APPLICATION FOR A PREMISES LICENCE (BINGO) TO BE GRANTED UNDER THE GAMBLING ACT 2005

Name of Applicant: Merkur Slots UK Ltd

Full postal address of premises: Merkur Slots, 41 George Street,

Croydon, CR0 1LB

If you wish to make any representations in relation to this application, please do so in writing before midnight on 28th November 2024 to the following address:

London Borough of Croydon
Place Department, Licensing Team,
6th Floor, Zone A
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.

Application for a premises licence under the Gambling Act 2005 (standard form)

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

If you are completing this form by hand, please write legibly in block capitals using ink. Use additional sheets if necessary (marked with the number of the relevant question). You may wish to keep a copy of the completed form for your records.

Where the application is—

- In respect of a vessel, or
- To convert an authorisation granted under the Betting, Gaming and Lotteries Act 1963 or the Gaming Act 1968,

the application should be made on the relevant form for that type of premises or application

the application should be me	ade on the relevant form for the	at type of premises of application.		
Part 1 – Type of premises	licence applied for			
Regional Casino	Large Casino □	Small Casino □		
Bingo ☑	Adult Gaming Centre \Box	Family Entertainment Centre \Box		
Betting (Track) □	Betting (Other) \square			
Do you hold a provisional sta	atement in respect of the prem	iises? Yes □ No □		
_ · · ·	•	mber for the provisional statement		
(as set out at the top of the f	irst page of the statement):			
Part 2 - Applicant Details				
		cation is being made on behalf of		
Section A	company or partnership), pleas	e fill in Section B.		
Individual applicant				
<u> </u>	No □Dr □ Othor (places on	oppifu)		
1. Title: Mr Mrs Miss Ms Dr Other (please specify)				
2. Surname:	Other name	or, if the applicant does not hold an		
	in any application for an operat			
	e or business – [delete as app			
,		,		
Postcode:				
4(a) The number of the appl	icant's operating licence (as se	et out in the operating licence):		
		, , , , , , , , , , , , , , , , , , , ,		
		is in the process of applying for		
one, give the date on which	the application was made:			
		_		
/	tion is being made by more that	•		
	ts attached to this form, and the	ed in questions 1 to 4 should be ose sheets should be clearly		

Section B Application on behalf of an organisation
Application on behalf of all organisation
6. Name of applicant business or organisation:
MERKUR Slots UK Ltd
7. The applicant's registered or principal address:
7. The applicant's registered of principal address.
8(a) The number of the applicant's operating licence (as given in the operating licence):
8(b) If the applicant does not hold an operating licence but is in the process of applying
for one, give the date on which the application was made:
N/A
9. Tick the box if the application is being made by more than one organisation.
[Where there are further applicants, the information required in questions 6 to 8 should be included on additional sheets attached to this form, and those sheets should be clearly
marked "Details of further applicants".]
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Part 3 – Premises Details
10. Proposed trading name to be used at the premises (if known):
MERKUR Slots
MERITOR GIGES
11. Address of the premises (or, if none, give a description of the premises and their
location):
41 George Street
Croydon
CR0 1LB

12. Telephone number at premises (if known): N/A

13. If the premises are in only a part of a building, please describe the nature of the building (for example, a shopping centre or office block). The description should include the number of floors within the building and the floor(s) on which the premises are located.

The premises held by MERKUR Slots UK Ltd is located across both the ground floor and basement but the operator will only provide facilities for gambling on the ground floor of the premises. Please refer to the plans which have been provided in support of this application.

14(a) Are the premises situated in more than one licensing authority area?

No

14(b). If the answer to question 14(a) is yes, please give the names of all the licensing authorities within whose area the premises are partly located, **other than the licensing authority to which this application is made:**

N/A

Part 4 – Times of operation

15(a). Do you want the licensing authority to exclude a default condition so that the premises may be used for longer periods than would otherwise be the case?

No

15(b). If the answer to question 15(a) is yes, please complete the table below to indicate the times when you want the premises to be available for use under the premises licence.

	Start	Finish	Details of any seasonal variation
Mon			
Tue			
Wed			
Thurs			
Fri			
Sat			
Sun			

16. If you wish to apply for a premises licence with a condition restricting gambling to specific periods in a year, please state the periods below using calendar dates:

N/A

Part 5 - Miscellaneous 17. Proposed commencement date for licence (leave blank if you want the licence to commence as soon as it is issued): **ASAP** 18(a). Does the application relate to premises which are part of a track or other sporting venue which already has a premises licence? No 18(b). If the answer to question 18(a) is yes, please confirm by ticking the box that an application to vary the main track premises licence has been submitted with this application. \square 19(a). Do you hold any other premises licences that have been issued by this licensing authority? Yes 19(b). If the answer to question 19(a) is yes, please provide full details: **MERKUR Slots** 1432-1434 London Road, Norbury, London, SW17 4BZ

MERKUR Slots

12 High Street, Croydon, CR0 1YA

20. Please set out any other matters which you consider to be relevant to your application:

Merkur Slots UK Ltd have full authority to provide licensed gaming by the provision of an Operating Licence granted by the Gambling Commission. The UK's Gambling Regulator has therefore approved the measures implemented to ensure that effective anti-money laundering procedures are applied and policies have been developed to ensure responsible trading in accordance with the gambling legislation, the licensing objectives and the licence conditions and code of practice.

