

**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 29th July 2026 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

Please note - an applicant has the right to know the name and address of any person making representations, so they can assess from a fairness point of view, if the person is genuinely likely to be affected by the licensable activities if the application is granted as applied for. Therefore, you must supply your name and address when making any representations. Please contact the Licensing Team should you wish to discuss this at 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.

**Application for a premises licence to be granted
under the Licensing Act 2003**

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

I Arman Zahiri Bashman
(Insert name(s) of applicant)

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

Part 1 – Premises details

Postal address of premises or, if none, ordnance survey map reference or description Abshar 65-67 South End			
Post town	Croydon	Postcode	CR0 1BF

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£44,000

Part 2 - Applicant details

Please state whether you are applying for a premises licence as Please tick as appropriate

- | | | |
|--|-------------------------------------|-----------------------------|
| a) an individual or individuals * | ☒ | please complete section (A) |
| b) a person other than an individual * | | |
| i as a limited company/limited liability partnership | ☐ | please complete section (B) |
| ii as a partnership (other than limited liability) | ☐ | please complete section (B) |
| iii as an unincorporated association or | ☐ | please complete section (B) |
| iv other (for example a statutory corporation) | ☐ | please complete section (B) |
| c) a recognised club | ☐ | please complete section (B) |
| d) a charity | ☐ | please complete section (B) |

- e) the proprietor of an educational establishment ☐ please complete section (B)
- f) a health service body ☐ please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital in Wales ☐ please complete section (B)
- g(a) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England ☐ please complete section (B)
- h) the chief officer of police of a police force in England and Wales ☐ please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm (by ticking yes to one box below):

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

I am making the application pursuant to a
 statutory function or ☐
 a function discharged by virtue of Her Majesty's prerogative ☐

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr ☒	Mrs ☐	Miss ☐	Ms ☐	Other Title (for example, Rev)	
Surname Zahiri Bashman			First names Arman		
Date of birth over			I am 18 years old or ☒ Please tick yes		
Nationality British					
Current residential address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr ☐	Mrs ☐	Miss ☐	Ms ☐	Other Title (for example, Rev)	
Surname			First names		
Date of birth over			I am 18 years old or ☐ Please tick yes		
Nationality					
Current postal address if different from premises address					
Post town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

Name
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
0	1	0 8 2 0 2 6

If you wish the licence to be valid only for a limited period, when do you want it to end?

DD	MM	YYYY

Please give a general description of the premises (please read guidance note 1)

Restaurant that provides sit down meals and alcoholic drinks.
The Restaurant also provides take away meals

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

n/a

What licensable activities do you intend to carry on from the premises?

(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all that apply

- a) plays (if ticking yes, fill in box A)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)
- f) recorded music (if ticking yes, fill in box F)
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)

Provision of late night refreshment (if ticking yes, fill in box I) ☒

Supply of alcohol (if ticking yes, fill in box J) ☒

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 7)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	☐
				Outdoors	☐
				Both	☐
Day	Start	Finish			
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

B

Films		Indoors	☐
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Standard days and timings (please read guidance note 7)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Outdoors	☐
Day	Start	Finish		Both	☐
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

C

Indoor sporting events	<u>Please give further details</u> (please read guidance note 4)
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Standard days and timings (please read guidance note 7)		
Day	Start	Finish
Mon		
Tue		
Wed		
Thur		
Fri		
Sat		
Sun		
State any seasonal variations for indoor sporting events (please read guidance note 5)		
Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list (please read guidance note 6)		

D

Boxing or wrestling entertainments		Indoors	☐
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Standard days and timings (please read guidance note 7)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Outdoors	☐
Day	Start	Finish		Both	☐
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

E

Live music		Indoors	☐
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Standard days and timings (please read guidance note 7)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Outdoors	☐
Day	Start	Finish		Both	☐
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for the performance of live music</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

F

Recorded music		Indoors	☐
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Standard days and timings (please read guidance note 7)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Outdoors	☐
Day	Start	Finish		Both	☐
Mon			<u>Please give further details here</u> (please read guidance note 4)		
Tue					
Wed			<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 5)		
Thur					
Fri			<u>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat					
Sun					

G

Performances of dance Standard days and timings (please read guidance note 7)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	☐
				Outdoors	☐
				Both	☐
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
Tue					
			<u>State any seasonal variations for the performance of dance</u> (please read guidance note 5)		
Wed					
Thur					
			<u>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Fri					
Sat					
Sun					

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)	Indoors	☐
Mon				Outdoors	☐
				Both	☐
Tue			<u>Please give further details here</u> (please read guidance note 4)		
Wed					
Thur			<u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 5)		
Fri					
Sat			<u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sun					

