

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 before midnight on the 17th July 2025 to the following address:

London Borough of Croydon
Sustainable Communities Department, Licensing Team,
3rd Floor, Zone B
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 *

INASPACE GALLERY 16 WESTOW STREET UPPER
NORWOOD LONDON CROYDON SE19 3AH

Telephone number at premises (if any)

Non-domestic value of premises. *

£ 11500

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 *

Chacarero Limited

Registered Address *

Town/City *

County

Other Applicant (Non Individual)

Postcode *	
Registered Number (where applicable)	
Description of applicant (for example partnership, company, unincorporated association, etc) *	Company
Telephone Number	
Email *	

Operating Schedule

When do you want the premises licence to start? *	18/07/2025
If you wish the licence to be valid only for a limited period, when do you want it to end?	
Please give a general description of the premises. *	The premises will start operating as a café-deli specialised in Argentine Empanadas from late July. The concept is what we call "Empanada House", where customers will be able to choose from a variety of savoury pasties and small cakes. The shop is going to be focused mainly on take-away, but we would also have a couple of tables for customers to enjoy a quick meal. No cooking is going to be made on site as all the produce will arrive ready to consume from our kitchen locally based. The property comprises a ground floor lock-up shop most recently as an art gallery. Gross frontage 5.25m Internal width 3.88m narrowing to 3.15m after 6.27m Maximum shop depth 8.55m Sales area 31.05m² (334ft²) approx. WC and a small storage space previously used as a kitchenette.
If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.	

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

Operating Schedule

- ☐
- Films

☐☐☐☐☐☐☐☒

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 *

Week Days

08:00

22:30

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 *

Saturday

Supply of Alcohol Standard Times

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 *

Supply of Alcohol

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

Is the premises used exclusively or primarily for supply of alcohol for consumption on the premises? *

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

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)

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 *

First name *

Surname *

Street address *

Designated Premises Supervisor

Town/City *

County

Postcode *

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 adult entertainment or services that may give rise to concern in respect of children will be carried out on 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 *

Week Days

08:00

22:30

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 *

Saturday

08:00

Opening Hours Standard Times

22:30

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 *

Sunday

08:00

22:00

Opening Hours

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

Not applicable.

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)

Licensing Objectives

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

a) General - all four licensing objectives (b, c, d and e) (please read guidance note 10) *

The responsible person will ensure that the staff on the Premises will not carry out, arrange or participate in any irresponsible promotions.

b) The prevention of crime and disorder *

CCTV system will be installed at the premises and maintained in full working order at all times and be continually recording when the premises are in use. Substantial food and non-intoxicating beverages, including drinking water, will be available in all parts of the premises where alcohol is sold or supplied for consumption on the premises. On sales will be ancillary to the sale of food.

c) Public safety *

Staff will ensure that the maximum number of persons permitted in premises is never exceeded. An adequate and appropriate supply of first aid equipment and materials shall be available on the premises at all times.

d) The prevention of public nuisance *

Patrons will be asked to exit the Premises in a quiet and orderly manner taking into consideration of the neighbours

Licensing Objectives

e) The protection of children from harm *

within the vicinity. No noise or vibrations shall be emanated or transmitted through the premises.

There will be clear visible signage prominently displayed at the Premises which can be easily seen and read by customers stating that a Challenge 25 policy is in operation at the Premises.

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.

- ☒ 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 *

19/06/2025

Capacity *

Applicant

Declarations



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

Surname /Company Name

Email *

Telephone