The applicant has comprehensive measures to ensure that all gambling remains socially responsible, which includes detailed staff training on matters such as the protection of the vulnerable, including homeless individuals and young persons. The applicant is an experienced licenced operator providing a large estate of gambling premises across the United Kingdom.

A copy of Merkur Slots UK Limited's Operational Standards has been provided in support of the application and full copies of the Applicant's policies and procedures are available, if required.

A copy of Merkur Slots UK Limited's 'Working Together' document has also been supplied in support of the application, which provides an overview of the licensee's proposed operation.

The purpose of this application is to facilitate a relocation of the existing Bingo Premises Licence located at MERKUR Slots, 12 High Street, Croydon, CR0 1YA (Licence Number 13/00074/GAMBIN). Following successful grant of this application and once the premises are ready to commence trading, we will inform this licensing authority and arrange the surrender of the current Bingo Premises Licence held at MERKUR Slots, 12 High Street, Croydon, CR0 1YA. At no point will both premises trade simultaneously and there will be no increase in the provision of gambling facilities in Croydon as a result of the grant of this application.

Following initial due-diligence conducted with the Police and licensing authority, Merkur Slots UK Ltd have agreed with the police that the following conditions be attached to the premises licence upon successful grant of this application:

- An incident log shall be kept at the premises and made available on request to an authorised officer of the Licensing Authority or the Police. Details to include:
- a. all crimes reported to the venue
- b. all ejections of patrons
- c. any complaints received concerning crime and disorder
- d. any incidents of disorder
- e. all seizures of drugs or offensive weapons
- f. any visit by a relevant authority or emergency service.
- g. any attempts by children and young persons to gain access to the premises to gamble
- h. any Challenge 25 Refusals
- i. Any faults with the CCTV system
- The premises shall install and maintain a comprehensive CCTV system, which shall continually record whilst the premises are open. All recordings shall be stored for a minimum period of 31 days. Viewing of recordings shall be made available upon the request of Police or an authorised officer of the Licensing Authority, subject to data protection legislative requirements.
- Notices shall be prominently displayed within the premises stating that CCTV is in operation.
- The licensee shall participate in a local Betwatch or similar scheme, where available.
- A think 25 proof of age scheme shall be operated at the premises where any person who appears to be under 25 years of age, and who has not previously provided satisfactory proof to the contrary, is challenged at the point of entry. Acceptable forms of identification are recognised photographic identification cards, such as a driving licence, passport or proof of age card with the PASS Hologram.
- When the premises is open to the public, a SIA licensed door supervisor shall be on duty from midnight until 06:00 every day. The premises will risk assess the need for SIA licensed door supervisors outside of these hours.
- The licensee shall implement and maintain a policy of banning any customers who engage in crime, disorder or anti-social behaviour within or outside of the premises.

- The licensee shall take all reasonable steps to prevent street drinking of alcohol directly outside the premises and to ban from the premises those who do so.
- A magnetic locking device, commonly referred to as a Maglock will be installed and maintained on the main entrance/exit to the premises which will be operable from the by staff.
- The Company's staff guard system or similar shall be installed and maintained at the premises, which allows direct communication with a central monitoring station permitting audio and CCTV communication.
- There shall be no pre-planned single staffing at the premises from 18:00 until 06:00. Should the premises be single staffed after this time, the magnetic door locking system must be in constant use.

Part 6 – Declarations and Checklist (Please tick)	
We confirm that, to the best of my/ our knowledge, the information contained in this application is true. We understand that it is an offence under section 342 of the Gambling Act 2005 to give information which is false or misleading	
in, or in relation to, this application.	
We confirm that the applicant(s) have the right to occupy the premises.	
Checklist:	
 Payment of the appropriate fee has been made/is enclosed 	\checkmark
 A plan of the premises is enclosed 	\checkmark
 We understand that if the above requirements are not complied with the application may be rejected 	\checkmark
 We understand that it is now necessary to advertise the application and give the appropriate notice to the responsible authorities 	\checkmark

Part 7 – Sigi	natures		
•	e of applicant or applicant's the applicant, please state		uly authorised agent. If signing
Date:	31 October 2024	Capacity:	Solicitors for & on behalf of the applicant
22. For joint applications, signature of 2nd applicant, or 2nd applicant's solicitor or other authorised agent. If signing on behalf of the applicant, please state in what capacity:			
Signature:			
Print Name:			
Date:		Capacity:	<u> </u>

[Where there are more than two applicants, please use an additional sheet clearly marked "Signature(s) of further applicant(s)". The sheet should include all the information requested in paragraphs 21 and 22.]

[Where the application is to be submitted in an electronic form, the signature should be generated electronically and should be a copy of the person's written signature.]

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Part 8 – Contact Details
23(a) Please give the name of a person who can be contacted about the application:
23(b) Please give one or more telephone numbers at which the person identified in question 23(a) can be contacted:
24. Postal address for correspondence associated with this application:
25. If you are happy for correspondence in relation to your application to be sent via e-mail, please give the e-mail address to which you would like correspondence to be sent: