

- 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:

Please tick yes

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 <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over <input type="checkbox"/>				Please tick yes	
Current postal address if different from premises address					
Post town			Postcode		
Daytime contact telephone number					
E-mail address (optional)					

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
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 M & G Alliances Ltd
Address Acorn House, 33 Churchfield Road, London, W3 6AY
Registered number (where applicable) 11217247
Description of applicant (for example, partnership, company, unincorporated association etc.) 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
2	9	032021

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

DD	MM	YYYY

Stanmore Place Food Market will be a convenience and grocery store in the Stanmore Place residential and commercial complex (on Howard Road - Off Honeyport Lane) with target to commence trading in April 2021. The store will provide a local and convenient mini-market proposition to the residents of Stanmore Place, as well as the staff based in the small businesses that operate from the commercial development in the complex. The business will also create full-time and part-time employment in the local community.

The grocery store will be an artisan store specialising in premium British and ethnic food, groceries and produce, as well as a range of day-to-day essentials.

The store also plans to sell a range of alcohol products; such as wines, beers and spirits. The majority of the alcohol range will be displayed away from the main entrance and positioned at the far-end of the shop by the till area. A small selection of beers and wines will be merchandised in a fridge.

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 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick any 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 6)			<u>Will the performance of a play take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon			<u>Please give further details here</u> (please read guidance note 3)		
Tue					
Wed			<u>State any seasonal variations for performing plays</u> (please read guidance note 4)		
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 5)		
Sat					
Sun					

B

Films Standard days and timings (please read guidance note 6)			<u>Will the exhibition of films take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue					
Wed					
			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 4)		
Thur			<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 5)		
Fri					
Sat					
Sun					

C

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Tue			
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 5)
Fri			
Sat			
Sun			

D

Boxing or wrestling entertainments Standard days and timings (please read guidance note 6)			<u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)		
Mon					
Tue					
Wed			<u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 4)		
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 5)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 6)			<u>Will the performance of live music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)					
Mon								
Tue								
Wed						<u>State any seasonal variations for the performance of live music</u> (please read guidance note 4)		
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 5)		
Sat								
Sun								

F

Recorded music Standard days and timings (please read guidance note 6)			<u>Will the playing of recorded music take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)					
Mon								
Tue								
Wed						<u>State any seasonal variations for the playing of recorded music</u> (please read guidance note 4)		
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 5)		
Sat								
Sun								

G

Performances of dance Standard days and timings (please read guidance note 6)			<u>Will the performance of dance take place indoors or outdoors or both – please tick</u> (please read guidance note 2)	Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)					
Mon								
Tue								
Wed						<u>State any seasonal variations for the performance of dance</u> (please read guidance note 4)		
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 5)		
Sat								
Sun								

H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			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 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<u>Please give further details here</u> (please read guidance note 3)		
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 4)		
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 5)		
Sun					

I

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Day	Start	Finish	<u>Please give further details here</u> (please read guidance note 3)					
Mon								
Tue								
Wed						<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 4)		
Thur								
Fri						<u>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</u> (please read guidance note 5)		
Sat								
Sun								

J

Supply of alcohol Standard days and timings (please read guidance note 6)			Will the supply of alcohol be for consumption – please tick (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	State any seasonal variations for the supply of alcohol (please read guidance note 4)		
Mon	07:00	22:00			
Tue	07:00	22:00			
Wed	07:00	22:00			
Thur	07:00	22:00			
Fri	07:00	23:00			
Sat	07:00	23:00			
Sun	07:00	22:00	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 (please read guidance note 5)		

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor:

Name Shilan Ganatra	
Address [REDACTED]	
Postcode	WD24 5DB
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 8).

N/A

L

Hours premises are open to the public Standard days and timings (please read guidance note 6)			<u>State any seasonal variations</u> (please read guidance note 4) N/A
Day	Start	Finish	<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 5) N/A
Mon	07:00	22:00	
Tue	07:00	22:00	
Wed	07:00	22:00	
Thur	07:00	22:00	
Fri	07:00	23:00	
Sat	07:00	23:00	
Sun	07:00	22:00	

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 9)

Careful consideration has been given to the processes required to ensure compliance to the four licensing objectives. These rigorous steps are detailed below and we feel confident we will ensure compliance and good practice will be followed.

1. We will take alcohol abuse and under-age drinking very seriously and will ensure we do not sell alcohol to anyone underaged and check for the correct form of photographic ID.
2. We will ensure the alcohol purchased by an adult isn't then passed onto anyone outside under legal drinking age
3. We will train our delivery person(s) to make sure they check the correct form of ID when delivering (if the customer looks under 25) and to refuse the sale if the customer is already drunk
4. A high spec CCTV system with 12 x 12 megapixel cameras will be installed to monitor shopper and staff behaviour and deter any abuse of licencing laws
5. A first-aid kit will be made available in the store
6. The store will be fitted with a fire alarm system and staff will be advised of the location of the designated smoking area
7. The short opening hours in comparison to off-licences reduces the potential of alcohol related issues in the community
8. Stanmore Place benefits from a licensed SIA security guard on site 24 hours a day
9. Alcohol will be stocked at the back-end of the store near the till area which is away from the main door making theft very difficult. A small selection of beers and wines will be displayed in a fridge which is also positioned away from the main door
10. By hiring staff from the local community, we aim to get to know the local residents and this should help with asking customers to not gather and drink outside the store or in public areas

b) The prevention of crime and disorder

The development has no history of crime or disorder, and therefore is a low-risk area. However, as it is a residential location, we have invested in a number of steps to further prevent crime and disorder.

