



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.

RECEIVED 17 JAN 2011

I/We NELSON GUTIERREZ PARDO (Insert name(s) of applicant)

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
LAS DELICIAS
99 SOUTHAMPTON WAY
Post town LONDON Post code SE5 7SX

Telephone number at premises (if any)
Non-domestic rateable value of premises £ 4500

Part 2 - Applicant Details

Please state whether you are applying for a premises licence as Please tick yes

- a) an individual or individuals * [X] please complete section (A)
b) a person other than an individual *
i. as a limited company [] please complete section (B)
ii. as a partnership [] 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 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
 - statutory function or
 - a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
PARDO			NELSON GUTIERREZ		
I am 18 years old or over				<input checked="" type="checkbox"/> Please tick yes	
Current postal address if different from premises address		51 LIMES GROVE			
Post Town	LONDON		Postcode	SE13 6DD	
Daytime contact telephone number			07960755738		
E-mail address (optional)		n_j_g_pardo75@yahoo.com			

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
N/A					
I am 18 years old or over				<input type="checkbox"/> Please tick yes	

Current postal address if different from premises address			
Post Town			
Daytime contact telephone number		N/A	
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 the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name	
Address	
Registered number (where applicable)	
	N/A
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	
2	0	1	2	2	0
1	0				

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

Day		Month		Year	

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

LAS DELICIAS CONSISTS OF A RESTAURANT/ CAFE SPECIALIZING IN BOLIVIAN FOOD, IT ALSO HAS TOILET FACILITIES.
 LAS DELICIAS HAS A FAMILY FRIENDLY ATMOSPHERE WHERE FAMILIES CAN COME FOR DINNER AND HAVE FUN AND DANCE AFTERWARDS TO SOUTH AMERICAN MUSIC; IT AIMS TO BRING SOME OF THE SOUTH AMERICAN COMMUNITY TOGETHER, TO A PLACE WHERE PEOPLE FEEL AT 'HOME'. THE MAXIMUM AROUND OF COVERS THE PREMISES CAN TAKE IS 35.

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

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

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

- | <u>Provision of regulated entertainment</u> | 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 type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H) | <input type="checkbox"/> |
|
<u>Provision of entertainment facilities:</u> | |
| i) making music (if ticking yes, fill in box I) | <input checked="" 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) (if ticking yes, fill in box K) | <input type="checkbox"/> |
| <u>Provision of late night refreshment</u> (if ticking yes, fill in box L) | <input checked="" type="checkbox"/> |
| <u>Supply of alcohol</u> (if ticking yes, fill in box M) | <input checked="" type="checkbox"/> |
| In all cases complete boxes N, O and P | |

A

Plays Standard days and timings (please read guidance note 6)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors <input type="checkbox"/>
				Outdoors <input type="checkbox"/>
Day	Start	Finish	Both <input type="checkbox"/>	
Mon			<u>Please give further details here</u> (please read guidance note 3)	
Tue				
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 4) N/A	
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 5)	
Sat				
Sun				

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	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 3)		
Mon					
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)		
Thur			N/A		
Fri			<u>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</u> (please read guidance note 5)		
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)	
Day	Start	Finish		
Mon			<div data-bbox="331 360 1214 1106" style="position: absolute; top: 0; left: 0; bottom: 0; right: 0; border: 1px solid black; transform: rotate(45deg);"></div>	
Tue				
Wed				<p><u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)</p> <p style="text-align: center;">N/A</p>
Thur				<p><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 5)</p>
Fri				
Sat				
Sun				

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors <input type="checkbox"/>	
				Outdoors <input type="checkbox"/>	
				Both <input type="checkbox"/>	
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
Thur					
			N/A		
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 5)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3) THE RESTAURANT HAS A SMALL STAGE WHERE SMALL BANDS WILL PLAY SOUTH AMERICAN MUSIC.		
Mon	09:00	21:00			
Tue	09:00	21:00	State any seasonal variations for the performance of live music (please read guidance note 4)		
Wed	09:00	21:00			
Thur	09:00	21:00	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)		
Fri	09:00	04:00			
Sat	09:00	04:00			
Sun	09:00	21:00			

F

Recorded music Standard days and timings (please read guidance note 6)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon	09:00	21:00			
Tue	09:00	21:00			
Wed	09:00	21:00	<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)		
Thur	09:00	21:00			
Fri	09:00	04:00	<u>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</u> (please read guidance note 5)		
Sat	09:00	04:00			
Sun	09:00	21:00			

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors <input type="checkbox"/>
Day	Start	Finish		Outdoors <input type="checkbox"/>
				Both <input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3) N/A	
Tue				
Wed			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)	
Thur				
Fri			<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 5)	
Sat				
Sun				

