

APPLICATION FOR 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 by midnight on Wednesday 8th February 2023 to the following address:

**London Borough of Croydon
Place Department, Licensing Team,
6th Floor, Zone A
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.

New Premises Licence

Premises Details

Premises Address *

7, THE NORBURY TRADING ESTATE CRAIGNISH
AVENUE NORBURY LONDON CROYDON SW16 4RW

Telephone number at premises (if any)

Non-domestic value of premises. *

£ 33.500

Applicant Details

I/We apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 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.

Please state whether you are applying for a premises licence as:

a person other than an individual -as a limited company/
limited liability partnership

Applicant Details

If you are applying as a person described in one of the above please confirm: *

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or

Other Applicant (Non Individual)

Name *

Pasta Evangelists

Registered Address *

14 Bonhill Street

Town/City *

London

Other Applicant (Non Individual)

| | |
|--|--|
| County | <input type="text"/> |
| Postcode * | <input type="text" value="EC2A 4BX"/> |
| Registered Number (where applicable) | <input type="text"/> |
| Description of applicant (for example partnership, company, unincorporated association, etc) * | <input type="text" value="limited liability company"/> |
| Telephone Number | <input type="text"/> |
| Email * | <input type="text"/> |

Operating Schedule

| | |
|--|--|
| When do you want the premises licence to start? * | <input type="text" value="18/12/2022"/> |
| If you wish the licence to be valid only for a limited period, when do you want it to end? | <input type="text"/> |
| Please give a general description of the premises. * | <input type="text" value="Delivery only kitchen"/> |
| If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend. | <input type="text"/> |

Operating Schedule

What licensable activities do you intend to carry on from the premises? * (Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2) *

Plays

Films

Indoor Sporting Events

Boxing or Wrestling

Operating Schedule

- 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

Late Night Refreshment Standard Times

Standard days and timings, where you intend to use the premises for late night refreshment.(please read guidance note 7) *
Please enter times in 24hr format (HH:MM)

| | |
|-------|-----------|
| Day * | Every Day |
| | 23:00 |
| | 02:00 |

Late Night Refreshment

| | |
|--|--|
| Will the provision of late night refreshment take place indoors or outdoors or both? (please read guidance note 3) * | Outdoors |
| Please provide further details.(please read guidance note 4) | The business will only provide hot food for late night. No alcohol can be purchased except with food. No music will be played in the premises. |
| State any seasonal variations for the provision of late night refreshment.(please read guidance note 5) | none |
| Please state any non-standard timings, where you intend to use the premises for late night refreshmentat different times from the Standard days and times listed?(please read guidance note 6) | none |

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 7)*
Please enter times in 24hr format (HH:MM)

Day *

Every Day

11:00

02:00

Supply of Alcohol

Will the supply of alcohol be for consumption on premises or off premises or both? (please read guidance note 8) *

Off the premises

State any seasonal variations for the supply of alcohol. (please read guidance note 5)

none

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 6)

none

Designated Premises Supervisor

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form)

Title *

Mr

First name *

Tommaso Alessandro

Surname *

Marano

Street address *

Town/City *

County

Postcode *

Designated Premises Supervisor

Personal Licence Number (if known)

Issuing Licensing Authority (if known)

Adult Entertainment

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 9).

no matters ancillary to the use of the premises

Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 7) * Please enter times in 24hr format (HH:MM)

Day *

Every Day

11:00

02:00

Opening Hours

State any seasonal variations. (please read guidance note 5)

none

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 6)

none

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 10)

The premises will operate as a delivery only business. The premises will not open to the public and will be used for the dispatch of alcohol and other goods only. There shall be no collection of alcohol by the public from the premises.

b) The prevention of crime and disorder

All CCTV recordings made by the CCTV system shall be retained and stored in a suitable and secure manner for a minimum of 30 days. There shall be at least one camera positioned at each entry and exit point to monitor any

Licensing Objectives

| | |
|---|--|
| | external areas to the premises and of such quality to enable identification of the recorded person in any light. |
| c) Public safety | The business will arrange for the telephone number for the premises and/or a member of the management team to be provided to residents upon request in order that any complaints can be made direct. |
| d) The prevention of public nuisance | The premises will encourage all riders involved in deliveries to use their vehicles in a responsible manner so as not to cause a nuisance to any residents or generally gather outside the premises; (where vehicles have engines) not to leave engines running when the vehicles are parked; and not to obstruct the highway. |
| e) The protection of children from harm | A Challenge 25 Policy shall be in force at the point of delivery of the alcohol. No delivery shall be made if the person seeking to accept delivery appears under 25 and is unable to provide proof of age. Examples of appropriate ID include a passport, photographic driving licence, military ID, biometric residents permit and the Proof of Age Standards Scheme approved age cards or any other form or method of identification. |

Declarations

Declaration Type *

Sole Applicant - Individual or Other

Declarations

I have uploaded a copy of the plan of the premises. I have uploaded a copy of the consent form completed by the individual I wish to be designated premises supervisor, if applicable. I understand I must now advertise my application. I understand that if I do not comply with the above requirements my application will be rejected. Applicable to all individual applicants, including those in partnership which is not a limited liability partnership, but not companies or limited liability partnerships I have included documents demonstrating my entitlement to work in the United Kingdom (please read note 15)

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' '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.

Signature/Declaration of applicant or applicant's solicitor or other duly authorised agent (see Guidance Note 11 & 12). 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.

Declarations

I understand I am not entitled to be issued with a licence if I do not have the entitlement to live and work in the UK (or if I am subject to a condition preventing me from doing work relating to the carrying on of a licensable activity) and that my licence will become invalid if I cease to be entitled to live and work in the UK (please read guidance note 15).

The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15).

Full Name *

Date *

Capacity *

Declaration made

Do you wish to provide alternative correspondence details? * Yes

Alternative Correspondence

Please provide Contact Name and postal address for correspondence associated with this application.

Title

First name

Surname

Street address *

Town/City *

County

Postcode *

Alternative Correspondence

Telephone Number

Email *

Email confirmation

On submission an email confirmation will be sent using the details below

Forename

Surname /Company Name

Email *

Telephone