

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. Your right to work in the UK will be checked as part of your licensing application and this could involve us checking your immigration status with the Home Office. We may otherwise share information with the Home Office. Your licence application will not be determined until you have complied with the below guidance. (See page 14)

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.

l/We	Mathew Morrison	
	(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

Name and Posi description 88 Springba Hither Green		or, if none, ordnar	ice survey ma	np reference or
Post town	LONDON		Postcode	SE13 6SX
Telephone nu	ımber at premises (if a	any)		

Telephone number at premises (if any)				
Non-domestic rateable value of premises	£0	7,400	(B)	
		-		

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)

THI THE	THE ATT	
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.1	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)
	the chief officer of police of a police force in	please complete section (B)

please complete section (B)

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

England and Wales

a health service body

a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr	Mrs		Miss		Ms		her Title or example, ev)	
Surname Morrison					First Mathe		10 S	
Date of birth 19/1 old or over	Date of birth 19/11/1978 I am 18 years old or over Please tick yes						ase tick yes	
Nationality Britisl	'n							
	different from premises					-10		
Post town	Lond	on					Postcod e	SE12 8JQ
Daytime conta number	ct te le	pho	ne	079	79 1562	16		
E-mail address (Required) mathmorrison@hotmai			nail.com					

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

SECOND INDIVIDUAL APPLICANT (if applicable)

Мг	Mrs	Miss	Ms	- 10	Other Title (for example, Rev)	- 1 % =
Surname Cole		11		st na ıma	ames	0 0
Date of birth 23/11/1978 I am 18 years old or over					se tick yes	
Nationality British	ı				_	- 1
Current postal address if different from premises address			Farm Rd		=	
Post town	Post town London				Postcod e	SE12 8JQ
Daytime contac number	ct te le	phone				
E-mail address (Required)		emmacole78@	hotmail.co	n		

(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	, w. T					
Address						I.
Registered numb	per (where applicable)		5.0	101		
	*					
Description of ap association etc.)	plicant (for example,	partnership, compar	ny, uninc	orpora	ted	
				- 10	0	
Telephone numb	er (if any)					

E-mail address (Required)		

PART 3 - OPERATING SCHEDULE

When do you want the premises licence to start?

DD		MN	1	YYYY			
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If you wish the licence to be valid only for a limited period, when do you want it to end?

DD	O MM CYYY		ΥY				

Small micropub within a parade of shops not far from Hither Green Station. The area area mas a mix of commercial and residential properties. To the rear there are houses, and above there is rented flat. The premises consists of a basement, a front bar area and a back room snug. The micropub will be focused towards customers who are 30+ and families. We will be selling a variety of premium/quality ales as well as wine, prossecco and a limited range of premium spirits. There will be two toilets, including facilities that are wheel chair assessable. Children will be allowed access until 1800. Customers will not be allowed to take drinks outside of premises. There will also be off sale facilitates were customers will be able to buy beer to take away

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

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 \boldsymbol{M}

					/
Α					
Play		. 1	Will the performance of a play	Indoors	
	dard days a gs (please i		take place indoors or outdoors or both – please tick (please	Indoors	
	ance note 7		read guidance note 3)	Outdoor	
Do	<u> </u>			/	_
Da y	Start	Finish		Both	
Mo n			Please give further details here (pnote 4)	lease read	guidance
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We			State any seasonal variations for	performine	g plays
d			(please read guidance note 5)		
Th	<u> </u>				
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Fri			Non-standard timings. Where you premises for the performance of		
			times to those listed in the colum		
Sat			list (please read guidance note 6)		
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В					
Film	-	/.	Will the exhibition of films take	Indoors	
	dard days a	ind timings idance note	place indoors or outdoors or both – please tick (please read	Indoors	_ = =
7)	.sc read ga	Marioc Hote	guidance note 3)	Outdoor	
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n			guidance note 4)		

