

WJK

12572171949 WP

Annex 3



Enfield
Application for a premises licence
Licensing Act 2003

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

Your reference 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

* Family name

* E-mail

Main telephone number Include country code.

Other telephone number

Indicate here if the applicant would prefer not to be contacted by telephone

Is the applicant:

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 the applicant is applying so the applicant can be employed, or for some other personal reason, such as following a hobby.

email

LONDON BOROUGH OF ENFIELD
 RECEIVED

31 OCT 2019

ENVIRONMENT &
 STREET SCENE

Gov UK

Continued from previous page...

Address

* Building number or name

* Street

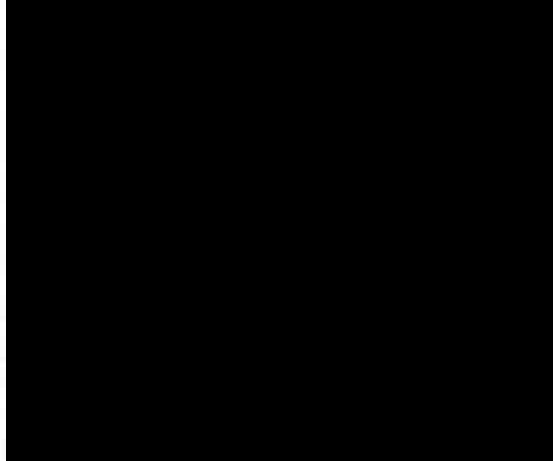
District

* City or town

County or administrative area

* Postcode

* Country



Agent Details

* First name

Ada

* Family name

Group

* E-mail

ADMIN@ADAGROUP.ORG.UK

Main telephone number

02088817466

Include country code.

Other telephone number

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

Are you:

An agent that is a business or organisation, including a sole trader

A sole trader is a business owned by one person without any special legal structure.

A private individual acting as an agent

Agent 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

11290891

Business name

ADA ASUZ CONSULTANCY LTD

If your business is registered, use its registered name.

VAT number

NONE

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

Legal status

Private Limited Company

Your position in the business

MANAGER

Home country

United Kingdom

The country where the headquarters of your business is located.

Continued from previous page...

Agent Registered Address

Address registered with Companies House.

Building number or name	453
Street	WEST GREEN ROAD
District	HARINGEY
City or town	London
County or administrative area	
Postcode	N15 3PW
Country	United Kingdom

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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	212-214
Street	Chase Side
District	
City or town	ENFIELD
County or administrative area	
Postcode	EN2 0QX
Country	United Kingdom

Further Details

Telephone number	
Non-domestic rateable value of premises (£)	15,750

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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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INDIVIDUAL APPLICANT DETAILS

Applicant Name

Is the name the same as (or similar to) the details given in section one?

- Yes No

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

First name

Ali

Family name

Serbet

Is the applicant 18 years of age or older?

- Yes No

Continued from previous page...

Current Residential Address

Is the address the same as (or similar to) the address given in section one?

Yes

No

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.

Building number or name

Street

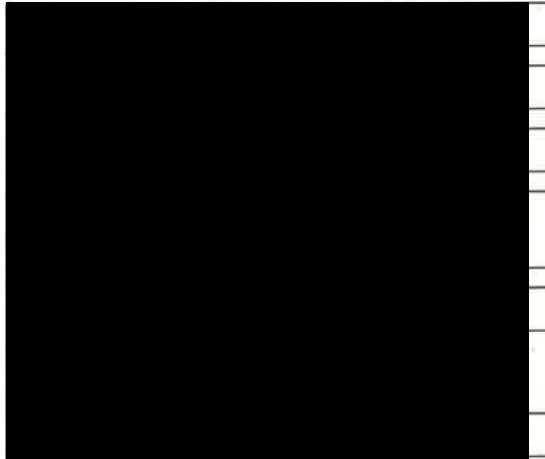
District

City or town

County or administrative area

Postcode

Country



Applicant Contact Details

Are the contact details the same as (or similar to) those given in section one?

Yes

No

If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely new set of details.


E-mail

Telephone number

Other telephone number

* Date of birth

* Nationality



Right to work share code

Documents that demonstrate entitlement to work in the UK
Right to work share code if not submitting scanned documents

Add another applicant

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OPERATING SCHEDULE

When do you want the premises licence to start?

/ /
dd mm yyyy

If you wish the licence to be valid only for a limited period, when do you want it to end

/ /
dd mm yyyy

Provide a general description of the premises

Continued from previous page...

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.

THIS PREMISES IS A GROCERY STORE & OFF LICENCE LOCATED ON A MAJOR ROAD.

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](#)

Continued from previous page...

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?

Yes No

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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

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...

FRIDAY

Start	<input type="text" value="08:00"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

SATURDAY

Start	<input type="text" value="08:00"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

SUNDAY

Start	<input type="text" value="08:00"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

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.

