	ost town aytime co mail add optional) COND II	ontact te	lephone UAL AP	PLICANT Mis		М	First n	e	ther Title (for kample, Rev)	ease tick yes	
Po Di E (o	est town sytime co mail add optional) COND II	ontact telestress	lephone UAL AP	PLICANT Mis	ss 🔲	М	First n	e	ther Title (for kample, Rev)	ease tick yes	
Po Di E (o	est town sytime co-mail addoptional) COND II	ontact telestress NDIVID Misth	lephone UAL AF	PLICANT	ss 🔲	М	First n	e	ther Title (for kample, Rev)	ease tick yes	

Daytime contact tele E-mail address		
(optional)		
		
B) OTHER APPLICA	NTS	
lease provide name ai	nd registered address of applicant in full. Where appro a partnership or other joint venture (other than a body	
umber. In the case of	nd registered address of applicant in full. Where approper is a partnership or other joint venture (other than a body concerned.	priate please give any registered
	oncerned.	hermo, picase give tile name
Name		
Address		
Registered number (whe	re applicable)	
Description of emplicant	(for our all	
a and abutteriff	(for example, partnership, company, unincorporated associ	ation etc.)
Telephone number (if any	у)	
E-mail address (optional)		——————————————————————————————————————
- mair address (optional)		
rt 3 Operating Schedule	e	
hen do you want the pre	mises licence to start?	DD MM YYYY
van nidek de 19		
you wish the licence to b 1?	e valid only for a limited period, when do you want it to	DD MM YYYY
ase give a general descri	intion of the	
NAME OF THE OWNER	ption of the premises (please read guidance note 1)	
DIAN/PORTUGUESE	RESTAURANT	

What lice	or more people are expected to attend the premises at any one time, please enumber expected to attend. ensable activities do you intend to carry on from the premises? see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003) sion of regulated entertainment (please read guidance note 2) plays (if ticking yes, fill in box A) films (if ticking yes, fill in box B) indoor sporting events (if ticking yes, fill in box C) boxing or wrestling entertainment (if ticking yes, fill in box D) live music (if ticking yes, fill in box E) recorded music (if ticking yes, fill in box F)	Please tick all tlat apply
g) h)	performances of dance (if ticking yes, fill in box G) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)	
	(II Horning)	
	age the same fill in how D	
	ovision of late night refreshment (if ticking yes, fill in box I)	
<u>Su</u>	pply of alcohol (if ticking yes, fill in box J)	
	all cases complete boxes K, L and M	

Standa	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	×
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 4)	Both	
Tue	10:00	00:00			
Wed	10:00	00:00	State any seasonal variations for the performance of live mu guidance note 5)	sic (please read	
Thur	10:00	00:00			
Fri	10:00	01:00	Non standard timings. Where you intend to use the premise of live music at different times to those listed in the column of (please read guidance note 6)	s for the erform	япсе
Sat	10:00	01:00	(please read guidance note 6)	n the left please	<u>list</u>
Gun	10:00	00:00			

music		Will the playing of recorded music take place indoors or	Indoors	\boxtimes
ecorded music		will the playing of recorded music tand poutdoors or both – please tick (please read guidance note 3)		
ndard days and timings case read guidance note 7)			Outdoors	
		4	Both	
Start	Finish	the way the confidence note 4)	
10:00	00:00	Please give further details nere (please read gain	•	
10:00	00:00	-		
		and variations for the playing of recorded t	nusic (please re ad	
10:00	00:00	guidance note 5)		
10:00	00:00	 		
<u> </u>		Non standard timings. Where you intend to use the pren	nises for the pla_vi	ng of
10:00	01:00	recorded music at different times to those taxes	umn on the left	Diease
10:00	01:00			
10:00	00:00			
	10:00 10:00 10:00 10:00 10:00	10:00 00:00 10:00 00:00 10:00 00:00 10:00 01:00 10:00 01:00	10:00 00:00 Please give further details here (please read guidance note 4 10:00 00:00 State any seasonal variations for the playing of recorded guidance note 5) 10:00 00:00 Non standard timings. Where you intend to use the pren recorded music at different times to those listed in the collist (please read guidance note 6)	Start Finish 10:00 00:00 Please give further details here (please read guidance note 4) 10:00 00:00 State any seasonal variations for the playing of recorded music (please read guidance note 5) 10:00 00:00 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. 10:00 01:00 10:00 01:00 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.

