

A place to come the part of the Scholar

Harrow **Application for a Temporary Event Notice** Licensing Act 2003

For help contact

licensing@harrow.gov.uk Telephone: 020 8901 2600

		* required information
Section 1 of 8		
You can save the form at any t	ime and resume it later. You do not need to	be logged in when you resume.
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference	23/08/2013	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
Are you an agent acting on be	half of the applicant?	Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.
Applicant Details		
* First name	Ramesh	
* Family name	Bhimji	
* E-mail		
Main telephone number		Include country code.
Other telephone number		
☐ Indicate here if you wou	rld prefer not to be contacted by telephone	
Are you:		
Applying as a business of	or organisation, including as a sole trader	A sole trader is a business owned by one person without any special legal structure.
 Applying as an individu 	ał	Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.
Applicant Business		
* Is your business registered in the UK with Companies House?	♠ Yes	
* Registration number	07332763	
* Business name	Star Spice Ltd	If your business is registered, use its registered name.
* VAT number _	998253265	Put "none" if you are not registered for VAT.
* Legal status	Partnership	

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* Your position in the business	Director	
Home country	United Kingdom	The country where the headquarters of your business is located.
Registered Address		Address registered with Companies House.
* Building number or name	32	
* Street	Railway Approach	
District		
* City or town	Harrow	
County or administrative area		
* Postcode	HA3 5AA	
* Country	United Kingdom	
Section 2 of 8		
APPLICATION DETAILS (See a	also guidance on completing the form, gene	ral notes and note 1)
Have you had any previous or		
← Yes	€ No	Applicant must be 19 years of ago or older
* Your date of birth		Applicant must be 18 years of age or older
·	dd mm yyyy	Applicant must be 18 years of age or older This box need not be completed if you are an individual not liable to pay UK national insurance.
* Your date of birth		This box need not be completed if you are an individual not liable to pay UK national
* Your date of birth National Insurance number Place of birth Correspondence Address		This box need not be completed if you are an individual not liable to pay UK national
* Your date of birth National Insurance number Place of birth Correspondence Address Is the address the same as (or s	dd mm yyyy imilar to) the address given in section one?	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely
* Your date of birth National Insurance number Place of birth Correspondence Address Is the address the same as (or same as the same as	dd mm yyyy imilar to) the address given in section one?	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely
* Your date of birth National Insurance number Place of birth Correspondence Address Is the address the same as (or some address) (Yes Building number or name	dd mm yyyy imilar to) the address given in section one?	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely
* Your date of birth National Insurance number Place of birth Correspondence Address Is the address the same as (or some address) (Yes Building number or name	dd mm yyyy imilar to) the address given in section one?	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely
*Your date of birth National Insurance number Place of birth Correspondence Address Is the address the same as (or some address) (Yes) Building number or name Street District	dd mm yyyy imilar to) the address given in section one?	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely
*Your date of birth National Insurance number Place of birth Correspondence Address Is the address the same as (or some same shoulding number or name) Street District City or town	dd mm yyyy imilar to) the address given in section one?	This box need not be completed if you are an individual not liable to pay UK national insurance. If "Yes" is selected you can re-use the details from section one, or amend them as required. Select "No" to enter a completely

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Additional Contact Details		
Are the contact details the sam	ne as (or similar to) those given in section one?	•
← Yes	○ No	from section one, or amend them as required. Select "No" to enter a completely new set of details.
E-mail		
Telephone number		
Other telephone number		
Section 3 of 8		
THE PREMISES		
activity at the premises described Give the address of the premis description (including the Order	es where you intend to carry on the licensable anance Survey references). (See also guidance o	activities or if it has no address give a detailed
* Does the premises have an a	ddress?	
Yes	C No	
Address Is the address the same as (or s	similar to) the address given in section one?	If "Yes" is selected you can re-use the details from section one, or amend them as
€ Yes	C No	required. Select "No" to enter a completely new set of details.
* Building number or name	32	
* Street	Railway Approach	
District		
* City or town	Harrow	
County or administrative area		
* Postcode	HA3 5AA	
* Country	United Kingdom	
* Does a premises licence or cl to the premises (or any part of	ub premises certificate have effect in relation the premises)?	
← Neither	es licence C Club premises certificate	
* Premises licence number	LN/000003641/2011/2	
Location Details		
* Provide further details about	the location of the event	
Within the restaurant premise	S	

