APPLICATION FOR A PREMISES LICENCE TO BE GRANTED UNDER THE LICENSING ACT 2003

lf wish make representations you to any in relation to this application, please do SO in writing before midnight on the 4th November 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.

Croydon Council Croydon T: 02087605466

E: licensing@croydon.gov.uk

New Premises Licence

Premises Details	
Premises Address *	KFC 744-746 LONDON ROAD THORNTON HEATH CROYDON CR7 6JA
Telephone number at premises (if any)	
Non-domestic value of premises. *	
Applicant Details	
I/We apply for a premises licence under section 17 of the Licenpremises) and I/we are making this application to you as the reLicensing 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 *	CM RESTAURANT LTD
Registered Address *	
Town/City *	
County	

Other Applicant (Non Individual)	
Postcode *	
Registered Number (where applicable)	
Description of applicant (for example partnership, company, unincorporated association, etc) *	Limited Company
Telephone Number	
Email *	
Operating Schedule	
When do you want the premises licence to start? *	06/11/2025
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. *	An existing quick service restaurant operating as a KFC outlet offering refreshment for consumption on and off the premises.
If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.	
On another a Calcadada	
Operating Schedule	
What licensable activities do you intend to carry on from the pr 2003 and Schedules 1 and 2 to the Licensing Act 2003)	emises? * (Please see sections 1 and 14 of the Licensing Act
Provision of regulated entertainment (please read guidance no	te 2) *
Plays	
Films	
Indoor Sporting Events	
Boxing or Wrestling	

Ope	rating 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	s
	ard days and timings, where you intend to use the premis enter times in 24hr format (HH:MM)	ses for late night refreshment.(please read guidance note 7) *
Day *		Monday to Thursday
		23:00
		01:00
Late	Night Refreshment Standard Times	S
	ard days and timings, where you intend to use the premis enter times in 24hr format (HH:MM)	ses for late night refreshment.(please read guidance note 7) *
Day *		Friday to Saturday
		23:00
		03:00

_ate N	light	Refres	hment	Stand	ard	Times	
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Standard days and timings, where	you intend to use the	premises for lat	te night refreshment.(ر	please read gui	idance note 7)	*
Please enter times in 24hr format	(HH:MM)					

Day *

Sunday

23:00

01:00

Late Night Refreshment

Will the provision of late night refreshment take place indoors or outdoors or both? (please read guidance note 3) *

Both

Please provide further details.(please read guidance note 4)

The provision of hot food and drinks for consumption on and off 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)

The premises will then continue late night refreshment sales on the morning British Summer Time is applied until 04:00 hrs (BST).

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).

None.

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 *

Monday to Thursday

11:00

01:00

	0	pening	Hours	Standard	Times
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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 *

Friday to Saturday

11:00

03:00

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

11:00

01:00

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)

The premises will remain open on the morning British Summer Time is applied until 04:00 hrs (BST).

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) *

See attached schedule of conditions.

b) The prevention of crime and disorder *

See attached schedule of conditions.

c) Public safety *

See attached schedule of conditions.

d) The prevention of public nuisance *

See attached schedule of conditions.

Licensing Objectives				
e) The protection of children from harm *	See attached schedule of conditions.			
Declarations				
Declaration Type *	Sole Applicant - Individual or Other			
Declarations				
Deciarations				
I have uploaded a copy of the plan of the premises. I have uplot I wish to be designated premises supervisor, if applicable. I und that if I do not comply with the above requirements my application including those in partnership which is not a limited liability part have included documents demonstrating my entitlement to wor	derstand I must now advertise my application. I understand ion will be rejected. Applicable to all individual applicants, nership, but not companies or limited liability partnerships I			
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 & 2). 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 *	07/10/2025			
Capacity *	Applicant's Solicitor			
✓ Declaration made				
Do you wish to provide alternative correspondence details? *				

Declarations				
Alternative Correspondence				
Please provide Contact Name and postal address for correspon	ndence associated with this application.			
Title				
First name				
Surname				
Street address *				
Town/City *				
County				
Postcode *				
Telephone Number				
Email *				
Email confirmation				
On submission an email confirmation will be sent using the deta	ails below			
Forename				
Surname /Company Name				
Email *				
Telephone				