

**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 11.05.2026 to the following address:

London Borough of Croydon  
Streets & Environment Department, Licensing Team,  
3<sup>rd</sup> Floor, Zone B  
Bernard Weatherill House  
8 Mint Walk  
Croydon, CR0 1EA

Or by email to: [licensing@croydon.gov.uk](mailto: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 \*

Sapphire's Lounge

Premises Address \*

7 LOWER ADDISCOMBE ROAD CROYDON CROYDON  
CR0 6PQ

Telephone number at premises (if any)

[REDACTED]

Non-domestic value of premises. \*

£ 14000

### 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

### 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

### Individual Applicant

Title \*

First name \*

Surname \*

Current residential address \*

## Individual Applicant

Address line 2

Address line 3

Town/City \*

County

Postcode \*

Date of Birth \*

I am 18 years old or over

Nationality \*

Daytime Contact Telephone Number \*

Email \*

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)

## Other Applicant (Non Individual)

Name \*

Rachel Property Ltd

Registered Address \*

33 Carleton Ave

Address line 2

Address line 3

Town/City \*

Wallington

County

United Kingdom

Postcode \*

SM6 9LW

## Other Applicant (Non Individual)

Registered Number (where applicable)

Description of applicant (for example partnership, company, unincorporated association, etc) \*

Telephone Number \*

Email \*

## Operating Schedule

When do you want the premises licence to start? \*

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. \*

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

## Operating Schedule

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

## e) Live Music Standard Times

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

Day \*

Monday to Thursday

16:00

22:00

## e) Live Music Standard Times

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

Day \*

Friday to Saturday

14:00

00:00

## e) Live Music Standard Times

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

Day \*

Sunday

### e) Live Music Standard Times

14:00

22:00

### e) Live Music

Will the Performance of Live Music take place indoors or outdoors or both? (please read guidance note 3) \*

Indoors

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

Unamplified

State any seasonal variations for the Performance of Live Music. (please read guidance note 5)

Please state any non-standard timings, where you intend to use the premises for the performance of live music at different times from the Standard days and times listed? (please read guidance note 6)

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

Day \*

Monday to Thursday

16:00

22:00

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

Day \*

Friday to Saturday

14:00

00:00

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

Day \*

Sunday

14:00

22:00

## f) Recorded Music

Will the playing of recorded music take place indoors or outdoors or both? (please read guidance note 3) \*

Indoors

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

Unamplified

State any seasonal variations for the playing of recorded music. (please read guidance note 5)

N/A

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 6)

N/A

## i) Provision of 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 \*

## i) Provision of 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 \*

Friday to Saturday

23:00

### i) Provision of Late Night Refreshment Standard Times

23:30

### i) Provision of 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 \*


### i) Provision of Late Night Refreshment

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

Indoors

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

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State any seasonal variations for the provision of late night refreshment.(please read guidance note 5)

N/A

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)

N/A

### 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 \*

Monday to Thursday

16:00

22:00

### j) Supply of Alcohol Standard Times

## 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 \*

Friday to Saturday

14:00

00:00

## 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

14:00

22:00

## j) Supply of Alcohol

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

On Premises

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

Yes

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

N/A

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)

N/A

## 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 \*

Denislas



## Designated Premises Supervisor

Surname \*

Thayanesan

Street address \*

[Redacted]

[Redacted]

[Redacted]

Town/City \*

[Redacted]

County

[Redacted]

Postcode \*

[Redacted]

Personal Licence Number (if known)

[Redacted]

Issuing Licensing Authority (if known)

[Redacted]

## 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, beyond those already restricted by law

## 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

16:00

22:00

## 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)

## Opening Hours Standard Times

Day \*

Friday to Saturday

14:00

00:00

## 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

14:00

22:00

## Opening Hours

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

N/A

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)

