

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/We [REDACTED]

(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 Margarita Mama, 349 Staines Rd W, London TW15 1RP			
Post town		Postcode	

Telephone number at premises (if any)	
Non-domestic rateable value of premises	£15750

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 | YES |
| 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) |
| ga) | 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; - YES

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)

		Other Title (for example, Rev)	
Surname		First names	
Date of birth		I am 18 years old or over	
Nationality			
Current residential address if different from premises address			
Post town		Postcode	
Daytime contact telephone number		01277415799	
E-mail address (optional)	INFO@ABSOLUTELICENCESOLUTIONS.COM		
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)			

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surname			First names		
Date of birth		I am 18 years old or over		Please tick yes	
Nationality					
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)					
Current residential 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.)
Private limited Company
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
a	s	a
p		

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) LATE NIGHT REFRESHMENT ONLY. The premises is a fast food takeaway which primarily is delivery based. Following contact with the authority the operator has engaged us an agency to manage their application. During conversation we have identified that in order to uphold the licensing objectives, the premises will benefit from conditions restricting the use of the premises to a delivery only model from 23:00 with access only being from the rear entrance.
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If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

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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) - Yes

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	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
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 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)	Indoors	
				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 Standard days and timings (please read guidance note 7)			<u>Please give further details</u> (please read guidance note 4)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 5)
Wed			
Thur			<u>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</u> (please read guidance note 6)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments 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)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
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 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)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
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 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)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 4)		
Mon					
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	
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 dance</u> (please read guidance note 5)		
Thur					
Fri			<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)		
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					

I

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 (Delivery Only)	x
				Both	
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon	23:00	05:00			
Tue	23:00	05:00			
Wed	23:00	05:00	State any seasonal variations for the provision of late night refreshment (please read guidance note 5)		
Thur	23:00	05:00			
Fri	23:00	05:00			
Sat	23:00	05:00	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)		
Sun	23:00	05:00			

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					
Tue					
Wed					
Thur					
Fri					
Sat					
Sun			<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)		

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	
Date of birth	
Address	
Postcode	
Personal licence number (if known)	
Issuing licensing authority (if known)	

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).

N/A

Hours premises are open to the public Standard days and timings (please read guidance note 7)			<u>State any seasonal variations</u> (please read guidance note 5)
Day	Start	Finish	
Mon	12:00	23:00	
Tue	12:00	23:00	
Wed	12:00	23:00	
Thur	12:00	23:00	
Fri	12:00	23:00	
Sat	12:00	23:00	
Sun	12:00	23:00	
<u>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</u> (please read guidance note 6)			

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)

CCTV, STAFF TRAINING, INCIDENT LOG

The applicant proposes conditions relating to deliveries to mitigate risk of public nuisance.

Should R.A.s have any specific conditions that are desirable then the applicant is happy to consider them.

b) The prevention of crime and disorder

CCTV:

a) A CCTV system shall be installed in the premises and shall be maintained in good working order and fully operational, recording at all times that the premises is open to members of the public. It shall monitor all internal areas of the premises to which the public have access, excluding toilets, and the area immediately outside the premises.

b) Recordings shall be kept for 31 days in a secure environment, with date and time stamping, and shall be made available immediately to the Police or Officers of the Council upon request and shall be capable of identification and of evidential quality in any light conditions.

c) Staff working at the premises shall be trained in the use of the equipment and at least one member of staff, so trained, shall be present during permitted hours who can download CCTV if requested by a police officer or authorised officer from the Council and a log will be kept to verify this.

d) Cameras on the entrance must capture full frame shots of the heads and shoulders of ALL people entering the premises, capable of identification and of evidential quality in any light conditions.

e) There shall be signs displayed in the customer area to advise that CCTV is operating

f) The CCTV system shall be checked once a week to ensure that it is working / recording and a record of these checks shall be entered in the Incident Book and shall be made available to the police and Officers of the Council upon request.

g) Should the CCTV become non-functional this shall be reported immediately to the Licensing Authority.

c) Public safety

The premises licence holder shall ensure that either a written or electronic, record of incidents, in which full details of all incidents are noted, shall be kept. This shall be completed as soon as possible, on the day of the incident, and in any case no later than the close of business, on that day. The time and date when the report was completed, and by whom, is to form part of the entry. The written or electronic record shall be kept on the premises for a period of 12 months from the date of the last entry and shall be produced to an authorised officer of the Licensing Authority or the Police upon request. The following shall be recorded:-

- a) all crimes reported to the venue
- (b) all ejections of patrons
- (c) any complaints received
- (d) any incidents of disorder
- (e) any faults in the CCTV repaired within 24hrs
- (f) any visit by a relevant authority or emergency service.
- (g) any lost property found or handed to staff at the premises.
- (h) any other relevant incidents to be recorded.

d) The prevention of public nuisance

Clear signage shall be displayed requesting customers leave quietly and respect local residents.

Doors and windows shall remain closed after 23:00 hrs, except for entry/exit.

No outdoor music, PA systems or amplified sound shall be permitted at any time.

Waste disposal shall not occur between 22:00 hrs and 07:00 hrs.

The premises shall operate as a delivery only operation during licensable hours.

Deliveries shall be fulfilled via the rear entrance with the premises not appearing from the front to be open for business.

Deliveries:

- a) Delivery drivers shall be given clear instructions to use their vehicles in a responsible manner so as not to cause a nuisance to any residents or generally outside the license premises; not to leave engines running when the vehicles are parked; and not to obstruct the highway.
- b) When conducting deliveries, drivers shall have access to the premises to avoid loitering outside.
- c) Drivers shall not idle whether near any residential properties or not. If no deliveries are pending, then drivers shall either park and wait inside the premises or leave the area.
- d) Drivers shall be trained not to await orders whilst sitting in, or standing near, any vehicles or modes of transport they intend to use. If a driver is using a bicycle, then they shall dismount and await any orders inside the premises with the premises remaining closed to the public.
- e) Delivery staff shall have access to the premises in order to prevent congregation outside the premises, staff shall also have access to any toilet facilities at the premises.

e) The protection of children from harm

A minimum of 2 members of staff shall be on duty at the premises after 2300 hours Monday-Sunday.

Checklist:**Please tick to indicate agreement**

- I have made or enclosed payment of the fee. – y
- I have enclosed the plan of the premises. – y
- I have sent copies of this application and the plan to responsible authorities and others where applicable. – y
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable. – y
- I understand that I must now advertise my application. – y
- I understand that if I do not comply with the above requirements my application will be rejected. – y
- [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 or my share code issued by the Home Office online right to work checking service (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
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	her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)
Signature	
Date	07/09/2026
Capacity	Authorised Agent

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)			
ABSOLUTE LICENCE SOLUTIONS LTD, 1 Western Avenue			
Post town	BRENTWOOD	Postcode	CM14 4XR
Telephone number (if any)	01277415799		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) INFO@ABSOLUTELICENCESOLUTIONS.COM			