Late night refreshment Standard days and timings (please read guidance note 7)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	☒
				Outdoors	☐
				Both	☐
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon	23:00	03:00			
Tue	23:00	03:00			
			State any seasonal variations for the provision of late night refreshment (please read guidance note 5)		
Wed	23:00	03:00			
Thur	23:00	03:00			
			Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list (please read guidance note 6)		
Fri	23:00	03:00			
Sat	23:00	03:00			
Sun	23:00	03:00			

J

Supply of alcohol Standard days and timings (please read guidance note 7)			<u>Will the supply of alcohol be for consumption – please tick</u> (please read guidance note 8)	On the premises	☒
				Off the premises	☐
				Both	☐
Day	Start	Finish	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5)		
Mon	11:00	03:00			
Tue	11:00	03:00			
Wed	11:00	03:00			
Thur	11:00	03:00			
Fri	11:00	03:00	<u>Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list</u> (please read guidance note 6)		
Sat	11:00	03:00			
Sun	11:00	03:00			

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):

Name Mr Arman Zahiri Bashman	
Date of birth	
Postcode	
Personal licence number	
Issuing licensing authority:	

☐☐☐☐
K

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

L

Hours premises are open to the public Standard days and timings (please read guidance note 7) <table><tr><td>Day</td><td>Start</td><td>Finish</td></tr><tr><td>Mon</td><td>11:00</td><td>03:30</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Tue</td><td>11:00</td><td>03:30</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Wed</td><td>11:00</td><td>03:30</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Thur</td><td>11:00</td><td>03:30</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Fri</td><td>11:00</td><td>03:30</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Sat</td><td>11:00</td><td>03:30</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Sun</td><td>11:00</td><td>03:30</td></tr><tr><td></td><td></td><td></td></tr></table>	Day	Start	Finish	Mon	11:00	03:30				Tue	11:00	03:30				Wed	11:00	03:30				Thur	11:00	03:30				Fri	11:00	03:30				Sat	11:00	03:30				Sun	11:00	03:30				State any seasonal variations (please read guidance note 5) Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 6)
Day	Start	Finish																																												
Mon	11:00	03:30																																												
Tue	11:00	03:30																																												
Wed	11:00	03:30																																												
Thur	11:00	03:30																																												
Fri	11:00	03:30																																												
Sat	11:00	03:30																																												
Sun	11:00	03:30																																												

M 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 business premises has had a premises licence 2017 with the identical hours applied for, however, the current owners changed their business entity details and forgot to transfer the licence within the prescribed time. Now they are having to reapply for new licence.

We are a responsible business who takes seriously the licensing objectives and the Council's Statement of Policy for the Licensing Act 2003. We have set out below what we feel is necessary to ensure that the licensing objectives have been fulfilled for our business.

We will work closely with other neighbouring businesses and the various statutory agencies to promote the licensing objectives.

All staff are trained and are aware of the Licensing Legislation.

We as a business, appreciate that this application falls within the Council's Cumulative Impact Zone, however, we are not planning to add to this or cause any further impacts on the licensing objectives, as we are reapplying for a licence that ceased to exist due to an admin error on our behalf.

We have been in dialogue with the Police and agreed some additional conditions (see attached) as part of this application.

b) The prevention of crime and disorder

The aspect of our business will be the sit-down restaurant and the consumption of food.

We believe our business will be low impact on crime and disorder and have traded till 03:00 without concerns raised

We have a CCTV system that will cover the premises in its entirety

We have a zero tolerance on drugs on site.

'Challenge 25' will be operated in relation to the sale of alcohol

c) Public safety

We have a consultant Environmental Health Officer who has advised us on public safety. We have a full stocked first aid kit and trained in first aid. Our business will not give rise to a public safety risk. We will have an automatic fire detection system, emergency lighting and firefighting equipment strategically placed throughout the premises.

Staff to be training to deal with public safety and first aid.

d) The prevention of public nuisance

Music, if provided will be purely background music.

Monitoring of business and impact to be checked on a regular basis by area-based consultant EHO.

We believe our business will be low impact on public nuisance and have traded till 03:00 without concerns raised

e) The protection of children from harm

We will not provide any form of regulated entertainment that will cause harm to children.
'Challenge 25' will be operated in relation to the sale of alcohol.
We will not promote or allow the consumption of alcohol by children.

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee. ☒
- I have enclosed the plan of the premises. ☒
- I have sent copies of this application and the plan to responsible authorities and others where applicable. ☒
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable. ☒
- I understand that 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 a 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.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

Declaration	[Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] 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)
Signature	
Date	30.06.26
Capacity	

For joint applications, signature of 2nd applicant or 2nd applicant's solicitor or other authorised agent (please read guidance note 13). **If signing on behalf of the applicant, please state in what capacity.**

Signature	
Date	
Capacity	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)			
Post town		Postcode	
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			