1. We will install 12 clearly visible CCTV 12-megapixel cameras which cover the whole unit as well as the entrance/exit to deter theft. We are also fitting in shutters and a burglar alarm for when the store is closed to deter break-ins.
2. The store will be well lit to ensure clear visibility and deter thefts and break-ins
3. Stanmore Place benefits from a security guard on the development who walks around 24 hours a day (SIA licensed). These costs are part of our service charge paid to the development
4. We have kept the alcohol by the till area which will be away from the main entrance to make it difficult for anyone to steal items. A small selection of beers and wines will be displayed in a fridge which is also positioned away from the main door
5. All staff will be trained on how to handle any confrontations or instances of verbal abuse.
6. We will not serve to anyone who is already under, or suspected for being under the influence of alcohol
7. Checks for correct forms of photographic ID (for e.g. drivers licence or passport) will be conducted on anyone suspected of not being of legal age to buy alcohol.
8. When delivering alcohol to consumers, we will ensure the staff / delivery driver does not give alcohol order to anyone who may be drunk or under age. If they are not sure about the age, we will instruct the delivery person to check for the correct photographic ID.

c) Public safety

1. We will have a first-aid kit in the store should anyone unfortunately get injured
2. We will train all of our staff on health and safety and make sure no boxes/cases are left in harm's way; either inside or outside the store.
3. The development has a dedicated smoking area. All staff will be trained to go to this location and wash their hands thoroughly when returning.
4. We will be investing and installing a fire alarm system
5. If we ever carry out any internal work/repairs, we will ensure this is undertaken by qualified people and correctly signed to ensure the area is safe. We will ensure our delivery person(s) do not smoke whilst delivering and dispose any packaging (if there is any) correctly.

d) The prevention of public nuisance

1. Should any group of people start to hang around outside the shop making noise, we will correctly ask them to move away and avoid any confrontation with them. If they do not listen, we can speak to the on-site security guard who is a SIA Licence holder for assistance.
2. We will also ask the consumers to not open the alcoholic beverage until they are at home to avoid littering and noise.
3. We will train our delivery person(s) to refuse them the alcohol if they are already drunk and to bring the item back to the store.
4. We will also train our delivery person(s) to ensure that they only deliver to a valid home address and do not deliver any alcohol to anyone who for e.g. is waiting down the road from their house.

e) The protection of children from harm

1. Full training will be provided to staff to ensure they know it is illegal to serve alcohol to anyone under the age of 18. We will have a 'challenge 25' sticker in the shop to help prevent this and if a customer is asked for ID, they shouldn't feel offended.
2. We will train our staff to know what forms of ID to accept (photographic drivers' licence / passport).
3. We will also be vigilant where if an underaged person is asking for alcohol, he / she cannot ask a person walking by who is of the correct age as this is still illegal.
4. We will train our delivery person if they think that the customer looks younger than 25, they can have the right to ask for the correct form of ID. If they fail to provide a form of correct ID, we will refuse the sale of alcohol to them.

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.

IT IS AN OFFENCE, LIABLE ON SUMMARY CONVICTION TO A FINE NOT EXCEEDING LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION.

Part 4 – Signatures (please read guidance note 10)

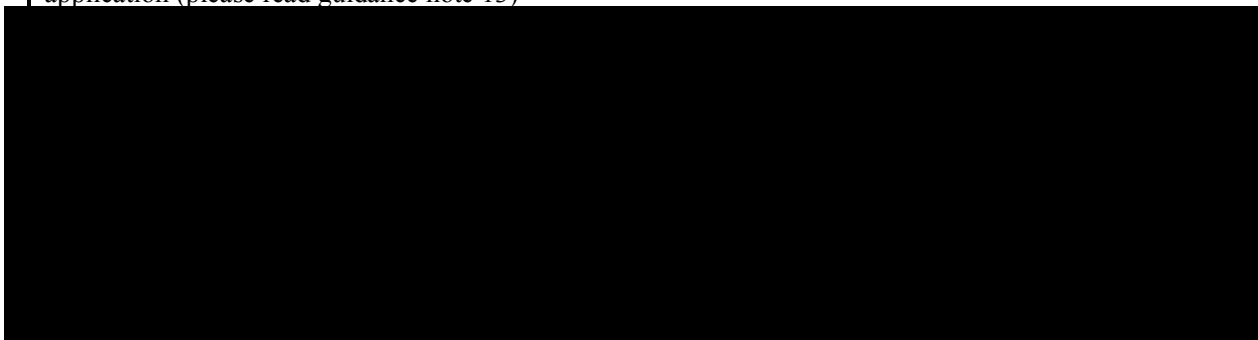
Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 11).
If signing on behalf of the applicant, please state in what capacity.

Signature	S Ganatra
Date	01/03/2021
Capacity	Director

For joint applications, signature of 2nd applicant or 2nd applicant’s solicitor or other authorised agent (please read guidance note 12). **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 13)



Notes for Guidance

1. 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.
2. Where taking place in a building or other structure please tick as appropriate (indoors may include a tent).
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.

5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises, please tick 'on the premises'. If you wish people to be able to purchase alcohol to consume away from the premises, please tick 'off the premises'. If you wish people to be able to do both, please tick 'both'.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups or the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, each of the applicant or their respective agent must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

and any premises licence to be granted or varied in respect of this application made by

M & G Alliances Ltd

[name of applicant]

concerning the supply of alcohol at

Retail Unit 5, Stanmore Business & Innovation Centre, Howard Road, Stanmore,
HA7 1FW

[name and address of premises to which application relates]

I also confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number

In Process

[insert personal licence number, if any]

Personal licence issuing authority

In Process

[insert name and address and telephone number of personal licence issuing authority, if any]

Signed



Name (please print)

SHILAN GANATRA

Date

02/03/2021