N/A

## 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)

-Comprehensive CCTV that records 24hrs a day, recording will keep For a minimum of 30days and all recordings correctly stamped with date & time - Appropriate and prominent signage. - Staff training and awareness - Compliance with local authority & other responsibilities authorities requests - Maintaining of appropriate record Engaging with the local community

b) The prevention of crime and disorder \*

-Appropriate signage will be displayed in a prominent informing customers that they are being recorded on CCTV -Staff who is conversant with CCTV shall be on premises at all the times premises are open -Use of incident book -Risk assessments of advertised hours and especially extended

## Licensing Objectives

	hours to determine whether additional security is required - No promotion that encourage illegal, irresponsible
c) Public safety *	-Safety signs and notices in place -Floor staff to conduct require physical sweeps inside the premises to remove hazardous object/waste -Fire safety measures will be adhered and display of fire exit signs -Maintenance of all provided fire and other safety arrangements (including evacuation procedures) -Regular staff training
d) The prevention of public nuisance *	-Any gathering outside the premises will not be tolerated to avoid nuisance to the local community -Full cooperation from the owner and staff with request from board authority and responsible authorities as well as the local community including neighbourhood -Notice will be prominently displayed in the premises requesting customers to behave quietly and respect the residential nature of the area -C25, proof of age scheme and posters of the challenge will be displayed
e) The protection of children from harm *	-No underage sale of alcohol, C25 scheme and posters to that effect will be displayed. -Acceptable form of ID (new type of driving licence with photograph or passport with photograph will be demanded) -Use of CCTV to discourage purchase by proxy of alcohol by children. -Record will be maintained for at least 30 days period and record of the training will be provided upon required from a police officer or officer from the local authority.

## Declarations

Declaration Type *	Sole Applicant - Individual or Other
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## 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.

## Declarations

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 \*

02/04/2026

Capacity \*

Applicant

Declaration made

Do you wish to provide alternative correspondence details? \*

No

## Email confirmation

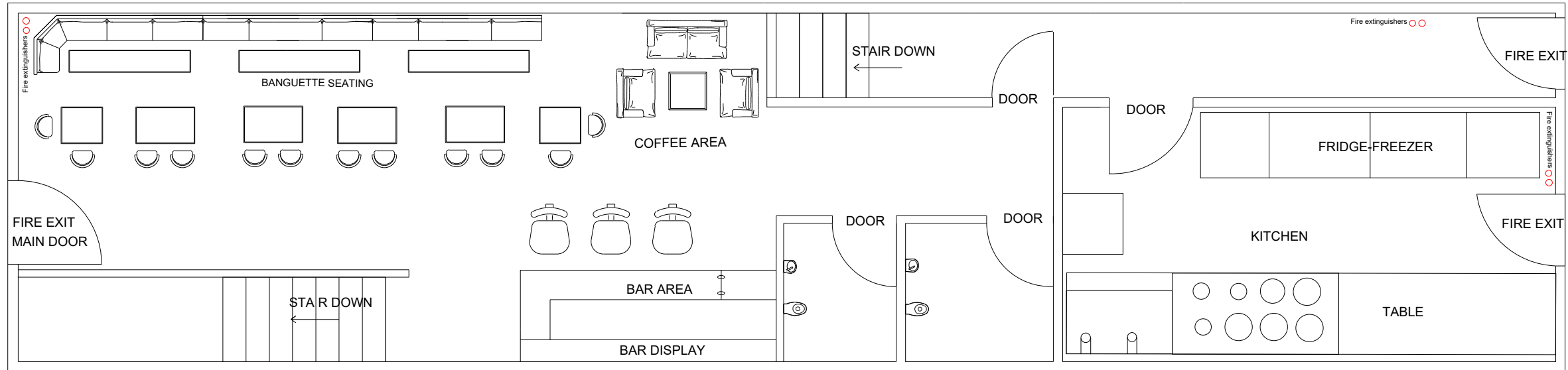
On submission an email confirmation will be sent using the details below

