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2010
12/10/17

Enfield
Application for a premises licence
Licensing Act 2003

5585935554

For help contact
licensing@enfield.gov.uk
Telephone: 020 8379 3578

* required information

Section 1 of 21

You can save the form at any time and resume it later. You do not need to be logged in when you resume.

System reference

Not Currently In Use

This is the unique reference for this application generated by the system.

Your reference

OakwoodCafe

You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.

Are you an agent acting on behalf of the applicant?

☐ Yes☒ No

Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.

Applicant Details

* First name

Ozgur

* Family name

Celebi

* E-mail

trentparkcateringltd@hotmail.com

Main telephone number

00442084405111

Other telephone number

☐ Indicate here if you would prefer not to be contacted by telephone

Are you:

☒ Applying as a business or organisation, including as a sole trader☐ Applying as an individual

A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.

Applicant Business

Is your business registered in the UK with Companies House?

☒ Yes☐ No

Note: completing the Applicant Business section is optional in this form.

Registration number

10963499

Business name

OAKWOOD CATERING LTD

VAT number

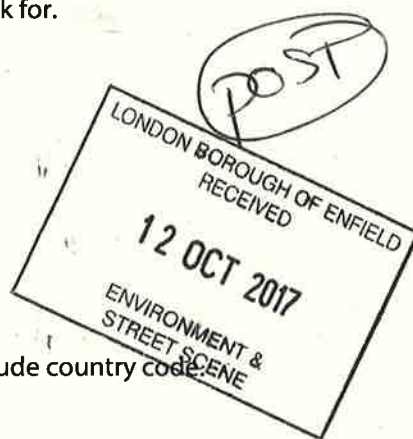
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If your business is registered, use its registered name.

Put "none" if you are not registered for VAT.

Legal status

Private Limited Company



Continued from previous page...

Your position in the business

Home country

The country where the headquarters of your business is located.

Registered Address

Address registered with Companies House.

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

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PREMISES DETAILS

I/we, as named in section 1, apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in section 2 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.

Premises Address

Are you able to provide a postal address, OS map reference or description of the premises?

☒ Address ☐ OS map reference ☐ Description

Postal Address Of Premises

Building number or name

Street

District

City or town

County or administrative area

Postcode

Country

Further Details

Telephone number

Non-domestic rateable value of premises (£)

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APPLICATION DETAILS

In what capacity are you applying for the premises licence?

- ☐ An individual or individuals
- ☒ A limited company / limited liability partnership
- ☐ A partnership (other than limited liability)
- ☐ An unincorporated association
- ☐ Other (for example a statutory corporation)
- ☐ A recognised club
- ☐ A charity
- ☐ The proprietor of an educational establishment
- ☐ A health service body
- ☐ A person who is registered under part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales
- ☐ A person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 in respect of the carrying on of a regulated activity (within the meaning of that Part) in an independent hospital in England
- ☐ The chief officer of police of a police force in England and Wales

Confirm The Following

- ☒ I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities
- ☐ I am making the application pursuant to a statutory function
- ☐ I am making the application pursuant to a function discharged by virtue of Her Majesty's prerogative

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NON INDIVIDUAL APPLICANTS

Provide name and registered address of applicant in full. Where appropriate give any registered number. In the case of a partnership or other joint venture (other than a body corporate), give the name and address of each party concerned.

Non Individual Applicant's Name

Name

Details

Registered number (where applicable)

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

Continued from previous page...

Address

Building number or name	<input type="text"/>
Street	<input type="text"/>
District	<input type="text"/>
City or town	<input type="text"/>
County or administrative area	<input type="text"/>
Postcode	<input type="text"/>
Country	<input type="text" value="United Kingdom"/>

Contact Details

E-mail	<input type="text" value="TRENTPARKCATERINGLTD@HOTMAIL.COM"/>
Telephone number	<input type="text" value="00442084405111"/>
Other telephone number	<input type="text"/>
* Date of birth	<input type="text" value="dd"/> / <input type="text" value="mm"/> / <input type="text" value="yyyy"/>
* Nationality	<input type="text" value="BRITISH"/>

Documents that demonstrate entitlement to work in the UK

Add another applicant

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OPERATING SCHEDULE

When do you want the premises licence to start?	<input type="text" value="16"/> / <input type="text" value="10"/> / <input type="text" value="2017"/>
	dd mm yyyy

If you wish the licence to be valid only for a limited period, when do you want it to end	<input type="text"/> / <input type="text"/> / <input type="text"/>
	dd mm yyyy

Provide a general description of the premises

For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off- supplies you must include a description of where the place will be and its proximity to the premises.

