

**New Premises Licence**

**Premises Details**

Premises Address *	17 Casson Square Unit 2D & 2E London SE1 7BQ
Telephone number at premises (if any)	
Non-domestic value of premises. *	

**Applicant Details**

I/We 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.

Please state whether you are applying for a premises licence as:	a person other than an individual -as a limited company/ limited liability partnership
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**Applicant Details**

If you are applying as a person described in one of the above please confirm: *	I am making the application pursuant to a statutory function; or
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**Other Applicant (Non Individual)**

Name *	COFFEE & JAM (WATERLOO) LTD
Registered Address *	First Floor Office, 34 Great Queen Street, London
Town/City *	LONDON

## Other Applicant (Non Individual)

County

Postcode \*

Registered Number (where applicable)

Description of applicant (for example partnership, company, unincorporated association, etc) \*

Telephone Number

Email \*

WC2B 5AA

11950396

PRIVATE LIMITED COMPANY

## Operating Schedule

When do you want the premises licence to start? \*

01/03/2023

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

Please give a general description of the premises. \*

THE PREMISES IS PROPOSED TO BE CAFE BISTRO WITH SALES OF ALCOHOL INSIDE AND OUTSIDE THE PREMISES WITHIN THE DESIGNATED AREAS.

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

## Operating Schedule

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 read guidance note 2) \*

☐

Plays

☐

Films

☐

Indoor Sporting Events

Operating Schedule

- ☐ Boxing or Wrestling
- ☐ Live Music
- ☐ Recorded Music
- ☐ Performances of Dance
- ☐ Anything of a similar description falling under Music or Dance
- ☐ Provision of late night refreshment
- ☒ Supply of Alcohol

Supply of Alcohol Standard Times

Standard days and timings, where you intend to use the premises for the supply of alcohol. (please read guidance note 7)\*  
Please enter times in 24hr format (HH:MM)

Day \*

Monday to Wednesday

10:00

22:30

Supply of Alcohol Standard Times

Standard days and timings, where you intend to use the premises for the supply of alcohol. (please read guidance note 7)\*  
Please enter times in 24hr format (HH:MM)

Day \*

Thursday

10:00

23:30

## Supply of Alcohol Standard Times

Standard days and timings, where you intend to use the premises for the supply of alcohol. (please read guidance note 7)\*  
Please enter times in 24hr format (HH:MM)

Day \*

Friday to Saturday

10:00

23:30

## Supply of Alcohol Standard Times

Standard days and timings, where you intend to use the premises for the supply of alcohol. (please read guidance note 7)\*  
Please enter times in 24hr format (HH:MM)

Day \*

Sunday

10:30

21:30

## Supply of Alcohol

Will the supply of alcohol be for consumption on premises or off premises or both? (please read guidance note 8) \*

Both

State any seasonal variations for the supply of alcohol. (please read guidance note 5)

N/A

Please state any non-standard timings, where you intend to use the premises for the supply of alcohol at different times from the Standard days and times listed?(please read guidance note 6)

N/A

## Designated Premises Supervisor

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)

Title \*

Mr

First name \*

METIN

Surname \*

MATRACI

Designated Premises Supervisor

Street address \*

Town/City \*

County

Postcode \*

Personal Licence Number (if known)

Issuing Licensing Authority (if known)

Adult Entertainment

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

Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 7) \* Please enter times in 24hr format (HH:MM)

Day \*

Monday to Wednesday

06:30

23:00

Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 7) \* Please enter times in 24hr format (HH:MM)

Day \*

Thursday

Opening Hours Standard Times

06:30

00:00

Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 7) \* Please enter times in 24hr format (HH:MM)

Day \*

Friday to Saturday

06:30

00:00

Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 7) \* Please enter times in 24hr format (HH:MM)

Day \*

Sunday

10:00

22:00

Opening Hours

State any seasonal variations. (please read guidance note 5)

N/A

Please state any Non-standard timings, where you intend the premises to be open to the public at different times from the Standard days and times listed? (please read guidance note 6)

N/A

Licensing Objectives

Describe any additional steps you intend to take to promote the four licensing objectives as a result of the proposed variation:

