22/08/2018

Business - Application for a premises licence to be granted under the Licensing Act 2003 Ref No. 1080326

Name of Applicant

Please enter the name(s) who is applying for a premises licence under section 17 of the Licensing Act 2003 and am making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

Total Control	 	
Muriacou Cunderenalan		
Murugesu Sundarapalan		
1 3		- 3

Premises Details

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

£	10600
	Band D and E only applies to premises which uses exclusively or primarily for the supply of alcohol for consumption on the premises
1880	Yes

Premises trading name

 T	 	
KG2P Convenience store		2.0
NGZE CONVENIENCE SLOTE		

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

Address Line 1	Unit 1 and 2				
Address Line 2	Northchurch Dawes Street				
Town	London				
County					
Post code	se17 2aq				
Ordnance survey map reference					
Description of the location					
Telephone number					

Applicant Details

Please select whether you are applying for a premises licence as

		 7.00	 	
	An individual or individuals			
1	An individual or individuals			

If you are applying as an individual or non-individual please select one of the following:-

r.	I am carrying on or proposing to carry on a business which involves the use of the I am carrying on or proposing to carry on a business which involves the use of the
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Details of Individual Applicant

Personal Details

Title	Mr	
If other, please specify		
Surname	Murugesu	i)
Forenames	Sundarapalan	
I am 18 years old or over	Yes	
Nationality		

Current Address

Street number or Building name	3	•	
Street Description			19.
Town			
County	300		
Post code	178	*	

Contact Details

Daytime contact telephone number			11.00		
		* ***		 	
Email Address	16				

Do you wish to add a second individual applicant?

No	3 2		

Operating Schedule

When do you want the premises licence to start?

*	22/08/2018	8		

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

1	22/08/2021
General description of	of premises (see guidance note 1)
	Front left hand side of the store is the counter. Behind the counter there is alcohol and cigarettes. Left hand side middle of the shelf there is wine. Left hand side back corner there are beer fridges and beers.
If 5,000 or more peop to select the number.	ole are expected to attend the premises at any one time please use the drop down below
	Less than 5000
Operating Schedule p What licensable activ	art 2
	(Please see sections 1 and 14 of the Licensing Act 2003 and schedule 1 and 2 of the Licensing Act 2003)
Provision of regulated	d entertainment (Please read guidance note 2)
Provision of late night	t refreshment
Supply of alcohol	
X	j) Supply of alcohol
J - Supply of Alcohol	

Will the supply of alcohol be for consumption (Please read guidance note 8)

Off the promises	w.	
Off the premises		
The state of the s		

Standard days and timings for Supply of alcohol (Please read guidance note 7)

Day ·	Start	Finish
Mon	08:00	23:00
9	08:00	23:00
Tues	08:00	23:00
	08:00	23:00
Wed	08:00	. 23:00
	08:00	23:00
Thur	08:00	23:00
	08:00	23:00
Fri	. 08:00	23:00
	08:00	23:00
Sat	08:00	23:00
	08:00	23:00
Sun	08:00	23:00
	08:00	23:00

State any seasonal variations for the supply of alcohol (Please read guidance 5)

none			

Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed. Please list, (Please read guidance note 6)

 	40400 PM	1444	10.	
none				

Please download and then upload the consent form completed by the designated proposed premises supervisor

Schedule-15-6-3-17-Consent-of-individual-to-being-specified-as-premise.docx

Premises Supervisor

Full name of proposed designated premises supervisor

First names	Murugesu	98997	
Surname	Sundarapalan	 ***	

Date Of Birth	•			¥ *		

Address of proposed designated premises supervisor

Street number or Building name	35: 		
Street Description			
Town		2	18 (g
County			*
Post code			- NO - O - MO - O - I

Personal licence number of proposed designated premises supervisor, if any,

Personal licence number (if known)		32	
Issuing authority (if known)	Kingston and Sutton Shared Environment Service	107	8

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)

_	T			7	V	
	Not allowed to	sell alcohol to ar	nyone under 18			9

L - Hours premises are open to public

Hours premises are open to the public (standard timings Please read guidance note 7)

