

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

If you wish to make representations in relation to this application, please do so in writing no later than 12.02.2026 to the following address:

London Borough of Croydon
Streets & Environment 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 unlimited.

New Premises Licence

Premises Details

Business/Premises Name *	JDN Express
Premises Address *	GROUND FLOOR SHOP 113 BOSTON ROAD CROYDON CROYDON CR0 3EH
Telephone number at premises (if any)	
Non-domestic value of premises. *	£ 0

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:	an individual or individuals
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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
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Individual Applicant

Title *	Mr
First name *	Bernard
Surname *	Jeganath
Current residential address *	

Individual Applicant

Address line 2	<input type="text"/>
Address line 3	<input type="text"/>
Town/City *	<input type="text"/>
County	<input type="text"/>
Postcode *	<input type="text"/>
Date of Birth *	<input type="text"/>
<input checked="" type="checkbox"/> I am 18 years old or over	
Nationality *	<input type="text"/>
Daytime Contact Telephone Number *	<input type="text"/>
Email *	<input type="text"/>
Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 15 for information)	<input type="text"/>

Operating Schedule

When do you want the premises licence to start? *	<input type="text" value="05/02/2026"/>
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. *	<div>The premises is a small, self-contained corner shop operating as a convenience retail store. The business will primarily sell everyday grocery items and household essentials, including packaged food, soft drinks, newspapers, confectionery, tobacco products, and other convenience goods. Alcohol, where permitted, will be sold only for consumption off the premises and will be ancillary to the main retail use of the shop. The premises will not provide seating, entertainment, or facilities for on-site consumption of alcohol. The shop will be open to the general public during its permitted opening hours and will be staffed at all times when trading. The layout consists of a single retail sales area</div>

Operating Schedule

with customer access from the street, together with a small storage area and staff facilities to the rear. The operation of the premises will be managed in accordance with the licensing objectives, with particular regard to the prevention of crime and disorder, public safety, the prevention of public nuisance, and the protection of children from harm.

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, late night refreshment or supply of alcohol (please read guidance note 2) *

☐

a) Plays

☐

b) Films

☐

c) Indoor Sporting Events

☐

d) Boxing or Wrestling

☐

e) Live Music

☐

f) Recorded Music

☐

g) Performances of Dance

☐

h) Anything of a similar description falling under Music or Dance

☐

i) Provision of Late Night Refreshment

☒

j) Supply of Alcohol

j) 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
	23:00

j) 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
	08:00
	23:00

j) 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 *	Sunday
	10:00
	22:30

j) Supply of Alcohol

Will the supply of alcohol be for consumption on premises or off premises or both? (please read guidance note 8) *	Off Premises
Is the premises used exclusively or primarily for supply of alcohol for consumption on the premises? *	No
State any seasonal variations for the supply of alcohol. (please read guidance note 5)	Christmas Day 12:00 to 15:00 and 19:00 to 22:30 Good Friday 08:00 to 22:30

j) Supply of Alcohol

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 *

Mr

First name *

Kalaivathanan

Surname *

Saseenthiran

Street address *

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). *

N/a

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)

Opening Hours Standard Times

Day *

Every Day

07:00

23:00

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 licence holder and staff will ensure that the premises is operated responsibly and in full compliance with the Licensing Act 2003 and all relevant conditions attached to the licence. All staff will be trained on their legal responsibilities, the four licensing objectives, and the importance of promoting them at all times. The premises will be managed to a high standard to ensure a safe, orderly, and community-friendly retail environment.

b) The prevention of crime and disorder *

- A comprehensive CCTV system will be installed and maintained, covering all public areas, the entrance/exit, and the alcohol display area. - CCTV recordings will be retained for a minimum period (e.g. 28 days) and made available to police or authorised officers upon request. - The premises will be staffed at all times when open, with staff trained in conflict management and refusal of service. - Alcohol will be displayed in a supervised area of the shop to reduce theft. - A refusals log will be kept and regularly reviewed. - The premises will operate a zero-tolerance policy towards theft, violence, abusive behaviour, or drug-related activity, and incidents will be reported to the police when necessary.