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We d			State any seasonal variations for films (please read guidance note 5	
Th ur				11
Fri			Non-standard timings. Where yo premises for the exhibition of fill times to those listed in the column	ms at different nn on the left,
Sat			please list (please read guidance	note 6)
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Stan	or sporting dard days a ase read gui	nd timings	Please give further details (pleas note 4)	e read guidance
Da y	Start	Finish		
Mo n				
Tu e		-	State any seasonal variations fo events (please read guidance note	
We d				
Th ur			Non-standard timings. Where y the premises for indoor sporting times to those listed in the column	nevents at different nn on the left.
Fri			please list (please read guidance	note 6)
Sat				Ï
Su n				
D		/		
ente	ing or wres	5	Will the boxing or wrestling entertainment take place	Indoors
timin	idard days a igs (please i ance note 7	read	indoors or outdoors or both – please tick (please read guidance note 3)	Outdoor s
Da y	Start	Finish		Both

2					
Mo n	:		<u>Please give further details here</u> (p note 4)	lease read	guidance
Tu e					
We d			State any seasonal variations for entertainment (please read guidance)		wrestling
Th ur					
Fri			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 (please read guidance note 6)		
Sat			ieπ, piease list (piease read guidan	ice note 6)	
Su n					
E	-				
Stan	music dard days a		Will the performance of live music take place indoors or outdoors or both please tick	Indoors	-
	gs (please i ance note 7		(please read guidence note 3)	Outdoor s	
Da y	Start	Finish		Both	
Mo n			Please give further details here (pnote 4)	lease read	guidance
Tu e					
We d		1 _	State any seasonal variations for live music (please read guidance n	the perfor ote 5)	mance of
Th ur					
Fri			Non-standard timings. Where yo premises for the performance of different times to those listed in t	live music he column	<u>at</u>
Sat			left, please list (please read guidar	nce note 6)	
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F					
Star timir	orded mus dard days a igs (please	and read	Will the playing of recorded music take place indoors or outdoors or both – please tick	Indoors	
guid	guidance note 7)		(please read guidance note 3)	Outdoor	

Da y	Start	Finish	*	Both	
Mo n		11	Please give further details here (pnote 4)	lease read	guidance
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We d	F		State any seasonal variations for recorded music (please read guida	the playin ance note 5	<u>g of</u>)
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Fri			Non-standard timings. Where you premises for the playing of record different times to those listed in the playing of the playing the playing of the playing	ded music he column	at
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Stan	Performances of dance Standard days and timings (please read		Will the performance of dance take place indoors or outdoors or both - please tick (please	Indoors	
	ance note 7		read guidance note 3) "	Outdoor s	
Da y	Start	Finish		Both	
Mo n			Please give further details here (pnote 4)	olease read	guidance
Tu e					
We d			State any seasonal variations for dance (please read guidance note		mance of
Th ur					
Fri			Non- standard timings. Where you premises for the performance of times to those listed in the column	<u>dance at d</u>	ifferent
Sat			list (please read guidance note 6)		
Su n					

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 typ you will be providing	e of enterta	inment
Da y	Start	Finish	Will this entertainment take place indoors or outdoors or	Indoors	
Mo n		1000	both – please tick (please read guidance note 3)	Outdoor s	
				Both	
Tu e		i i	Please give further details here guidance note 4)	(please read	1
We d	16				
Th ur			State any seasonal variations for similar description to that falling (please read guidance note 5)	or entertain g within (e)	ment of a (f) or (g)
Fri					
Sat	# \$-2	/	Non-standard timings. Where y premises for the entertainment description to that falling within different times to those listed in	of a similar (e), (f) or (g) at
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	/	/	1		+ '
	night refro		Will the provision of late night refreshment take place indoors or	Indoors	
timin	gs (please i ance note 7	read	outdoors or both – please tick (please read guidance note 3)	Outdoor	
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e					
We d			State any seasonal variations for late night refreshment (please real		
Th ur					-
Fri	L		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 g		

Şu		-	
n			

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – please tick (please read guidance note 8)	On the premise s Off the premise s
Da y	Start	Finish		Both
Mo n	1200	2100	State any seasonal variations for alcohol (please read guidance note	the supply of 5)
Tu e	1200	2200		
We d	1200	2200		
Th ur	1200	2200	Non- standard timings. Where yo premises for the supply of alcoho to those listed in the column on t	ol at different times
Fri	1200	2300	(please read guidance note 6)	
Sat	1200	2300		
Su n	1200	2200		

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 Mathew Morrsion				
Date of birth 19/11/1978				
Address 65 Lyme Farm Road Lee				
Postcode	SE12 8JQ			
Personal licence number (if known) LW000008671				
Issuing licensing London Borough	authority (if known) of Greenwich			

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).