<input type="text"/>

Continued from previous page...

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

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PROVISION OF PLAYS

See guidance on regulated entertainment

Will you be providing plays?

☐ Yes ☒ No

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PROVISION OF FILMS

See guidance on regulated entertainment

Will you be providing films?

☐ Yes ☒ No

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PROVISION OF INDOOR SPORTING EVENTS

See guidance on regulated entertainment

Will you be providing indoor sporting events?

☐ Yes ☒ No

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PROVISION OF BOXING OR WRESTLING ENTERTAINMENTS

See guidance on regulated entertainment

Will you be providing boxing or wrestling entertainments?

☐ Yes ☒ No

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PROVISION OF LIVE MUSIC

See guidance on regulated entertainment

Will you be providing live music?

☐ Yes ☒ No

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PROVISION OF RECORDED MUSIC

See guidance on regulated entertainment

Will you be providing recorded music?

☐ Yes ☒ No

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PROVISION OF PERFORMANCES OF DANCE

See guidance on regulated entertainment

Will you be providing performances of dance?

Continued from previous page...

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PROVISION OF ANYTHING OF A SIMILAR DESCRIPTION TO LIVE MUSIC, RECORDED MUSIC OR PERFORMANCES OF DANCE

See guidance on regulated entertainment

Will you be providing anything similar to live music, recorded music or performances of dance?

☐ Yes

☒ No

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LATE NIGHT REFRESHMENT

Will you be providing late night refreshment?

☐ Yes

☒ No

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SUPPLY OF ALCOHOL

Will you be selling or supplying alcohol?

☒ Yes

☐ No

Standard Days And Timings

MONDAY

Start

End

Start

End

TUESDAY

Start

End

Start

End

WEDNESDAY

Start

End

Start

End

THURSDAY

Start

End

Start

End

FRIDAY

Start

End

Start

End

SATURDAY

Start

End

Start

End

Give timings in 24 hour clock.
(e.g., 16:00) and only give details for the days
of the week when you intend the premises
to be used for the activity.

Continued from previous page...

SUNDAY

Start

End

Start

End

Will the sale of alcohol be for consumption:

- ☒ On the premises ☐ Off the premises ☐ Both

If the sale of alcohol is for consumption on the premises select on, if the sale of alcohol is for consumption away from the premises select off. If the sale of alcohol is for consumption on the premises and away from the premises select both.

State any seasonal variations

For example (but not exclusively) where the activity will occur on additional days during the summer months.

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Non-standard timings. Where the premises will be used for the supply of alcohol at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

--

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name

First name

Family name

Date of birth

mm

yyyy

Continued from previous page...

Enter the contact's address

Building number or name	<input type="text"/>
Street	<input type="text"/>
District	<input type="text"/>
City or town	<input type="text"/>
County or administrative area	<input type="text"/>
Postcode	<input type="text"/>
Country	<input type="text" value="United Kingdom"/>
Personal Licence number (if known)	<input type="text"/>
Issuing licensing authority (if known)	<input type="text"/>

PROPOSED DESIGNATED PREMISES SUPERVISOR CONSENT

How will the consent form of the proposed designated premises supervisor be supplied to the authority?

- ☐ Electronically, by the proposed designated premises supervisor
- ☒ As an attachment to this application

Reference number for consent form (if known)

If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.

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ADULT ENTERTAINMENT

Highlight any adult entertainment or services, activities, or other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children

Give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups etc gambling machines etc.

<input type="text"/>

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HOURS PREMISES ARE OPEN TO THE PUBLIC

Standard Days And Timings

MONDAY

Start

End

Start

End

Give timings in 24 hour clock.
(e.g., 16:00) and only give details for the days
of the week when you intend the premises
to be used for the activity.

Continued from previous page...