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If you intend to use only part of the premises at this address or intend to r description and details below (see also guidance on completing the form	
Describe the nature of the premises below (see also guidance on complet	ting the form, note 4)
Restaurant	
Describe the nature of the event below (see also guidance on completing	the form, note 5)
Carnival Warm Up Party. We require entertainment license to be extended entry to the venue is 02:00 I acknowledge that all other conditions of my	T T
Section 4 of 8	
LICENSABLE ACTIVITIES	<u> De Marie Barres de la Marie de la companya de la</u>
State the licensable activities that you intend to carry on at the premises	
(see also guidance on completing the form, note 6):	
☐ The sale by retail of alcohol	
The supply of alcohol by or on behalf of a club to, or to the order of, member of the club	a
∑ The provision of regulated entertainment	
☐ The giving of a late temporary event notice	(see also guidance on completing the form, note 7)
Event Dates	VIII. 1
There must be a period of at least 10 days between the date you submit to you will be using these premises for licensable activities.	his form and the date of the earliest event when
When are you going to submit 01 / 08 / 2013 this form? dd mm yyyy	
State the dates on which you intend to use these premises for licensable activities (see also guidance on completing the form, notes 7 and 14)	The maximum period for using premises for licensable activities under the authority of a temporary event notice is 96 hours (four days).
Add another date	· .

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State the times during the event period that you propose to carry on licensable activities (give times in 24 hour clock) (see also guidance on completing the form, note 9)		
State the maximum number of people at any one time that you intend to allow to be present at the premises during the times when you intend to carry on licensable activities, including any staff, organisers or performers (see also guidance on completing the form, note 10)	200	Note that the maximum number of people cannot exceed 499.
supplies will be for consumpti (see also guidance on complet	nclude the supply of alcohol, state whether the on on or off the premises, or both ting the form, note 11):	
 On the premises only 		
← Off the premises only		
← Both		
Section 5 of 8		
PERSONAL LICENCE HOLDER	S (See also guidance on completing the form	n, note 12)
Do you currently hold a valid personal licence?		
Provide the details of your per	sonal licence below.	
Issuing licensing authority	Harrow	
Licence number	Harrow-09RB-00AQ-37JP-ERDJ	
Date of issue	dd mm yyyy	
Date of expiry	08 / 09 / 2019 dd mm yyyy	
Any further relevant details		
Section 6 of 8		
PREVIOUS TEMPORARY EVE	NT NOTICES (See also guidance on completin	ig the form, note 13)

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Have you previously given a temporary event notice in respect of any premises for events falling in the same calendar year as the event for which you are now giving this temporary event notice?	•	Yes	C	No				
State the number of temporary event notices you have given for events in that same calendar year	2							
Have you already given a temporary event notice for the same premises in which the event period: a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice?	C	Yes	િ	No				
Section 7 of 8								
ASSOCIATES AND BUSINESS	COLI	EAGILEC /		• .1	on completin	a the form.	note 14)	
		EAGUES 1	see aiso gu	<u>idance</u>		3	HOLE 17)	
Has any associate of yours given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice?	C	Yes	eee aiso gu				11000	
Has any associate of yours given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event	C			No			11000 1-7)	

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Has any person with whom			
you are in business carrying			
on licensable activities			
already given a temporary			
event notice for the same			
premises in which the event	C Yes	No	
period: a) Ends 24 hours or less			
before; or			
b) Begins 24 hours or less			
after the event period			
proposed in this notice?			
Section 8 of 8			
CONDITION	a giralina da da	<u> </u>	
			able activities described in Section 4 above
include the supply of alcohol ti		made by or under the	authority of the premises user.
(See also guidance on complet	ing the form, note (6)		to the water
PAYMENT DETAILS			
This fee must be paid to the au	thority. If you complete	the application online	, you must pay it by debit or credit card.
This formality requires a fixed f	ee of £21		
ATTACHMENTS			
AUTHORITY POSTAL ADDRES	S		
Address			
Duilding number of process			٦
Building number or name			_
Street			7
District			
			 7
City or town		,]
County or administrative area			7
country or administrative area		,	
Postcode			
Country	United Kingdom		
DECLARATION			
* The information contained in	this form is correct to t	he best of my knowled	ge and belief
		,,	3
I understand that it is an offer	nce:		
i) to knowingly or recklessly ı liable on conviction for such a			temporary event notice and that a person is rd scale; and
			e and that a person is liable on conviction for term not exceeding six months, or to both
☐ Ticking this box indicate	es you have read and u	nderstood the above d	eclaration

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This section should be con behalf of the applicant?"	npleted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
* Full name	
* Capacity	
Date (dd/mm/yyyy)	
	Add another signatory
2. Go back to https://www continue with your applica	omputer by clicking to file/save as .gov.uk/apply-for-a-licence/temporary-event-notice/harrow/apply-1 to upload this file and

where s_{i+1} , which is the specific and s_{i} . We say that