## Licensing Objectives

a) General - all four licensing objectives (b, c, d and e)  
(please read guidance note 10)

The alcohol would only be for sale in operation hours and the alcohol will be consumed within the designated area within the permitted hours. CCTV will be installed to the premises: installed CCTV system will meet the standard in " UK Police Requirements for Digital CCTV system" Emergency lighting will be provided. Smoke detectors will be installed. The premises operates the "challenge 25" the proof of age scheme. The premises will be open and shut at its permitted hours.

b) The prevention of crime and disorder

CCTV will be installed to the premises for safety and crime prevention.No alcohols to be served who are already drunk.The DPS will undertake routine monitoring of the refusals records.All staff make sale of alcohol receives regular training.Installed CCTV system meet the standard in 'uk police requirements shall operate & records video images at all times that premises is open to the public & any recordings made will be retained for not less than 31 days and made available to police.

c) Public safety

Emergency light will be installed and fire extinguisher will be installed. the fire exit is free of any impediment or obstacle at all times of the operating hours.

d) The prevention of public nuisance

Premises will not allow any alcohol at outside the designated areas. All occasions when person have been refused service will be recorded in a refusal book, which shall kept at the premises for not less than 12 months. Deliveries to the premises shall only made during normal working hours. Bottles and similar goods shall not be handled outside the premises in the late evening, night or early morning. Bins shall not be emptied outside the premises in the late evening, night or early morning.

e) The protection of children from harm

Premises will be very strict to not sell alcohol to children and under age.Any alcohol must be sold by DPS or a person authorized by the DPS at all times.Records of training will be kept and made available for examining relevant authorities.A person appears to be under age of 25, identification in the form passport, photo driving licence or a proof of age card bearing the pass holograms will be sought and if not provided service of alcohol will be refused. Challenge 25 signage will be displayed

## Declarations

Declaration Type \*

Sole Applicant - Individual or Other

## Declarations

## Declarations

I have uploaded a copy of the plan of the premises. I have uploaded a copy of the consent form completed by the individual I wish to be designated premises supervisor, if applicable. I understand 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 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.

Signature/Declaration of applicant or applicant's solicitor or other duly authorised agent (see Guidance Note 11 & 12). If signing/applying on behalf of the applicant, please state your name and in what capacity you are authorised to sign/apply. When submitting an on-line application form the 'Declaration made' checkbox must be selected.



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).

Full Name \*

Hasan ICOZ

Date \*

17/01/2023

Capacity \*

Authorised Agent



Declaration made

Do you wish to provide alternative correspondence details? \*

Yes

## Alternative Correspondence

Please provide Contact Name and postal address for correspondence associated with this application.

Title

Mr

First name

Hasan



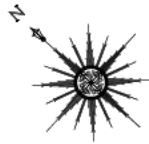
Alternative Correspondence

Surname	ICOZ
Street address *	<div></div> <div></div> <div></div>
Town/City *	<div></div>
County	
Postcode *	<div></div>
Telephone Number	<div></div>
Email *	<div></div>

Email confirmation

On submission an email confirmation will be sent using the details below

Forename	Hasan
Surname /Company Name	ICOZ
Email *	<div></div>
Telephone	<div></div>



# THE BLACK PENNY

[HD]	HEAT DETECTOR
[SD]	SMOKE DETECTOR
[FA]	FIRE ALARM
[EL]	EMERGENCY LIGHTING
[⊕]	EXTRACTOR
[CO <sub>2</sub> ]	FIRE EXTINGUISHER
[H <sub>2</sub> O]	FIRE EXTINGUISHER WATER
[S22]	INTERNALLY ILLUMINATED FIRE ESCAPE SIGN (BS 5266)
[CCTV]	CCTV OPERATING SYSTEM
[X]	FIRE BLANKET
[Red Outline]	AMBIT OF PREMISES

