

**APPLICATION FOR A PREMISES LICENCE TO BE GRANTED
UNDER THE LICENSING ACT 2003**

If you wish to make any representations in relation to this application, please do so in writing by midnight on Tuesday 7th November 2023 to the following address:

London Borough of Croydon
Sustainable Communities Department, Licensing Team,
3rd Floor, Zone B
Bernard Weatherill House
8 Mint Walk
Croydon, CR0 1EA

Or By Email to: licensing@croydon.gov.uk

It is an offence to knowingly or recklessly make a false statement in connection with an application. The maximum fine on summary conviction for such an offence is £5000.

New Premises Licence

Premises Details

Premises Address *

FIREAWAY 8 CHIPSTEAD VALLEY ROAD COULSDON
CROYDON CR5 2RA

Telephone number at premises (if any)

Non-domestic value of premises. *

£ 21000

Applicant Details

I/We 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.

Please state whether you are applying for a premises licence as:

a person other than an individual -as a limited company/
limited liability partnership

Applicant Details

If you are applying as a person described in one of the above please confirm: *

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or

Other Applicant (Non Individual)

Name *

RJD Corporation Ltd

Registered Address *

8 Chipstead Valley Road

Town/City *

Coulsdon

County

Other Applicant (Non Individual)

Postcode *

CR5 2RA

Registered Number (where applicable)

Description of applicant (for example partnership, company, unincorporated association, etc) *

Limited company

Telephone Number

Email *

Operating Schedule

When do you want the premises licence to start? *

06/10/2023

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

Please give a general description of the premises. *

Restaurant

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

Operating Schedule

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)

Provision of regulated entertainment (please read guidance note 2) *

Plays

Films

Indoor Sporting Events

Boxing or Wrestling

Live Music

Operating Schedule

Recorded Music

Performances of Dance

Anything of a similar description falling under Music or Dance

Provision of late night refreshment

Supply of Alcohol

Late Night Refreshment Standard Times

Standard days and timings, where you intend to use the premises for late night refreshment.(please read guidance note 7) *
Please enter times in 24hr format (HH:MM)

Day *

Weekends

22:00

02:00

Late Night Refreshment

Will the provision of late night refreshment take place indoors or outdoors or both? (please read guidance note 3) *

Indoors

Please provide further details.(please read guidance note 4)

Open to customers to sit store and deliveries

State any seasonal variations for the provision of late night refreshment.(please read guidance note 5)

N/A

Please state any non-standard timings, where you intend to use the premises for late night refreshment at different times from the Standard days and times listed?(please read guidance note 6)

N/A

Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 7) * Please enter times in 24hr format (HH:MM)

Opening Hours Standard Times

Day *

Weekdays 12:00- 22:00

Weekends: 12:00- 02:00

Licensing Objectives

Describe the steps you intend to take to promote the four licensing objectives:

a) General - all four licensing objectives (b, c, d and e)
(please read guidance note 10) *

Trained staff on site

b) The prevention of crime and disorder *

Trained staff on site

c) Public safety *

Trained staff on site

d) The prevention of public nuisance *

Trained staff on site

e) The protection of children from harm *

Trained staff on site with allergen information displayed

Declarations

Declaration Type *

Sole Applicant - Individual or Other

Declarations

I have uploaded a copy of the plan of the premises. I have uploaded a copy of the consent form completed by the individual I wish to be designated premises supervisor, if applicable. I understand 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 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.

Declarations

Signature/Declaration of applicant or applicant's solicitor or other duly authorised agent (see Guidance Note 11 & 12). If signing/applying on behalf of the applicant, please state your name and in what capacity you are authorised to sign/apply. When submitting an on-line application form the 'Declaration made' checkbox must be selected.

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).

Full Name *

Date *

05/10/2023

Capacity *

Applicant

Declaration made

Do you wish to provide alternative correspondence details? *

No

Email confirmation

On submission an email confirmation will be sent using the details below

Forename

Surname /Company Name

RJD Corporation

Email *

Telephone