

Appendix 2

FEE £190

Application to vary a premises licence under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

3101

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary. You may wish to keep a copy of the completed form for your records.

I/We MR IBRAHIM BAGCIH & MR HUSSEIN ORDU

(Insert name(s) of applicant)

being the premises licence holder, apply to vary a premises licence under section 34 of the Licensing Act 2003 for the premises described in Part 1 below

Premises licence number 12745

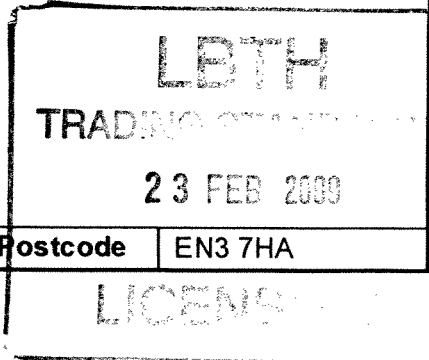
Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description KIVRE FOOD CENTRE 497-499 CAMBRIDGE HEATH ROAD			
Post town	LONDON	Post code	E2 9BU

Telephone number at premises (if any)	07886010455
Non-domestic rateable value of premises	£7000

Part 2 – Applicant details

Daytime contact telephone number	07886010455		
E-mail address (optional)	-		
Current postal address if different from premises address	10 CHARCROFT GARDENS,		
Post Town	LONDON	Postcode	EN3 7HA



Part 3 - Variation

Please tick yes

Do you want the proposed variation to have effect as soon as possible?

If not do you want the variation to take effect from

Day Month Year

--	--	--	--	--	--	--	--	--	--

Please describe briefly the nature of the proposed variation (Please see guidance note 1)

AN EXISTING SHOP WITH A PREMISES LICENCE

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 expected to attend

0

Part 4 Operating Schedule

Please 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 tick yes

- a) plays (if ticking yes, fill in box A)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)
- f) recorded music (if ticking yes, fill in box F)
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)

Provision of entertainment facilities:

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

Provision of late night refreshment (if ticking yes, fill in box L)

Sale by retail of alcohol (if ticking yes, fill in box M)

In all cases complete boxes N, O and P

M

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4) NONE		
Mon	24	HRS			
Tue	24	HRS			
Wed	24	HRS			
Thur	24	HRS			
Fri	24	HRS			
Sat	24	HRS			
Sun	24	HRS			
			Non-standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list (please read guidance note 5) NONE		

N

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 8)

O

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4) NONE
Day	Start	Finish	
Mon	24	HRS	
Tue	24	HRS	
Wed	24	HRS	
Thur	24	HRS	
Fri	24	HRS	Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 5) NONE
Sat	24	HRS	
Sun	24	HRS	

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

Please tick yes

- I have enclosed the premises licence
- I have enclosed the relevant part of the premises licence

If you have not ticked one of these boxes please fill in reasons for not including the licence, or part of it, below

Reasons why I have failed to enclose the premises licence or relevant part of premises licence

P 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,e) (please read guidance note 9)

- STAFF TO BE TRAINED REGULARLY ON LICENSING PROVISIONS AND THIS TO BE DOCUMENTED.
- MINIMUM OF 2 STAFF TO BE ON THE PREMISES AFTER 2300 HRS.

b) The prevention of crime and disorder

- CCTV COVERAGE INSIDE & OUTSIDE THE PREMISES IN ACCORDANCE TO THE WITH ADVICE FROM THE POLICE.
- SIGNS TO DISPLAY INFORMING THE PUBLIC PASSING THE PREMISES THAT RECORDED CCTV IS IN USE AT THE PREMISES.
- ANY RECORDING TO BE KEPT MINIMUM OF 31 DAYS AND BE MADE AVAILABLE TO COUNCIL AND POLICE OFFICER.
- A GENERAL ALARM SYSTEM.