formances of dance indard days and timings ase read guidance note 7)		Will the performance of dance take place indoors or outdoors or both - please tick (please read guidance note 3)	Indoors	X
Start	Finish		Outdoors	
10:00	00:00	Please give further details here (please read guidance note 4)	Both	
10:00	00:00	-		
10:00	00:00	State any seasonal variations for the performance of dance (note 5)	please rea ⊂ l guidar	ice
10:00	00:00			
10:00	01:00	Non standard timings. Where you intend to use the premises of dance at different times to those listed in the column on the	for the performs	ince
10:00	01:00	(please read guidance note 6)	e leit, piezase list	
10:00	00:00			
	Start 10:00 10:00 10:00 10:00	Start Finish 10:00 00:00 10:00 00:00 10:00 00:00 10:00 01:00	start Finish 10:00 00:00 Please give further details here (please read guidance note 4) 10:00 00:00 State any seasonal variations for the performance of dance (note 5) 10:00 00:00 Non standard timings. Where you intend to use the premises of dance at different times to those listed in the column on the (please read guidance note 6)	and days and timings e read guidance note 7) Start Finish 10:00 00:00 Please give further details here (please read guidance note 4) 10:00 00:00 State any seasonal variations for the performance of dance (please read guidance note 5) 10:00 00:00 Non standard timings. Where you intend to use the premises for the reformance of dance (please read guidance note 6) Non standard timings to those listed in the column on the left, please list (please read guidance note 6)

	<u> </u>		Please give a description of the type of entertainment you will b	e providing	
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 51	_	
			Will this entertainment take place indoors or outdoors or	Indoors	
Day	Start	Finish	both - please tick (please read guidance note 3)	Outdoors	
Mon				Both	
	<u> </u>		Please give further details here (please read guidance note 4)	
Tue					
Wed					
			State any seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the seasonal variations for entertainment of a similar to the season of the season o	ar description tec	hat
Thur			State any seasonal variations for enter assume that falling within (e), (f) or (g) (please read guidance note 5)		
Fri					
l	1		is tend to use the prei	nises for the	
Sat			Non standard timings. Where you intend to use the presentertainment of a similar description to that falling with different times to those listed in the column on the left, p	nin (e), (f) or (g) a lease list (please r	<u>t</u> ead
			guidance note 6)		
Sun					
1					

Standa	te night refreshment Indard days and timings ease 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	×
Day	Start	Finish		Outdoors	
Mon	23:00	00:00	Please give further details here (please read guidance note	Both	
Tue	23:00	00:00	_ -		
Wed	23:00	00:00	State any seasonal variations for the provision of late nighter read guidance note 5)	t refreshmezat (ple	ase
Thur	23:00	00:00			
Fri	23:00	01:00	Non standard timings. Where you intend to use the premi- late night refreshment at different times, to those listed in please list (please read guidance note 6)	ses for the provision	n of
Sat	23:00	01:00	please list (please read guidance note 6)	ne comming on the	lef t
Sun	23:00	00:00			

Supply o	upply of alcohol		cohol S and timings Will the supply of alcohol be for consumption – please tick (please read guidance note 8)		Ø
Standard (please r	tandard days and timings blease read guidance note 7)			Off the premises	
			-	Both	
Day	Start	Finish	State any seasonal variations for the supply of alcohol (p	ease read guidan	note 5)
Mon	10:00	00:00	State any seasonal variations for the supply		
			NONE		
Tue	10:00	00:00			
Wed	10:00	00:00			
,,,,,	10.00			ion for the suppl	ly of
Thur	10:00	00:00	Non standard timings. Where you intend to use the pre- alcohol at different times to those listed in the column o (please read guidance note 6)	n the left, please I	st
Fri	10:00	01:00	NONE		
Sat	10:00	01:00			
Sun	10:00	00:00			

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):

supervisor (Please see declaration 2500	
Name MR MINESHKUMAR MOHANLAL VALGI	
Date of birth	
Address	
	te de la companya de
Postcode	
Personal licence number (if known)	
Issuing licensing authority (if known)	

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) NONE
Day	Start	Finish	
Mon	10:00	00:30	-
Tue	10:00	00:30	
Wed	10:00	00:30	
Thur	10:00	00:30	Non standard timings. Where you intend the premises to be open to the public a different times from those listed in the column on the left, please list (please read guidance note 6)
Fri	10:00	01:30	NONE
Sat	10:00	01:30	
Sun	10:00	00:30	

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)

- 1. Strict implementation of challenge 25 policy
- 2. CCTV to be installed and 31 days recoding system
- 3. All staff to be trained in responsible alcohol retailing
- 4. Training manual will be available at the premises
- 5. Right to work documents will be checked and kept on record for all staff.

b) The prevention of crime and disorder

- 1. The premises will have CCTV and the system will be maintained in good working order and all times the premise is open to the public, all images should be stored for a minimum of 31 -days.
- 2. The CCTV will have playback facility and all staff members will be able to show and provide police and council licensing officers recent footage with minimum delay when requested___
- 3. CCTV in operation 24hrs posters displayed across the premises.
- 4. The CCTV views are not to be obstructed, at least one CCTV camera is to be placed near—to the exit in order to capture clear facial images of all patrons leaving the premises
- 5. All staff to undertake regular training in the retail sale of alcohol.
- 6. Incident book & refusal book available on premises and updated when required.
- 7. Alcohol to be sold with a table meal only.

