

Business - Application to vary a premises licence under the Licensing Act 2003

03/02/2017

Business - Application to vary a premises licence under the Licensing Act 2003

Ref No. 758904

Please enter the name(s) of the premises licence holders who is applying to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

	DISTRIANDINA UK LTD
Premises licence number	845662

Non-domestic rateable value of premises in order to see your rateable value click here (opens in new window)

£	25,500
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Postal address of premises or, if none, ordnance survey map reference or description

Address Line 1	UNIT6, FARRELL COURT
Address Line 2	ELEPAHANT ROAD
Town	LONDON
County	
Post code	SE17 1LB
Ordnance survey map reference	178888532085
Description of the location	
Telephone number	020 7701 5425/079677

Please select the capacity in which you are applying to convert your existing licence

Daytime contact telephone number	020 7701 5425
Email address	DISTRI6@HOTMAIL.COM
Postal Address if different from premises address	
Town / City	
Postcode	

Do you want the premises licence to have effect as soon as possible?

Please tick	Yes
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If not from what date do you want the variation to take effect?

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	I agree
PaymentDescription	,
AuthCode	479707
LicenceReference	LPV-94212-49
PaymentContactEmail	

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

Full name	NOEL SAMAROO
Date (DD/MM/YYYY)	03/02/2017
Capacity	DULY AUTHORISED AGENT

Where the premises licence is jointly held, please enter the 2nd applicants name (the current premises licence holder) or 2nd solicitor or other authorised agent (please read guidance note 13). If completing on behalf of the applicant, please state i

Full name	
Date (DD/MM/YYYY)	
Capacity	

Contact name (where not previously given) an address for correspondence associated with this application (please read guidance note 14)

Contact name and address for correspondence	MR NOEL ANTHONY SAMAROO NTAD CONSULTANTS LTD 2 SPRINGFIELD ROAD CRAWLEY WEST SUSSEX RH11 8AD
Telephone No.	075 4444 0655
If you prefer us to correspond with you by e-mail, your email address (optional)	info@ntad.co.uk

The information you provide will be used fairly and lawfully and Southwark Council will not knowingly do anything which may lead to a breach of the Data Protection Act 1998.

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)

WE WOULD LIKE TO APPLY TO MODIFY THE FOLLOWING CONDITIONS TO READ :-

ANNEX 3-

791 That a min of two SIA licenced door supervisors shall be on duty at the premises Monday to Sunday from 22:00 with a minimum of three SIA licenced door supervisors from 23:00 Monday to Thursday and a min of Five SIA licenced door supervisors until the terminal hour Friday and Saturday one of which must be female.

847 that an ID scanning system, to the reasonable satisfaction of the police, be installed and maintained.

The system shall be capable of sharing information about banned customers with other venues, identify the hologram of an ID, read both passports and ID cards and identify fake or forged documents to a reasonable standard. The system will be in operation from 22:00 until last entry 02:00

All persons entered prior to 22:00 that wish to remain in the premises must be scanned prior to 22:00.

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"/>
				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 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)			Will the exhibition of films 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 exhibition of films (please read guidance note 5)		
Thur					
Fri			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 (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			
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for the performance of live music (please read guidance note 5)		
Thur					
Fri			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)		
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	Please give further details here (please read guidance note 4)		
Mon					
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)			<u>Will the performance of dance 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 performance of dance</u> (please read guidance note 5)			
Thur						
Fri						
Sat			<u>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</u> (please read guidance note 6)			
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	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 4)		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5)		
Fri					
Sat			<u>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</u> (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						
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 (please read guidance note 8)	On the premises <input type="checkbox"/>
				Off the premises <input type="checkbox"/>
				Both <input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 5)	
Mon				
Tue				
Wed				
Thur			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)	
Fri				
Sat				
Sun				

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).

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variations</u> (please read guidance note 5)
Day	Start	Finish	
Mon			
Tue			
Wed			
Thur			
Fri			
Sat			
Sun			<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 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.

Please tick as appropriate

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

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)

It is felt by the premises licence holders that the business model has changed over the last three years and the premise now operates as a family restaurant until 22:00 this has proved to be successful. However the extra cost and to be asking customers that have come for diner to be scanned is felt to be totally unnecessary we therefore ask for the modification of the conditions to be considered.

b) The prevention of crime and disorder

No further variation requested with the exception of the proposed

c) Public safety

No further variation requested with the exception of the proposed

d) The prevention of public nuisance

No further variation requested with the exception of the proposed

e) The protection of children from harm

No further variation requested with the exception of the proposed

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. x
- I have sent copies of this application and the plan to responsible authorities and others where
applicable. x
- I understand that I must now advertise my application. x
- I have enclosed the premises licence or relevant part of it or explanation. x
- I understand that if I do not comply with the above requirements my application will be
rejected. x

**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	
Date	02 FEBRUARY 2017
Capacity	DULY AUTHORISED AGENT

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)

**MR NOEL ANTHONY SAMAROO
NTAD CONSULTANTS LTD
2 SPRINGFIELD ROAD
CRAWLEY
WEST SUSSEX
RH11 8AD**

Post town	CRAWLEY	Post code	RH11 8AD
Telephone number (if any)			

If you would prefer us to correspond with you by e-mail, your e-mail address (optional)

Notes for Guidance

This application cannot be used to vary the licence so as to extend the period for which the licence has effect or to vary substantially the premises to which it relates. If you wish to make that type of change to the premises licence, you should make a new premises licence application under section 17 of the Licensing Act 2003.

1. You do not have to pay a fee if the only purpose of the variation for which you are applying is to avoid becoming liable to the late night levy.
2. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies, you must include a description of where the place will be and its proximity to the premises.
3. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
4. For example state type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
5. For example (but not exclusively), where the activity will occur on additional days during the summer months.
6. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
7. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
8. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
9. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
10. Please list here steps you will take to promote all four licensing objectives together.
11. The application form must be signed.
12. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
13. Where there is more than one applicant, each of the applicants or their respective agents must sign the application form.
14. This is the address which we shall use to correspond with you about this application.