Day	Start	Finish
Mon	08:00	23:00
	08:00	23:00
Tues	08:00	23:00
	08:00	23:00
Wed	08:00	23:00
	08:00	23:00
Thur	08:00	23:00
	08:00	23:00
Frí .	08:00	23:00
FI (a)	08:00	23:00
Sat	08:00	23:00
	08:00	23:00
Sun	08:00	23:00
	08:00	23:00

State any seasonal	variations (Please read guidance note 5)	
	only permit hours	
Non standard timing those listed. Please	s. Where you intend to use the premises to be open to the publist, (Please read guidance note 6)	lic at different times from
	only permitted hours	
M - Steps to promote	four licencing objectives	
a) General - all four	licensing objectives (b,c,d,e) (Please read guidance note 10)	
77. X	N/A	
b) the prevention of	crime and disorder	
	N/A	
c) public safety		
	N/A	(9)
d) the prevention of p		
	N/A	
e) the protection of c	hildren from harm	
	N/A	
Please upload a plar	of the premises	,
· · · · · · · · · · · · · · · · · · ·	shop.rtf	
Please upload any a	dditional information i.e. risk assessments	į at
	6	

Checklist

	be rejected.	the premises. comply with the above requirements w advertise my application (In the loca	
		(24)	
Home Office	Declaration		38

Please tick to indicate agreement

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lam not a	company or limited liability partnership	
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Proof of Entitlement to work in the UK

Please upload proof of entitlement to work in the UK

 10.101000000	
W/P-20180822-17-41-33-Pro ind	
WP-20180822-17-41-33-Pro.ipg	

Declaration

I agree to the above statement

	Yes	T.		
PaymentDescription	1.1	777.77		
AuthCode	594035			14
LicenceReference	ks102 94212	14		7,770,000
PaymentContactEmail			***************************************	Tax.

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	Murugesu Sundarapalan	
Date (DD/MM/YYYY)		V
Capacity	100%	

Where the premises licence is jointly held, enter the 2nd applicant (the current premises licence holder) or 2nd applicant's solicitor or other authorised agent (guidance note 13). If completing on behalf of the applicant state in what capacity

Full name			
Date (DD/MM/YYYY)	1		
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	i	
Telephone No.		
If you prefer us to correspond with you by e-mail, your email	2	,
address (optional)	8	2

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.

Consent of individual to being specified as premises supervisor

ì	wurugesu Sundarap	alan	g. (S	ā.
[fu	Ill name of prospective pren	nises supervisor]		¥
	g *		67	a
of	a a		٠	3
				199
50		20	9	2
	36 28		18	
[home ad	dress of prospective premis	ses supervisor]		
25	confirm that I give my or in relation to the ap		pecified as the des	ignated premises
	s licence		en .	vi e
[type of a	pplication]	5	**	
by				8
Mu	rugesu Sundarapalan			(K)
[name of a	pplicant]		8	
relating t	o a premises licence			
for		[number of existing I	licence, if anyj	
			2 2 2	
20	12	27	is	(IR) EE
	s		# #	27
	20.	ă w		el .
Iname and	l address of premises to wh	ich the application rela	ates]	8

and any premises licence to be granted or varied in respect of this application made by

Murugesu Sundarapalan

[name of applicant]

concerning the supply of alcohol at

KG2P Convenience Store, Unit 1 – 2 Northchurch Dawes Street, London, SE17 2AQ

[name and address of premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

[insert personal licence number, if any]

Personal licence issuing authority

Kingston and Sutton Shared Environment Service, Guildhall 2, Kingston Upon Thames. 02085475080

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



Signed

Name (please print)	nt) Murugesu Sundarapalan		
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	8	*	
Date	22/8/2018	# F	
		,	

Only one entrance which is the front entrance.

There is no kitchen.

There is no stairs.

Not connected to any other premise.

No back exit.

One corner shop.

Front left hand side is the counter.

Behind the counter there is a cigarette shelf and an alcohol shelf.

· In the middle of the left hand shelf is wine.

Left hand side back corner is beer fridge and beers.

On the right hand side there is groceries(household food items).

