

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 1st October 2024 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 unlimited.

New Premises Licence

Premises Details

Premises Address *

52 LIMPSFIELD ROAD SOUTH CROYDON CROYDON CR2
9EA

Telephone number at premises (if any)

Non-domestic value of premises. *

£ 0

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 *

Hive Design Studio & Events Limited

Registered Address *

52 Limpsfield Rd

Town/City *

South Croydon

County

England

Other Applicant (Non Individual)

Postcode *

CR2 9EA

Registered Number (where applicable)

15419824

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? *

01/10/2024

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. *

The premises is a small former council owned property, formerly a café. It entails one room, with separate WC which can accommodate 12 persons for an event. The premises is now run as a private limited company and hosts art and craft workshops. For some evening events we would like to serve alcoholic drinks to participants in the workshops. All workshops would be pre-booked so it is not open to the general public (no walk-ins). All events would be finished by 10pm. There will be no offsite sales of alcohol.

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

Operating Schedule

- Boxing or Wrestling
- Live Music
- Recorded Music
- Performances of Dance
- Anything of a similar description falling under Music or Dance
- Provision of late night refreshment
- Supply of Alcohol

Supply of Alcohol Standard Times

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

Day *

Monday to Wednesday

18:00

22:00

Supply of Alcohol Standard Times

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

Day *

Thursday to Saturday

12:00

22:00

Supply of Alcohol Standard Times

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

Day *

Sunday

12:00

18:00

Supply of Alcohol

Will the supply of alcohol be for consumption on premises or off premises or both? (please read guidance note 8) *

On the premises

Is the premises used exclusively or primarily for supply of alcohol for consumption on the premises? *

No

State any seasonal variations for the supply of alcohol. (please read guidance note 5)

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

Alcohol will only be available for booked and planned workshops attendees, not necessarily all of these days and times listed. But not outside of them. For example we may only have 1 workshop per week where alcohol is served. The main purpose of the premises and events is social art and crafting rather than alcohol as the primary activity.

Designated Premises Supervisor

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form)

Title *

Mrs

First name *

Joanna

Surname *

Davis

Street address *

Town/City *

Designated Premises Supervisor

County

Postcode *

Personal Licence Number (if known)

Issuing Licensing Authority (if known)

Adult Entertainment

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).

Children may attend the premises for daytime workshops/art classes. No alcohol would be served. All events/workshops where children are present, no alcohol would be served. Only events with over 18 year old attendees could serve alcohol.

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)

Day *

Monday to Thursday

09:00

22:00

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)

Day *

Friday to Saturday

09:00

22:00

Opening Hours Standard Times

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)

Day *

Sunday

09:00

18:00

Opening Hours

State any seasonal variations. (please read guidance note 5)

Please state any Non-standard timings, where you intend the premises to be open to the public at different times from the Standard days and times listed? (please read guidance note 6)

The timings are when workshops could be in operation but as previously mentioned these are booked workshops not open to general public all these hours. No operations outside of the hours listed though.

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) *

We will have appropriate training for any staff member providing alcohol on the four licensing objectives. No alcohol will be served at any workshops with under 18s present. We have CCTV in place. We have a maximum of 12 people in our workshops.

b) The prevention of crime and disorder *

We have CCTV in place. Our ticket sales include 1 alcoholic drink for certain workshops so we do not anticipate any drunk or disorderly behaviour and alcohol will be distributed responsibly. Our latest workshop would finish at 10pm. We have a maximum of 12 people in our workshops.

c) Public safety *

We will have appropriate training for any staff member providing alcohol on the four licensing objectives. Training to not to serve anyone who is drunk Always ask for ID if the customer does not look 25. No alcohol will be served at any workshops with under 18s present

d) The prevention of public nuisance *

Our ticket sales include 1 alcoholic drink for certain workshops so we do not anticipate any drunk or disorderly behaviour and alcohol will be distributed responsibly. Our latest workshop would finish at 10pm. We have a maximum of 12 people in our workshops. We have CCTV in place.

e) The protection of children from harm *

We will have appropriate training for any staff member providing alcohol on the four licensing objectives. Not to serve anyone who is drunk and to always ask for ID if the

Licensing Objectives

customer does not look 25. No alcohol will be served at any workshops with under 18s present.

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.

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 *

Joanna Davis

Date *

02/09/2024

Capacity *

Applicant



Declaration made

Do you wish to provide alternative correspondence details? *

No

Declarations

Email confirmation

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

Forename

Surname /Company Name

Hive Design Studio & Events Limited

Email *

Telephone