

## 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

21/00150/PRMNEW

Current Premises address

69-71 Westow Hill London SE19 1TX

### Premises Details

Premises Licence Number \*

21/00150/PRMNEW

Premises Address \*

69-71 Westow Hill London SE19 1TX

Telephone Number at Premises (if any)

Non-domestic rateable value of premises. \*

£ 36750

### Type of Premises Licence Holder

Type of Premises Licence Holder \*

Individual(s)

## Premises Licence Holder - Individual

I/We being the premises licence holder, apply to vary a premises licence under section 34 of the licensing Act 2003 for the premises described.

Title *	<input type="text" value="Mrs"/>
First name *	<input type="text" value="Roya"/>
Surname *	<input type="text" value="Harris"/>
Street address *	<input type="text" value="[REDACTED]"/>
	<input type="text" value="London"/>
	<input type="text"/>
Town/City *	<input type="text" value="London"/>
County	<input type="text"/>
Postcode *	<input type="text" value="[REDACTED]"/>
Daytime Contact Telephone Number	<input type="text"/>
Email *	<input type="text" value="[REDACTED]"/>

## Variation

Do you want the proposed variation to take effect as soon as possible? *	<input type="text" value="Yes"/>
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## 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) \*

To integrate the courtyard leading out of the lower ground floor at the rear of the property into the current licence for the property. However, the courtyard will only operate during the hours of 1100hrs-2100hrs Monday- Sunday. Also, to remove the condition of having windows and doors closed during times of when licensable activities take place.

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 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) \*

Plays

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

## Type of Variation - Recorded Music

Please select the type of variation that applies to this activity.

\*

Add a new Activity

## Recorded Music Standard Times

Standard days and timings, where you intend to use the premises for the performance of recorded music. (please read guidance note 8) \* Please enter times in 24hr format (HH:MM)

Day \*

Week Days

10:00

00:00

## Recorded Music Standard Times

Standard days and timings, where you intend to use the premises for the performance of recorded music. (please read guidance note 8) \* Please enter times in 24hr format (HH:MM)

Day \*

Weekends

10:00

01:00

## Recorded Music

Will the playing of recorded music take place indoors or outdoors or both? (please read guidance note 4) \*

Both

Please provide further details (please read guidance note 5)

Our current license permits us to play music indoors Monday-Sundays inside during our current license operating hours. We would like to open an hour earlier (1000hrs) in the mornings to serve coffee and food. We would also like to play recorded music Monday-Sunday in the courtyard from 1100-2100hrs.

State any seasonal variations for the playing of recorded music (please read guidance note 6)

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 7)

## Type of Variation - Supply of Alcohol

Please select the type of variation that applies to this activity.

\*

Add a new 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 \*

Week Days

11:00

00:00

## 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 \*

Weekends

11:00

01:00

## 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)

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)

## Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 8) \* Please enter times in 24hr format (HH:MM)

Day \*

Week Days

10:00

00:00

## Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 8) \* Please enter times in 24hr format (HH:MM)

Day \*

Weekends

10:00

01:00

## 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.

Opening of the rear courtyard and opening of doors and windows of the venue during times of when licensable activities are taking place.

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)

b) The prevention of crime and disorder

Trained members of staff will be in place to prevent crime and disorder. CCTV is already in place in the basement. Any customers displaying any form of antisocial behaviour shall be asked to leave.

c) Public safety

The courtyard shall be used as a dining area, layout will be considered to keep the occupancy to 30 for the courtyard.

d) The prevention of public nuisance

In the courtyard a strict closing time of 9 o'clock shall be put in place. Occupancy for courtyard shall be for 30 people (60 in total for the basement) and will be an overflow of the indoor dining area,

e) The protection of children from harm

Children will only be permitted when accompanied with an adult in the courtyard

## 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 \*

Roya Harris

Date \*

01/04/2022

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

Roya

Surname /Company Name

Harris

Email \*

[REDACTED]

Telephone

[REDACTED]