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)		ublic and read	State any seasonal variations (please read guidance note 5)
Da y	Start	Finish	
Mo n	1200	2115	
Tu e	1200	2215	
We d	1200	2215	Non-standard timings. Where you intend the premises to be open to the public at different times
Th ur	1200	2215	from those listed in the column on the left, please list (please read guidance note 6)
Fri	1200	2315	
Sat	1200	2315	
Su n	1200	2200	

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)

Operating Schedule providing the hours of operation and licensable activities during those hours. - Designated premises supervisor confirmed it is obligated to be in day-to-day control of the premises, to provide good training for staff on the Licensing Act (Training Record), to make or authorize each sale. Clear "Challenge 25" information to prevent the supply of alcohol to under-age drinkers. CCTV system installed with recording option available. Roller metal exterior window shutter will be fixed to ensure that shop front is safe and secure at all times.

b) The prevention of crime and disorder

CCTV System installed to monitor entrances, exits, and other parts of the premises in order to address the prevention of crime objective. A clear and legible notice outside the premises indicating the normal hours under the terms of the premises licence during which licensable activities are permitted. Clear and conspicuous notices warning of potential criminal activity, such as theft, that may target customers will be displayed. Not selling of alcohol to drunk or intoxicated customers. Custom will not be sought by means of personal solicitation outside or in the vicinity of the premises. Prevention and vigilance in illegal drug use at the retail unit area. Staff will be well trained in asking customers to use premises in an orderly and respectful manner.

c) Public safety

Internal and external lighting fixed to promote the public safety objective. Well trained staff adherence to environmental health requirements. Training and implementation of underage ID checks. A log book or recording system shall be kept upon the premises in which shall be entered particulars of inspections made; those required to be made by statute, and information compiled to comply with any public safety condition attached to the premises licence that requires the recording of such information. The log book shall be kept available for inspection when required by persons authorised by the Licensing Act 2003 or associated legislation. All parts of the premises and all fittings and apparatus therein, door fastenings and notices, lighting, heating, electrical, air condition, sanitary accommodation and other installations, will be maintained at all times in good order and in a safe condition.

d) The prevention of public nuisance

Noise reduction measures to address the public nuisance objective. Prominent, clear and legible notices will be displayed at the exit requesting the public to respect the needs of nearby residents and to leave the premises and the area quietly. Deliveries of goods necessary for the operation of the business will be carried out respectable times as to prevent nuisance and disturbance to nearby residents. The Licensee will ensure that staff who arrive early morning or depart late at night (ex. for unpacking, pricing newly delivered goods) when the business has ceased trading conduct themselves in such a manner to avoid causing disturbance to nearby residents. Customers will be asked not to stand around loudly talking in the street outside the premises. Customers will not be admitted to premises above opening hours. There will be no movement of bins or rubbish outside the premises in the evening. This will help to reduce the levels of noise produced by the premises. Any lighting on or outside the premises will be positioned and screened in such a way so as to not cause a disturbance to nearby residents. Adequate waste receptacles for use by customers will be provided in the local vicinity.

e) The protection of children from harm

"Challenge 25" sign which is a retailing strategy that encourages anyone who is over 18 but looks under 25 to carry acceptable ID (a card bearing the PASS hologram, a photographic driving license or a passport) if they wish to buy alcohol. Well trained staff about requirement for persons' identification, age establishment etc. All the details provided in Training Record Book available the retail unit. Log Book will be kept upon the premises all the time.

Checklist:

I have provided a daytime telephone number in order to make payment over the phone by debit or credit card.

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.

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 licesable activity) and I have seen a copy of his or her proof of entitlement to work, if appropriate (please see note 15)
Signature & Print Nam	M. MORRISON
Date	11.12.18
Capacity	LICENSEE
Signature & Print Name	E GE EMMA COLE
Date	12.12-18
Capacity	
Signature & Print Name	
Date	la ⇒e ^r
Capacity	
	e not previously given) and postal address for correspondence application (please read guidance note 14)
Post town	Postco de
Telephone number (i	if any)
Your e-mail address	(Required)

Notes for Guidance - New Premises Licence Applications

 Describe the premises, for example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies, you must include a description of where the place will be and its proximity to the premises.