c) Public safety *

- The premises will comply with all relevant health and safety and fire safety regulations. - Fire exits will be kept clear and clearly marked at all times. - The shop layout will allow for safe customer movement and avoid overcrowding. - Staff will be trained in emergency procedures, including evacuation and accident response. - Electrical equipment and safety systems will be regularly inspected and maintained.

d) The prevention of public nuisance *

- Alcohol sales will be for off-sales only, and customers will be discouraged from loitering outside the premises. - Clear signage will be displayed requesting customers to respect local residents and leave the area quietly. - No amplified music will be played in a manner that causes disturbance to neighbouring properties. - Deliveries and waste disposal will be managed at reasonable times to minimise noise. - The area immediately outside the shop will be monitored by staff and kept clean and free from litter.

e) The protection of children from harm *

- The premises will operate a Challenge 25 policy for age-restricted products, including alcohol and tobacco. -

Licensing Objectives

Acceptable forms of identification will include a passport, UK driving licence, or PASS-approved ID. - All staff involved in the sale of age-restricted products will receive regular training, with training records maintained. - Alcohol and other age-restricted products will be displayed away from items typically purchased by children where possible. - A refusals register will be maintained and made available for inspection.

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 *

MR BERNARD JEGANATH

Date *

06/01/2026

Capacity *

Applicant

Declarations



Declaration made

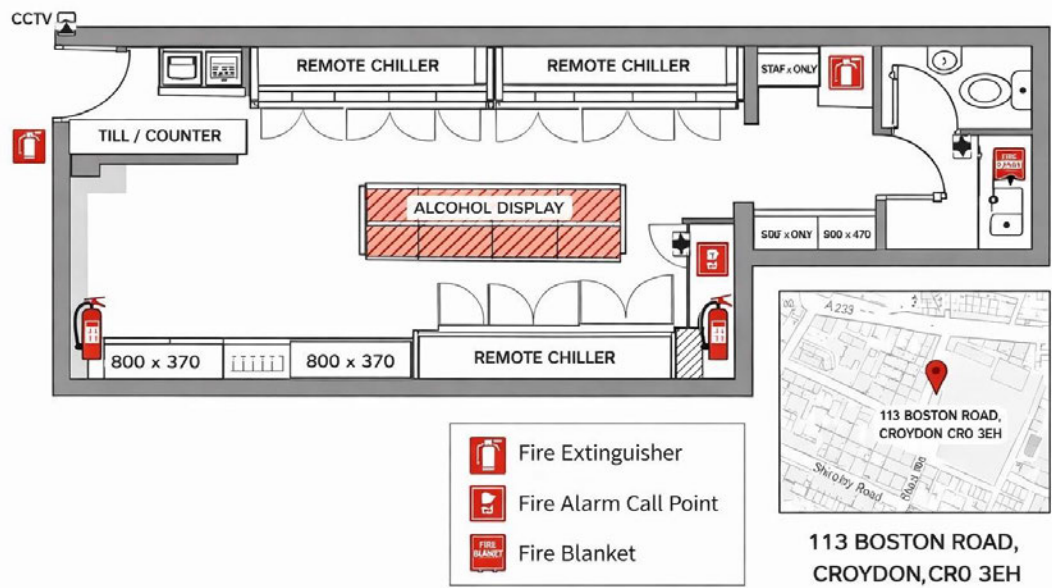
Do you wish to provide alternative correspondence details? * No

Email confirmation

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

Forename	Bernard
Surname /Company Name	Jeganath
Email *	
Telephone	

FLOOR PLAN FOR PREMISES LICENCE APPLICATION



113 BOSTON ROAD,
CROYDON, CR0 3EH

FOR LICENSING PURPOSES ONLY