N/A

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.

N/A

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

dd mm yyyy

Continued from previous page...

Enter the contact's address

Building number or name

Street

District

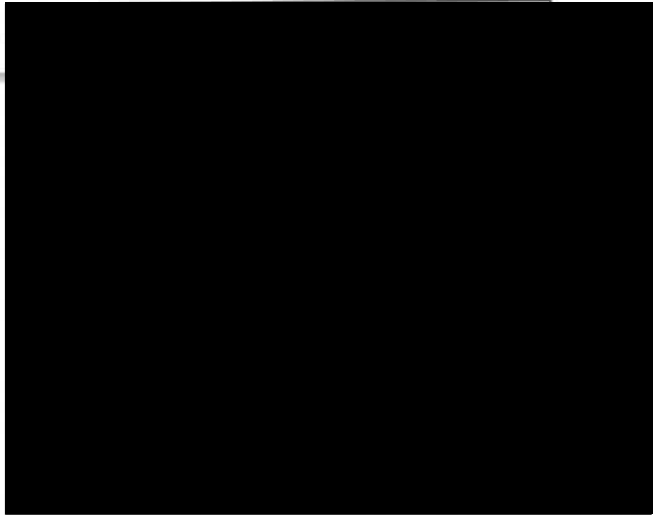
City or town

County or administrative area

Postcode

Country

Personal Licence number
(if known)



Issuing licensing authority
(if known)

ENFIELD COUNCIL

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.

N/A

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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	<input type="text" value="06:30"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

WEDNESDAY

Start	<input type="text" value="06:30"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

THURSDAY

Start	<input type="text" value="06:30"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

FRIDAY

Start	<input type="text" value="06:30"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

SATURDAY

Start	<input type="text" value="06:30"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

SUNDAY

Start	<input type="text" value="06:30"/>	End	<input type="text" value="00:00"/>
Start	<input type="text"/>	End	<input type="text"/>

State any seasonal variations

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

N/A

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.

The Licensee, that is the person in whose name the premises licence is issued, shall ensure that all times when the premises are for any licensable activity, there are sufficient competent staff on duty at the premises for the purpose of fulfilling the terms and conditions of the licence and for preventing crime and disorder. The Licensee shall ensure that all staff will undertake training in their responsibilities in relation to the sale of alcohol, particularly with regard to drunkenness and underage persons. Records will be kept of training and refresher training.

b) The prevention of crime and disorder

Any incidents of a criminal nature that may occur on the premises will be reported to the Police. The Licensee will install comprehensive CCTV coverage at the premises and it is operated and maintained at the premises.

The CCTV system shall conform to the following points:

1. Cameras must be sited to observe the entrance and exit doors both inside and outside.
2. Cameras on the entrances must capture full frame shots of the heads and shoulders of all people entering the premises i. e. capable of identification.
3. Cameras viewing till areas must capture frames not less than 50% of screen.
4. Cameras overlooking floor areas should be wide angled to give an overview of the premises.
5. Be capable of visually confirming the nature of the crime committed.
6. Provide a linked record of the date, time and place of any image.
7. Provide good quality images –colour during opening times.
8. Operate under existing light levels within and outside the premises.
9. Have the recording device located in a secure area or locked cabinet.
10. Have a monitor to review images and recorded picture quality.
11. Be regularly maintained to ensure continuous quality of image capture retention.
12. Have signage displayed in the customer area to advise that CCTV is in operation.
13. Digital images must be kept for 31 days.
14. Police will have access to images at any reasonable time.
15. The equipment must have a suitable export method, e.g. CD/DVD writer so that the police can make an evidential copy of the data they require. This data should be in the native file format, to ensure that no image quality is lost when making the copy, if this format is non-standard (i.e. manufacturer proprietary) then the manufacturer should supply the replay software to ensure that the video on the CD can be replayed by the police on a standard computer. Copies must be made available to Police on request.

c) Public safety

Appropriate fire safety procedures are in place including fire extinguishers, internally illuminated fire exit signs, numerous smoke detectors and emergency lighting (see enclosed plan for details of locations). All appliances are inspected annually. All emergency exits shall be kept free from obstruction at all times.

d) The prevention of public nuisance

All customers will be asked to leave quietly.
Clear and legible notices will be prominently displayed to remind customers to leave quietly and have regard to our neighbours.

e) The protection of children from harm

The licensee and staff will ask persons who appear to be under the age of 25 for photographic ID such as proof of age cards, the Connexions Card and Citizen Card, photographic driving licence or passport, an official identity card issued by HM Forces or by an EU country, bearing the photograph and date of birth of bearer.

All staff will be trained for UNDERAGE SALES PREVENTION regularly.

A register of refused sales shall be kept and maintained on the premises.

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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 (£)

190.00

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

Besim Hajdini

* Capacity

Manager

* Date

30 / 10 / 2019
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