c) Public safety

- TO COMPLY WITH THE FIRE REGULATIONS AND THE PROVISIONS OF THE MANAGEMENT REGULATIONS.
- MAINTAIN AND CHECK SYSTEMS IN PLACE, SMOKE DETECTORS, FIRE EXTINGUISHERS, EMERGENCY SAFETY LIGHTING, FIRE ALARMS ETC.

d) The prevention of public nuisance

- DISCOURAGE NOISE FROM PATRONS ARRIVING AT QUEUING OR DEPARTING FROM THE PREMISES BY DISPLAYING POLITE NOTICES FOR CUSTOMERS' ATTENTION.

e) The protection of children from harm

- TO PREVENT THE PURCHASE OF ALCOHOL BY MINORS, STAFF WILL REQUEST PROOF OF AGE IDENTIFICATION SUCH AS UK DRIVERS' LICENCE OR PASSPORT.
- RELEVANT LITERATURE TO BE DISPLAYED FOR CUSTOMERS ATTENTION.
- REFUSED SALES WILL BE ENTERED INTO THE REFUSAL BOOK WITH DETAILS FOR RECORD.


Please tick yes

- I have made or enclosed payment of the fee
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I understand that I must now advertise my application
- I have enclosed the premises licence or relevant part of it or explanation
- I understand that if I do not comply with the above requirements my application will be rejected

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

Part 5 – Signatures (please read guidance note 10)

Signature of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (please read guidance note 11). If signing on behalf of the applicant please state in what capacity.

Signature	
Date	22/12/2008
Capacity	AUTHORISED AGENT ON BEHALF OF THE APPLICANT

Where the premises licence is jointly held signature of 2nd applicant (the current premises licence holder) or 2nd applicant's solicitor or other authorised agent (please read guidance note 12). If signing on behalf of the applicant please state in what capacity.

Signature	
Date	
Capacity	

Contact name (where not previously given) and address for correspondence associated with this application (please read guidance note 13)

ANVA
[REDACTED]

ANVA LTD
P.O. BOX 1827
ILFORD, IG2 7WJ
Tel: 020 8599 5036 Fax: 020 8586 4401
Mobile: 07710942923/07930407212

Post town	ILFORD ESSEX	Post code	IG2 7WJ
-----------	--------------	-----------	---------

Telephone number (if any)	0208 599 5036
---------------------------	---------------

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

INFO@ANVA.CO.UK

Notes for Guidance

This application cannot be used to vary the licence so as to extend the period for which the licence has effect or to vary substantially the premises to which it relates. If you wish to make that type of change to the premises licence you should make a new premises licence application under section 17 of the Licensing Act 2003.

1. Describe 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.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example state type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please 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.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please 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, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

Consent of individual to being specified as premises supervisor

I MR. IBRAHIM BAGCIH
[full name of prospective premises supervisor]

of 10 CHARCROFT GARDENS
ENFIELD
EN3 7HA

[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

VARIATION
[type of application]

by

MR. IBRAHIM BAGCIH & MR. HUSSEIN ORDU
[name of applicant]

relating to a premises licence 12745
[number of existing licence, if any]

for

KIVRE FOOD CENTRE
497-499 CAMBRIDGE HEATH ROAD
LONDON E2 9BU

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

and any premises licence to be granted or varied in respect of this application made by

MR IBRAHIM BAGCHI & MR HUSSEIN ORJI
[name of applicant]

concerning the supply of alcohol at

KIVRE FOOD CENTRE
497-499 CAMBRIDGE HEATH RD.

[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

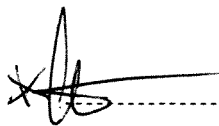
Personal licence number

LN/200800362
[insert personal licence number, if any]

Personal licence issuing authority

ENFIELD COUNCIL
[insert name and address and telephone number of personal licence issuing authority, if any]

Signed



Name (please print)

MR. IBRAHIM BAGCHI

Date

22 - DEC - 2008