TUESDAY

Start

End

Start

End

WEDNESDAY

Start

End

Start

End

THURSDAY

Start

End

Start

End

FRIDAY

Start

End

Start

End

SATURDAY

Start

End

Start

End

SUNDAY

Start

End

Start

End

State any seasonal variations

For example (but not exclusively) where the activity will occur on additional days during the summer months.

DURING WINTER OPENING HOURS WOULD BE FROM 9:00 TO 18:00

Non standard timings. Where you intend to use the premises to be open to the members and guests at different times from those listed in the column on the left, list below

For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.

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LICENSING OBJECTIVES

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

a) General – all four licensing objectives (b,c,d,e)

Continued from previous page...

List here steps you will take to promote all four licensing objectives together.

ALCOHOLIC DRINKS WILL BE KEPT BEHIND THE COUNTER
ID WILL BE ASKED TO PEOPLE WHO LOOKS UNDER 25 YEARS OLD
SIGNS WILL BE PRESENT SAYING 'NO ALCOHOL UNDER 18'

b) The prevention of crime and disorder

AT ALL TIMES, SUPERVISOR WILL BE PRESENT

c) Public safety

CCTV WILL BE INSTALLED

d) The prevention of public nuisance

STAFF WILL BE TRAINED ABOUT PUBLIC NUISANCE

e) The protection of children from harm

SIGNS WILL BE PRESENT SAYING 'NO ALCOHOL UNDER 18'
STAFF WILL BE INFORMED ABOUT PROTECTING CHILDREN FROM HARM

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NOTES ON DEMONSTRATING ENTITLEMENT TO WORK IN THE UK

Continued from previous page...

Capacity 30000-39000	£16,000.00
Capacity 40000-49999	£24,000.00
Capacity 50000-59999	£32,000.00
Capacity 60000-69999	£40,000.00
Capacity 70000-79999	£48,000.00
Capacity 80000-89999	£56,000.00
Capacity 90000 and over	£64,000.00

* Fee amount (£)

100.00

DECLARATION

I/we understand it is an offence, liable on conviction to a fine up to level 5 on the standard scale, under section 158 of the licensing act 2003, to make a false statement in or in connection with this application.

It is not a legal requirement under the Licensing Act 2003 that applicants have Planning Permission. HOWEVER, we recommend that if businesses do not already have the necessary planning permission they check with the Planning Team first to see whether it is actually possible for them to get planning permission.

For further advice on planning permission please contact:

* Planning and Building Control Service

PO Box 53, Civic Centre
Silver Street, Enfield, EN1 3XE
Tel: 0208 379 3878

☒ Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

* Full name

mr ozgur celebi

* Capacity

company director

* Date

22 / 09 / 2017
dd mm yyyy

Add another signatory

Once you're finished you need to do the following:

1. Save this form to your computer by clicking file/save as...

2. Go back to <https://www.gov.uk/apply-for-a-licence/premises-licence/enfield/apply-1> to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

IT IS AN OFFENCE LIABLE TO SUMMARY CONVICTION TO A FINE OF ANY AMOUNT UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

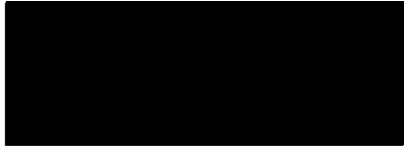
IT IS AN OFFENCE UNDER SECTION 24B OF THE IMMIGRATION ACT 1971 FOR A PERSON TO WORK WHEN THEY KNOW, OR HAVE REASONABLE CAUSE TO BELIEVE, THAT THEY ARE DISQUALIFIED FROM DOING SO BY REASON OF THEIR IMMIGRATION STATUS. THOSE WHO EMPLOY AN ADULT WITHOUT LEAVE OR WHO IS SUBJECT TO CONDITIONS AS TO EMPLOYMENT 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

Consent of individual to being specified as premises supervisor

Mr. Ozgur Celebi

[full name of prospective premises supervisor]

of



[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

Premises Licence - Alcohol

[type of application]

by

Oakwood Catering LTD

[name of applicant]

relating to a premises licence

[number of existing licence, if any]

for

Oakwood Cafe
Sheringham Avenue
Oakwood Park
N14 4UJ

[name and address of premises to which the application relates]