c) Public safety

- 1. Installation of appropriate safety equipment
- 2. Fire exit signs displayed
- 3. To comply with all current, fire, health and safety laws
- 4. CCTV working at all times
- 5. All chefs qualified with minimum level 2 food safety in catering qualification

d) The prevention of public nuisance

- 1. Notice displayed asking customers to leave quietly from premises also customers will be told in person to leave quietly and not to disturb the local neighbourhood
- 2. Strict policy in place to tell all staff not to serve alcohol to drunks at all
- 3. Appropriate signage will be displayed, in prominent position informing customers they a_re being recorded on CCTV

e) The protection of children from harm

- 1. A challenge 25 policy will be in force
- 2. Challenge 25 posters displayed where alcohol is being sold
- 3. "no proof of age no sale" signs are displayed
- 4. Refusal book kept at premises and updated on every occasion when alcohol is refused to underage.

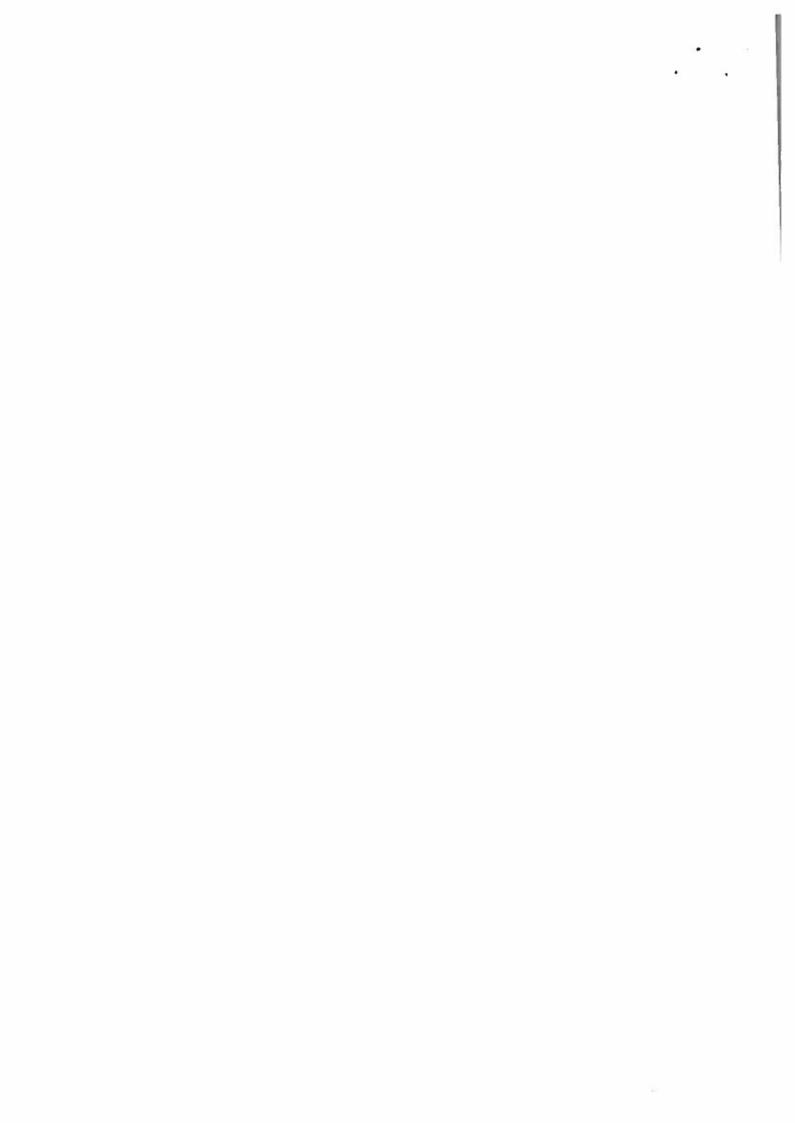
Checklist:

Please tick to indicat ← agreement

٥	I have made or enclosed payment of the fee.	
•	I have enclosed the plan of the premises.	\boxtimes
•	I have sent copies of this application and the plan to responsible authorities and other and	\boxtimes
•	I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable.	\boxtimes
		· 🛛
•	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.	\boxtimes
•		\boxtimes
-	[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 DISQUIALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AND ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT WILL BE LIMABLE 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 E 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 segning on behalf of the applicant, please state in what capacity.

Declaration	 [Applicable to individual applicants only, including those in a partnership while the 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 					
Signature	Margaret					
Date	27 – 04 - 2018					
Capacity	DULY AUTHORISED AGENT					
guidance note 13) Signature Date	tions, signature of 2 nd applicant or 2 nd applicant's solicitor or other authorised agent (p l ease read . If signing on behalf of the applicant, please state in what capacity.					
Capacity						
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14) MR MANPREET S KAPOOR PERSONAL LICENCE COURSES UK LTD						
Post town	Postcode					
relephone number (if any)						
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)						

