

Application to vary a premises licence 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 MEGAMUSIC ENTERTAINMENT LTD
(Insert name(s) of applicant)

being the premises licence holder, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number	830809
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Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description			
512-516 OLD KENT ROAD			
GROUND FLOOR			
Post town	LONDON	Post code	SE1 5BA

Telephone number at premises (if any)	020 7237 7452
Non-domestic rateable value of premises	£ 17 750

Part 2 – Applicant details

Daytime contact telephone number	
E-mail address (optional)	
Current postal address if different from premises address	
Post Town	Postcode

Part 3 - Variation

Please tick yes

Do you want the proposed variation to have effect as soon as possible?

If not do you want the variation to take effect from

Day		Month		Year	

Please describe briefly the nature of the proposed variation (Please see guidance note 1)

TO EXTEND THE HOURS PERMITTED FOR THE SALE OF ALCOHOL AS FOLLOWS

THURSDAY - UNTIL 04.00 THE FOLLOWING DAY

FRIDAY & SATURDAY - UNTIL 05.00 THE FOLLOWING DAY.

SUNDAY - UNTIL 04.00 THE FOLLOWING DAY.

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 yes

- 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 entertainment facilities:

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

Provision of late night refreshment (if ticking yes, fill in box L)

Sale by retail of alcohol (if ticking yes, fill in box M)

In all cases complete boxes N, O and P

PAGES 5-14 HAVE BEEN OMITTED AS
THEY DO NOT APPLY TO THIS
APPLICATION.

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"/>
				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 performing plays</u> (please read guidance note 4)	
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				

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 type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	Please give further details here (please read guidance note 3)		
Mon					
Tue					
Wed			State any seasonal variations for the provision of late night refreshment (please read guidance note 4)		
Thur			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 5)		
Fri					
Sat					
Sun					

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 type="checkbox"/>
				Off the premises	<input type="checkbox"/>
Day	Start	Finish		Both	<input checked="" type="checkbox"/>
Mon	/		State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Tue	/				
Wed	/				
Thur	03.00	04.00	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)		
Fri	04.00	05.00	ON EACH BANK HOLIDAY SUNDAY TO EXTEND THE TERMINAL HOUR FOR THE SALE OF ALCOHOL UNTIL 06.00.		
Sat	04.00	05.00			
Sun	02.00	06.00			

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)

NONE

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	23.30	<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 5) ON EACH BANK HOLIDAY SUNDAY TO EXTEND THE CLOSING TIME UNTIL 06.30
Tue	09.00	23.30	
Wed	09.00	04.30	
Thur	09.00	04.30	
Fri	09.00	06.30	
Sat	09.00	06.30	
Sun	09.00	04.30	

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

NONE



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

Please tick yes



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 failed to enclose the premises licence or relevant part of premises licence

P 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,e)** (please read guidance note 9)

AS PER EXISTING LICENCE

b) **The prevention of crime and disorder**

||

c) **Public safety**

||

d) **The prevention of public nuisance**

||

e) **The protection of children from harm**

||

Please tick yes/

- I have made or enclosed payment of the fee
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I understand that I must now advertise my application
- I have enclosed the premises licence or relevant part of it or explanation
- 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 5 – Signatures (please read guidance note 10)

Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (please read guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

