



Brent

NEW PREMISES LICENCE APPLICATION FORM

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 LA BOTTEGA DI ANNA LTD

.....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	
25A, WALM LANE	
Post town	Post code
LONDON	NW2 5SH

Telephone number of premises (if any)

Non-domestic rateable value of premises

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* ☒ please complete section (B)
- i. as a limited company/limited liability partnership ☐ please complete section (B)
- ii. as a partnership (other than limited liability) ☐ 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
- o Statutory function or ☐
- o A function discharged by virtue of Her Majesty's prerogative ☐

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other title ☐
(for example, Rev)

Surname

First names

Date of Birth

I am 18 years old or over ☐ (Please tick yes)

Nationality

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 ☐

Mrs ☐

Miss ☐

Ms ☐

Other title
(for example, Rev) ☐

Surname

First names

Date of Birth	I am 18 years old or over <input type="checkbox"/> (Please tick yes)
Nationality	

Current postal
address
if different from
premises address

Post Town


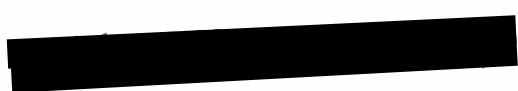


Postcode

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 case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name	LA BOTTEGA DI ANNA LTD
Address	25 A, WALM LANE, LONDON, NW2 5SH
Registered number (where applicable)	
Description of applicant (for example, partnership, company, unincorporated association etc.)	
Telephone number (if any)	
E-mail address (optional)	

Part 3 Operating Schedule

When do you want the premises licence to start?

Day	Month	Year
11	09	2018

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

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If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend

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Please give a general description of the premises (please read guidance note 1)

GROUND FLOOR CAFE AND DELI, WITH A BASEMENT WHICH IS USED FOR STORAGE. WE ALSO HAVE A TOILET AT THE BACK OF GROUND FLOOR. A SMALL SHOP SELLING ITALIAN PRODUCTS. WE WOULD LIKE TO SELL WINE BY THE GLASS OR BOTTLE AND BEERS TO CONSUME ON THE PREMISES AND ALSO BOTTLES OF WINE OR BEERS TO TAKE OFF THE PREMISES FROM THE SMALL SHOP. WE WOULD LIKE TO BE ABLE TO SERVE ALCOHOL IN THE EXTERNAL SEATING AREAS AT THE FRONT OF THE PREMISES. ALREADY HAS THE CORRECT PERMISSION IN PLACE, IN THE FORM OF A STREET LICENCE, GRANTED BY THE LICENSING TEAM.

Please tick ✓ Yes

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

- 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) ☐

Sale 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)			Will the performance of a play 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			State any seasonal variations for performing plays (please read guidance note 5)		
Wed			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 (please read guidance note 6)		
Thur					
Fri					
Sat					
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	
Day	Start	Finish		Outdoors	
Mon			Please give further details here (please read guidance note 4)	Both	
Tue					
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 5)		
Thur					
Fri			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)		
Sat					
Sun					

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption (Please tick box ✓) (please read guidance note 8)	On the premises	
Day	Start	Finish		Off the premises	
Mon	8.00 AM	10.30 PM	State any seasonal variations for the provision of late night refreshment (please read guidance note 5)		
Tue	8.00 AM	10.30 PM			
Wed	8.00 AM	10.30 PM	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)		
Thur	8.00 AM	10.30 PM			
Fri	8.00 AM	10.30 PM			
Sat	8.00 AM	10.30 PM	N/A		
Sun	8.00 AM	10.30 PM			

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 STEFANO PERLI

Date of Birth [REDACTED]

Address [REDACTED]

Postcode [REDACTED]

Personal Licence number (if known) [REDACTED]

Issuing licensing authority (if known) [REDACTED]

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)

NO OTHER ADULT ENTERTAINMENT APART FROM
THE SALE OF ALCOHOL

L

Hours premises are open to the public
Standard days and timings
(please read guidance note 7)

Day	Start	Finish
Mon	7.00 AM	11.00 PM
Tue	7.00 AM	11.00 PM
Wed	7.00 AM	11.00 PM
Thur	7.00 AM	11.00 PM
Fri	7.00 AM	11.00 PM
Sat	3.00 AM	11.00 PM
Sun	2.00 AM	11.00 PM

State any seasonal variation (please read guidance note 5)

Non-standard timings. Where you intend to use 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 6)

M 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 10)

STRONG MANAGEMENT CONTROL AND EFFECTIVE TRAINING OF ALL STAFF SO THAT THEY ARE AWARE OF THE PREMISES LICENCE AND THE REQUIREMENTS TO MEET THE FOUR OBJECTIVES WITH PARTICULAR ATTENTION TO:

- NO SALE OF ALCOHOL TO UNDERAGE PEOPLE
- NO DRUNK BEHAVIOUR ON THE PREMISES AREA AND NO DEALING WITH DRUGS
- VIGILANCE IN PREVENTING ANY TYPE OF HARM IN THE PREMISES
- RECORD KEEPING OF ACCIDENTS LOG BOOK

b) The prevention of crime and disorder

VIGILANCE AND AWARENESS ON ALCOHOL BOUGHT AND TOOK AWAY FROM THE PREMISES.

NO SALE TO UNDERAGE PEOPLE AND RECYCLING GLASS IN PLACE
MAIN DOOR SAFELY SHUT DOWN EVERY NIGHT.

c) Public safety

PREMISES OUTSIDE AREAS WILL BE KEPT CLEAN AND FREE OF GLASSES
IF LITTERAGE OCCURS OUTSIDE, BUT IN APPROXIMITY TO THE PREMISES,
CLEANING POLICY IN PLACE PROTECTING SUCH AREA

d) The prevention of public nuisance

NOISE IN THE PREMISES WILL NEVER BE TURNED UP ANNOYINGLY.
VIGILANCE ON CLIENTS STOPPING OUTSIDE.

e) The protection of children from harm

CHILDREN MUST BE KEPT AWAY FROM POSSIBLE DANGER POINTS IN
AND OUT THE PREMISES. IT IS RECOMMENDED PARENTS' PRESENCE
AT ALL TIMES

Checklist

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 ☒
- (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. (Please read guidance note 12). If signing on behalf of the applicant please state in what capacity.

Declaration

- (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 

Date 11/09/2018

Capacity DPS AND DIRECTOR