H

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

Provision of facilities for making music Standard days and timings (please read guidance note 6)			<u>Please give a description of the facilities for making music you will be providing</u> THE RESTAURANT HAS A SMALL STAGE WHERE SMALL BANDS WILL PLAY SOUTH AMERICAN MUSIC.		
			<u>Will the facilities for making music be indoors or outdoors or both – please tick</u> (please read guidance note 2)		Indoors <input checked="" type="checkbox"/>
		Both <input type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon	09:00	21:00			
Tue	09:00	21:00	<u>State any seasonal variations for the provision of facilities for making music</u> (please read guidance note 4)		
Wed	09:00	21:00			
Thur	09:00	21:00	<u>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</u> (please read guidance note 5)		
Fri	09:00	04:00			
Sat	09:00	04:00			
Sun	09:00	21:00			

J

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			<u>Will the facilities for dancing be indoors or outdoors or both – please tick</u> (see guidance note 2)	Indoors <input checked="" type="checkbox"/>	
				Outdoors <input type="checkbox"/>	
				Both <input type="checkbox"/>	
			<u>Please give a description of the facilities for dancing you will be providing</u> THE RESTAURANT HAS A SMALL AREA WHERE PEOPLE HAVE SPACE FOR DANCING.		
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon	09:00	21:00			
Tue	09:00	21:00			
Wed	09:00	21:00			
Thur	09:00	21:00			
Fri	09:00	04:00			
Sat	09:00	04:00			
Sun	09:00	21:00	<u>State any seasonal variations for providing dancing facilities</u> (please read guidance note 4)		
			<u>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 5)		

K

Provision of facilities for entertainment of a similar description to that falling within i or j Standard days and timings (please read guidance note 6)			<u>Please give a description of the type of entertainment facility you will be providing</u>		
Day	Start	Finish	<u>Will the entertainment facility be indoors or outdoors or both – please tick</u> (please read guidance note 2)	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 3)		
Wed					
Thur			<u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u> (please read guidance note 4)		
Fri			N/A		
Sat			<u>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</u> (please read guidance note 5)		
Sun					

L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon	09:00	21:00	<u>Please give further details here</u> (please read guidance note 3)	Both	<input type="checkbox"/>
Tue	09:00	21:00			
Wed	09:00	21:00	<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Thur	09:00	21:00			
Fri	09:00	04:00	<u>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</u> (please read guidance note 5)		
Sat	09:00	04:00			
Sun	09:00	21:00			

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"/>
				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 4)		
Mon	09:00	21:00			
Tue	09:00	21:00			
Wed	09:00	21:00			
Thur	09:00	21:00			
Fri	09:00	04:00			
Sat	09:00	04:00			
Sun	09:00	21:00			
			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)		

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name	NELSON GUTIERRE PARDO
Address	51 LIMES GROVE LONDON
Postcode	SE13 6DD
Personal Licence number (if known)	
Issuing licensing authority (if known)	

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)

N/A

O

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	09:00	21:30	<p>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 (please read guidance note 5)</p>
Tue	09:00	21:30	
Wed	09:00	21:30	
Thur	09:00	21:30	
Fri	09:00	04:30	
Sat	09:00	04:30	
Sun	09:00	21:30	

P 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 9)

LAS DELICIAS WILL IMPLEMENT ANY RECOMMENDATIONS GIVEN BY THE AUTHORITIES TO IMPLEMENT AND PROMOTE THE FOUR LICENSING OBJECTIVES. STAFF WILL BE TRAINED IN REGARDS TO THE PROTECTION OF THE LICENSING OBJECTIVES. CCTV WILL BE INSTALLED IF RECOMMENDED BY THE AUTHORITIES WITH A 28 DAY RECORDED TAPE. THE 'UNDER 21' POLICY WILL BE CARRIED OUT. WE WILL ALSO COMPLY WITH THE FIRE AND SAFETY REGULATIONS.

b) The prevention of crime and disorder

CCTV WILL BE IMPLEMENTED IF RECOMMENDED BY THE AUTHORITIES. DRUNK AND VIOLENT PERSONS WILL NOT BE SERVED OR ALLOWED IN OUR PREMISES. POSTERS AND SIGNAGE WILL BE IN PLACE - UNDER 21 POLICY, NO PROOF NO SALE, CCTV IN OPERATION. STAFF WILL BE FURTHER TRAINED. WE WILL IMPLEMENT ANY RECOMMENDATIONS GIVEN BY THE POLICE OR OTHER AUTHORITIES. A LOG BOOK WILL BE IN PLACE TO REGISTER THE NAMES OF THOSE VIOLENT AND DISORDERLY.

c) Public safety

LAS DELICIAS WILL IMPLEMENT ANY RECOMMENDATIONS GIVEN BY THE POLICE AND OTHER RESPONSIBLE AUTHORITIES. VIOLENT AND DRUNK PEOPLE WILL NOT BE SERVED, STAFF WILL BE TRAINED IN REGARDS TO THIS. THE UNDER 21 CHALLENGE WILL BE IN PLACE. LAS DELICIAS WILL PERSIST TO COMPLY WITH HEALTH AND SAFETY AND FIRE REGULATIONS. A LOG BOOK WILL BE IN PLACE TO IDENTIFY THOSE VIOLENT AND DISORDELY.