Forename

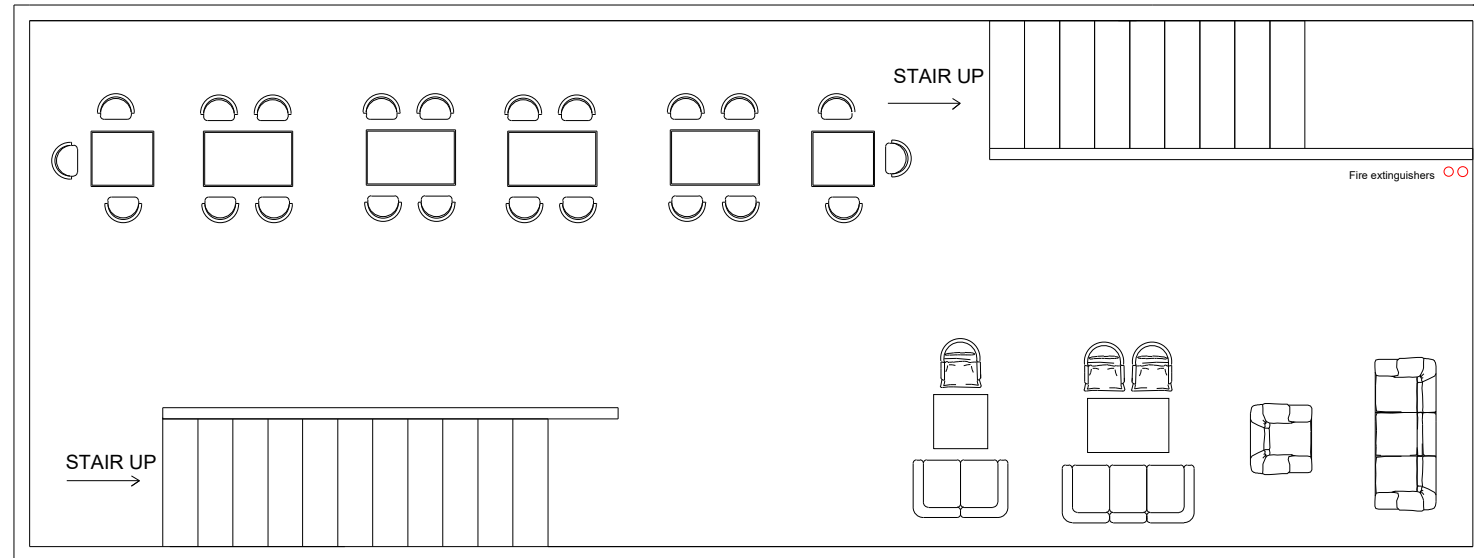
Surname /Company Name

Email \*

Telephone



**GF Plan**  
1 : 100



**Basement Plan**  
1 : 100

**REVISION NOTES:**

REV:	DATE:	DESCRIPTION :
01	11.04.2025	FLOOR PLAN
02	11.04.2026	FLOOR PLAN UPDATED

**GENERAL NOTES:**

1. All Dimensions are in millimetres unless otherwise stated
2. All work to be carried out in accordance with the current edition of the building regulations 1991 (including amendments) and all relevant british standards/codes of practice.
3. The Contractor is responsible for the correct setting out of the works on site, all dimensions to be checked prior to fabrication of materials and commencement of works.
4. This Drawing is to be read in conjunction with all relevant drawings and specifications
5. Exact SVP and Boiler position to be determined onsite by contractor

CLIENT: NAME: DAVID MARIAMPILLAI

PROJECT ADDRESS:  
7 LOWER ADDISCOMBE  
CROYDON  
CR0 6PQ

DRAWING TITLE: SAPPHIRE'S LOUNGE  
GROUND FLOOR & BASEMENT

DRAWN BY: JKG | CHECKED BY: JKG

DATE : 11.04.2026

SCALE@A3 : 1:100 | No: PLAN 001 | Rev: 02

