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 before midnight on Tuesday 23rd September 2025 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.

Croydon Council Croydon T: 02087605466

E: licensing@croydon.gov.uk

New Premises Licence

Premises Details	
Premises Address *	BASEMENT BAR 80-88 HIGH STREET CROYDON CROYDON CR0 1NA
Telephone number at premises (if any)	
Non-domestic value of premises. *	£ 50000
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:	an individual or individuals
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
Individual Applicant	
T:41 - *	D.4
Title *	Mr
First name *	Anselmo
Surname *	CHIOFALO
Street address *	

Individual Applicant	
Town/City *	
County	
Postcode *	
Date of Birth *	
I am 18 years old or over	
Nationality *	
Daytime Contact Telephone Number *	
Email *	
Operating Schedule	
When do you want the premises licence to start? *	29/09/2025
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. *	Funhouse has been a previously running premises, due to an admin error the license lapsed from the previous company and we would like to reopen the premises
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 no	te 2) *

Oper	Operating Schedule	
	Films	
	Indoor Sporting Events	
	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	
Live	Music Standard Times	
Standard days and timings, where you intend to use the premises for the performance of live music. (please read guidance note 7) * Please enter times in 24hr format (HH:MM)		
Day *		Weekends
		12:00
		05:00
Live Music Standard Times		
Standard days and timings, where you intend to use the premises for the performance of live music. (please read guidance note 7) * Please enter times in 24hr format (HH:MM)		
Day *		Every Day

Live Music Standard Times	
	12:00
	04:00
Live Music	
Will the Performance of Live Music take place indoors or outdoors or both? (please read guidance note 3) *	Indoors
Please provide further details. (please read guidance note 4)	djs playing music on friday and saturday evenings, occasional events on other days
State any seasonal variations for the Performance of Live Music. (please read guidance note 5)	
Please state any non-standard timings, where you intend to use the premises for the performance of live music at different times from the Standard days and times listed? (please read guidance note 6)	
Recorded Music Standard Times	
Standard days and timings, where you intend to use the premis guidance note 7) * Please enter times in 24hr format (HH:MM)	ses for the performance of recorded music. (please read
Day *	Every Day
	12:00
	04:00
Recorded Music	
Will the playing of recorded music take place indoors or outdoors or both? (please read guidance note 3) *	Indoors
Please provide further details.(please read guidance note 4)	background music playing early on before djs start
State any seasonal variations for the playing of recorded music. (please read guidance note 5)	
Please state any non-standard timings, where you intend to use the premises for the performance of recorded music at different times from the Standard days and times listed? (please read guidance note 6)	

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	
	12:00	
	05:00	
Late Night Refreshment Standard Time	s	
Standard days and timings, where you intend to use the premise Please enter times in 24hr format (HH:MM)	ses for late night refreshment.(please read guidance note 7) *	
Day *	Week Days	
	12:00	
	04:00	
Late Night Refreshment		
Will the provision of late night refreshment take place indoors	Indoors	
or outdoors or both? (please read guidance note 3) *		
Please provide further details.(please read guidance note 4)	Drinks served up until 15 minutes before closing times on nights we are open	
State any seasonal variations for the provision of late night refreshment.(please read guidance note 5)		
Please state any non-standard timings, where you intend to use the premises for late night refreshmentat different times from the Standard days and times listed?(please read guidance note 6)		
Supply of Alcohol Standard Times		
Standard days and timings, where you intend to use the premise Please enter times in 24hr format (HH:MM)	ses for the supply of alcohol. (please read guidance note 7)*	

Day *

Weekends

Supply of Alcohol Standard Times	
	12:00
	05:00
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 *	Week Days
	12:00
	04:00
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? *	Yes
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 alcoholat different times from the Standard days and times listed?(please read guidance note 6)	
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 *	Mr
First name *	Anselmo
Surname *	CHIOFALO
Street address *	

Designated Premises Supervisor	
Town/City *	
County	
Postcode *	
Personal Licence Number (if known)	
Issuing Licensing Authority (if known)	
Adult Entertainment	
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).	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)	
Day *	Weekends
	12:00
	05:00
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 *	Week Days
	12:00

Opening Hours Standard Times 04:00

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) *

as discussed with police licensing please see previous licence on premises all conditions would preferably be matched

b) The prevention of crime and disorder *

as discussed with police licensing please see previous licence on premises all conditions would preferably be matched

c) Public safety *

as discussed with police licensing please see previous licence on premises all conditions would preferably be matched

d) The prevention of public nuisance *

as discussed with police licensing please see previous licence on premises all conditions would preferably be matched

e) The protection of children from harm *

as discussed with police licensing please see previous licence attached all conditions would preferably be matched

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 & 2). 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 * Anselmo Chiofalo Date * 25/08/2025 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	Anselmo	
Surname /Company Name	CHIOFALO	
Email *		
Telephone		