APPLICATION FOR A VARIATION TO 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 the 5th December 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 £5000.

Croydon Council Croydon T: 02087605466

E: licensing@croydon.gov.uk

Vary a Premises Licence

| Review | | |
|--|---|--|
| Please review the details to below to ensure they are correct before proceeding. If the details shown are not correct, click previous to enter the correct licence number. | | |
| Current Licence number | 25/02143/LIPREM | |
| Current Premises address | Coombe Lodge 104 Coombe Road Croydon Surrey CR0 5RB | |
| Premises Details | | |
| Premises Licence Number * | 25/02143/LIPREM | |
| Premises Address * | Coombe Lodge 104 Coombe Road Croydon Surrey CR0 5RB | |
| Telephone Number at Premises (if any) | | |
| Non-domestic rateable value of premises. * | | |
| Type of Premises Licence Holder | | |
| 7. | | |
| Type of Premises Licence Holder * | Non-Individual(s) | |
| Premises Licence Holder - Non Individual | | |
| Name * | FAMILY DINING PUBS LIMITED | |
| Street address * | | |
| | | |

| Premises Licence Holder - Non Individual | | |
|---|---|--|
| | | |
| Town/City * | | |
| County | | |
| Postcode * | | |
| Registered number (where applicable) | | |
| Description of applicant (for example partnership, company, unincorporated association etc.) * | | |
| Email * | | |
| Daytime Contact Telephone Number | | |
| | | |
| Variation | | |
| Do you want the proposed variation to take effect as soon as possible? * | Yes | |
| Variation | | |
| Do you want the proposed variation to have effect in relation to the introduction of the late night levy? (Please see Guidance Note 1)* | No | |
| Briefly describe the nature of the proposed variation. (Please see Guidance Note 2) * | THE PUB WILL SHORTLY BE REFURBISHED AND REOPEN AS A JD WETHERSPOONS (FRANCHISE) AND THEREFORE WE NEED TO EXTEND THE HOURS PERMITTED TO SERVE ALCOHOL. | |
| 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. | | |
| Operating Schodule | | |
| Operating Schedule | | |
| 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 read guidance note 3) * | | |

| Operating Schedule | | | |
|--|--|-----------------------------|--|
| Plays | | | |
| Films | | | |
| Indoor Sporting Events | | | |
| Boxing or Wrestling | | | |
| Live Music | | | |
| Recorded Music | | | |
| Performances of Dance | Performances of Dance | | |
| Anything of a similar description fa | Anything of a similar description falling under Music or Dance | | |
| Provision of late night refreshmen | Provision of late night refreshment | | |
| ✓ Supply of Alcohol | | | |
| _ | | | |
| Type of Variation - Supply | of Alcohol | | |
| Please select the type of variation that app | plies to this activity. | Change an existing Activity | |
| 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 8) * Please enter times in 24hr format (HH:MM) | | | |
| Day * | | Monday to Thursday | |
| | | 09:00 | |
| | | 00:00 | |

Supply of Alcohol Standard Times

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 8) * Please enter times in 24hr format (HH:MM)

Day *

Friday to Saturday

09:00

01:00

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 8) * Please enter times in 24hr format (HH:MM)

Day *

Sunday

09:00

00:00

Supply of Alcohol

Will the supply of alcohol be for consumption on premises or off premises or both? (please read guidance note 9) *

Both

State any seasonal variations for the supply of alcohol. (please read guidance note 6)

Bank Holiday Sundays to end of permitted hours on Bank Holiday Monday (01:00 am on Bank Holiday Monday). New Year's eve to end of permitted hours on New Years Day (01:00 am on 1st January).

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 7) Bank Holiday Sundays to end of permitted hours on Bank Holiday Monday (01:00 am on Bank Holiday Monday). New Year's eve to end of permitted hours on New Years Day (01:00 am on 1st January).

Adult Entertainment

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use

None.

| Adult Entertainment | |
|---|---|
| of the premises that may give rise to concern in rechildren. (please read guidance note 10) | espect of |
| Opening Hours Standard Time | s |
| Standard days and timings, where the premises a 24hr format (HH:MM) | are open to the public. (please read guidance note 8) * Please enter times in |
| Day * | Monday to Thursday |
| | 08:00 |
| | 00:30 |
| | |
| Opening Hours Standard Times | s |
| Standard days and timings, where the premises a 24hr format (HH:MM) | are open to the public. (please read guidance note 8) * Please enter times in |
| Day * | Friday to Saturday |
| | 08:00 |
| | 01:30 |
| | |
| Opening Hours Standard Times | S |
| Standard days and timings, where the premises a 24hr format (HH:MM) | are open to the public. (please read guidance note 8) * Please enter times in |
| Day * | Sunday |
| | 08:00 |
| | 00:30 |
| | |

State any seasonal variations. (please read guidance note 6)

Opening Hours

Bank Holiday Sundays to end of permitted hours on Bank Holiday Monday (01:30 am on Bank Holiday Monday). New

Opening Hours

Year's eve to end of permitted hours on New Years Day (01:30 am on 1st January).