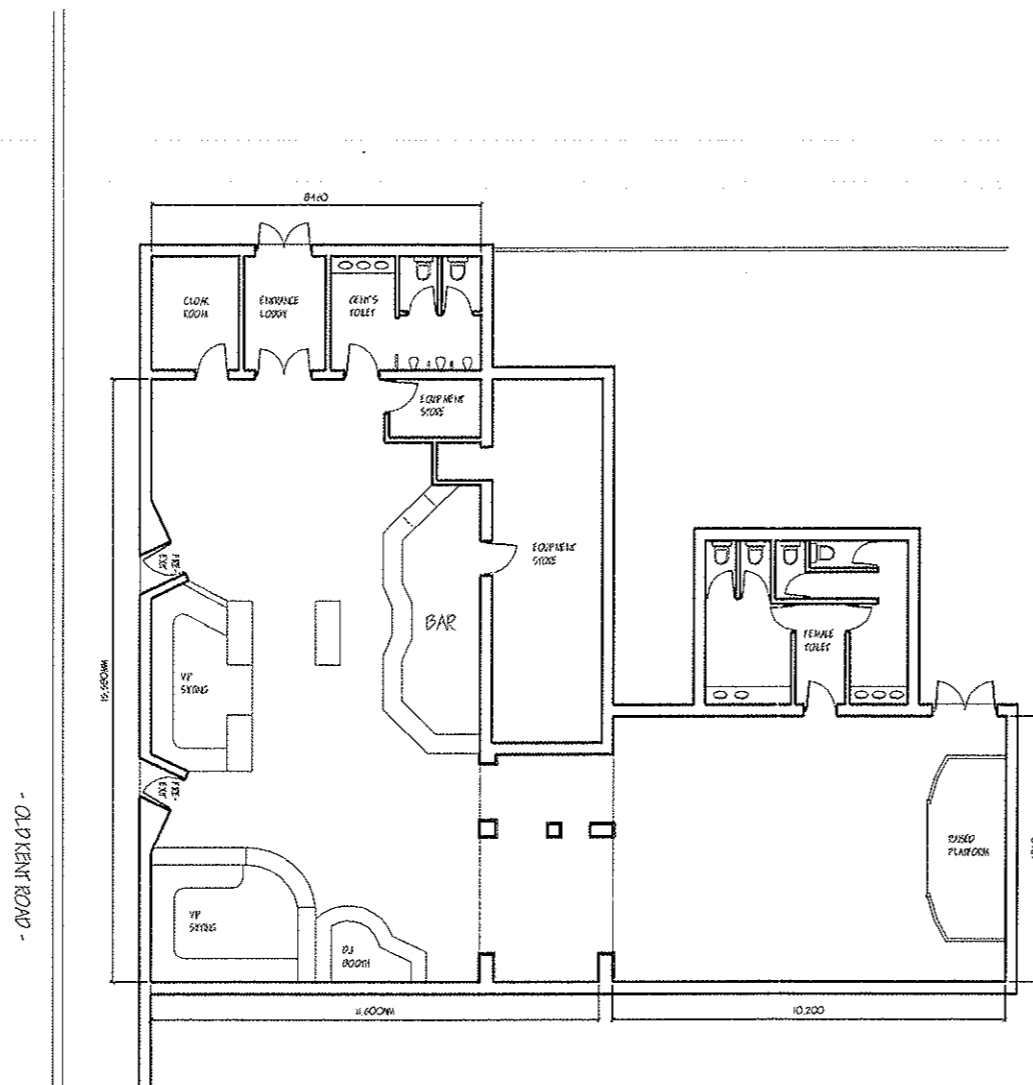
Signature	<i>ATE</i>
Date	18-08-09
Capacity	

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 12). **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 13)

Post town		Post code	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail your e-mail address (optional)			



EXISTING GROUND FLOOR LAYOUT

RECEIVED
21 OCT 2009

REVISIONS:

DWG No: Y2K9/MG/ARO1
EXISTING GROUND FLOOR LAYOUT
SCALE 1:100 DATE: OCTOBER 09

CLIENT ADDRESS:
MEGA-MUSIC ENTERTAINMENT LTD.
516 OLD KENT ROAD, LONDON SE1 5BA.

PROJECT ADDRESS:
EXISTING GROUND FLOOR LAYOUT
516 OLD KENT ROAD, LONDON SE1 5BA.

DESIGNED/DRAWN BY:
KIRSTEN ASSOCIATES INC.
179 ROBIN HOOD LANE, WALDERSLADE, KENT ME5 9NJ. TEL: 01634 669 473. FAX: 01634 319 842.