d) The prevention of public nuisance

LAS DELICIAS WILL CONTINUE TO RESPECT MEMBERS OF THE PUBLIC, STAFF AND CUSTOMERS REGARDING NOISE AND NUISANCE, A SOUND LIMITER WILL BE IMPLEMENTED IF RECOMMENDED BY THE AUTHORITIES ; NUISANCE WILL NOT BE TOLERATED. WE WILL IMPLEMENT ANY REASONABLE RECOMMENDATIONS GIVEN BY THE POLICE OR HEALTH & SAFETY OFFICER.

e) The protection of children from harm

LAS DELICIAS WILL PERSIST TO DO ANYTHING TO PROTECT CHILDRENS FROM HARM. STAFF TRAINING WILL BE ONGOING IN REGARDS TO 'NO SALE OF ALCOHOL TO PERSONS UNDER 18'. A 'NO PROOF, NO SALE' POLICY WILL BE IMPLEMENTED AND SUSTAINED. POSTERS AND SIGNAGE WILL BE UP. THE 'UNDER 21' CHALLENGE POLICY WILL ALSO BE IMPLEMENTED. ALCOHOL WILL BE STORED AWAY FROM CHILDRENS, AND IT WILL NOT BE STORED ON LOWER SHELVES. CCTV WILL BE IMPLEMENTED IF RECOMMENDED.

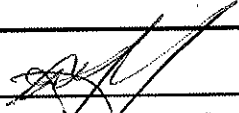
Please tick yes

- 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

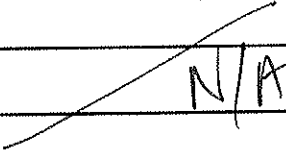
IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent (See guidance note 11). If signing on behalf of the applicant please state in what capacity.

Signature	
Date	11 th JANUARY 2011
Capacity	OWNER & MANAGER

For joint applications signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent. (please read guidance note 12). If signing on behalf of the applicant please state in what capacity.

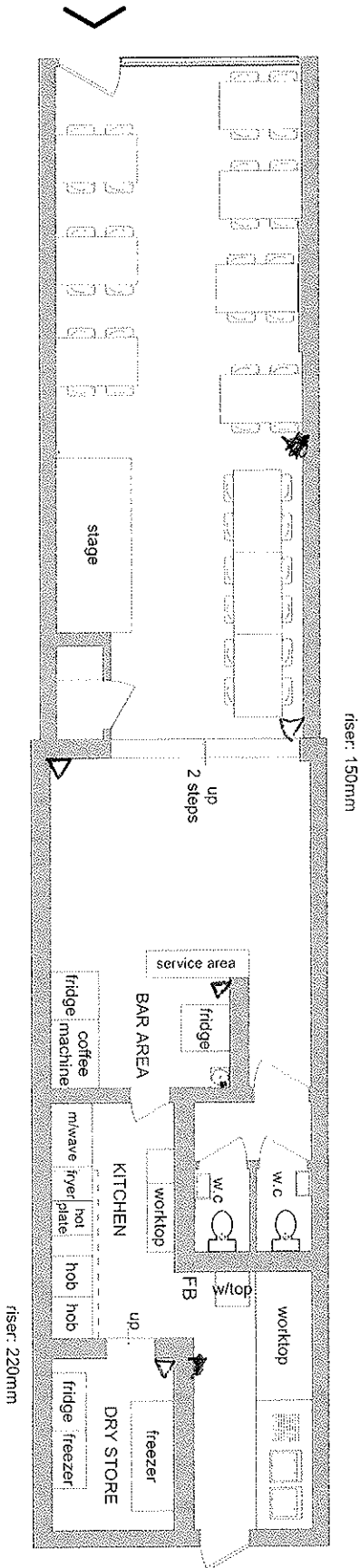
Signature	
Date	N/A
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)

MANUEL ROCHA
70 BEAUFORT COURT
BEAUFORT ROAD.

Post town	RICHMOND	Post code	TN107YA
Telephone number (if any)	02084040297 / 07868697778.		
If you would prefer us to correspond with you by e-mail your e-mail address (optional)			
manuelrocha01@hotmail.com			

Δ - EXTINGUISHERS — *ML* 08-02-2011



Las Delicias

ADDRESS OF PREMISES
 99 SOUTHAMPTON WAY,
 LONDON
 SE5 7SX

PROJECT
 PREMISES LICENSE
 APPLICATION

DRAWING TITLE
 GA PLAN

SCALE
 1:100 @ A4

DATE
 NOVEMBER 2010

LOCATION
 WHOLE
 RESTAURANT

DWG NO
 001

FB Fire Blanket