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 7)

Bank Holiday Sundays to end of permitted hours on Bank Holiday Monday (01:30 am on Bank Holiday Monday). New Year's eve to end of permitted hours on New Years Day (01:30 am on 1st January).

Variation

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 agree to return the original premises licence or the relevant part of the original premises licence: *

Yes

Note: This application cannot be processed until the original licence is received or a statement as to why it cannot be returned has been accepted.

Licensing Objectives

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 and e) (please read guidance note 11)

This site will be operated as a Wetherspoons (franchise) & all Wetherspoons policies & processes will be implemented, including: - 1. Appropriate & relevant risk assessments to be in place & reviewed on an ongoing basis by both The Papas Group & Wetherspoons. 2. Appropriate & relevant policies & procedures in place & reviewed on an ongoing basis & if necessary updated. 3. Robust staff training & refresher training provided by Wetherspoons 4. Audits by senior management & Wetherspoons

b) The prevention of crime and disorder

1. Sufficient, GDPR compliant, high-res CCTV to be installed & operational 24-hrs & to be maintained regularly 2. CCTV to be time/date marked, kept for 31-days & provided on lawful request 3. Incident/Accident log to be completed, kept on site & available upon lawful request 4. Ongoing assessments of security 5. Authorised staff trained in Challenge 25 & their responsibilities under the Licencing Act. Updated every 6 mths & records kept on site for 12 mths 6. Free water provided on request

c) Public safety

- 1. Up-to-date risk assessments & regular review process.
- 2. Robust health & safety policies and procedures. 3. Staff training and regular re-fresher training. 4. CCTV, security and incident logs as above. 5. Trained first aiders & first aid supplies on site.

d) The prevention of public nuisance

We are committed to being a responsible neighbour: 1. Noise levels are managed carefully, with no amplified music or disruptive activity. 2. A structured dispersal policy ensures customers leave quietly and respectfully. Including

| Licensing Objectives | | |
|--|--|--|
| | clear signage requesting patrons respect local residents / businesses and leave quietly. 3. Waste is disposed of promptly, and the surrounding area to be kept clean and tidy. | |
| e) The protection of children from harm | 1. There will be visible signage within the store that the premises operates a Challenge 25 policy. 2. All staff authorised to sell alcohol from the premises will be trained in Challenge 25 and their responsibilities under the Licencing act 2003 and updated every 6 months. Training records will be kept. 3. A written refusal log will be kept at the premises to record all instances where service is refused and made available on request. | |
| Declarations | | |
| Declaration Type * | Sole Applicant - Individual or Other | |
| Declarations | | |
| I have made or enclosed payment of the fee or. I have not made or enclosed payment of the fee because this application has been made in relation to the introduction of the late night levy. I have sent copies of this application and the plan to responsible authorities and others where applicable. I understand I must now advertise my application. I understand I must now return the original premises licence, or relevant part of it or have provided an explanation why I will not be able to do this. I understand that if I do not comply with the above requirements my application will be rejected. | | |
| 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 | | |
| Signature/Declaration of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (see Guidance Note 13). 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. | | |
| Full Name * | | |
| Date * | 07/11/2025 | |
| Capacity * | | |
| ✓ Declaration made | | |
| Do you wish to provide alternative correspondence details? * | Yes | |
| | | |

| Alternative Correspondence Address | | |
|---|-------------------------|--|
| This is the address which we shall use to correspond with you | about this application. | |
| Please provide Contact Name (where not previously given) and postal address for correspondence associated with this application (See guidance note 15). | | |
| Title * | | |
| First name * | | |
| Surname * | | |
| Street address * | | |
| | | |
| | | |
| Town/City * | | |
| County | | |
| Postcode * | | |
| Telephone Number | | |
| Email Address * | | |
| | | |
| Email confirmation | | |
| On submission an email confirmation will be sent using the details below | | |
| Forename | | |
| Surname /Company Name | | |
| Email * | | |
| Telephone | | |