**SITE ADDRESS**  
BLACK PENNY  
Retail Unit 2D & 2E  
17 Casson Square,  
London  
SE1 7BQ

## PROJECT DESCRIPTION

PREMISES LICENCE  
APPLICATION

## DRAWING

### FLOOR PLANS

## DRAWING SCALE

1:100  
A3 PAPER SIZE PORTRAIT

**DRAWING NUMBER**  
23.01.01 REV

## DRAWING STATUS

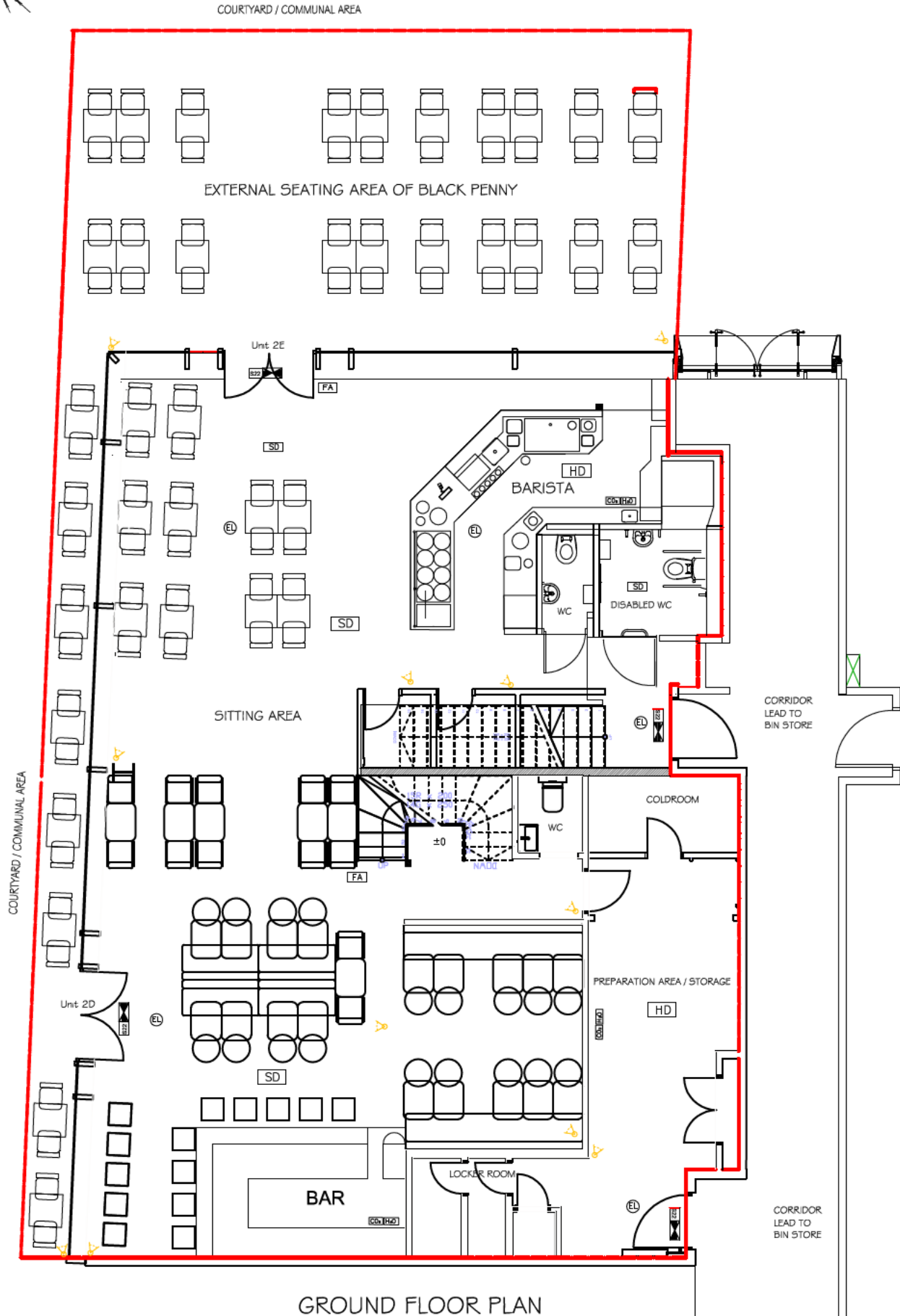
LICENSING APPROVAL

## DATE:

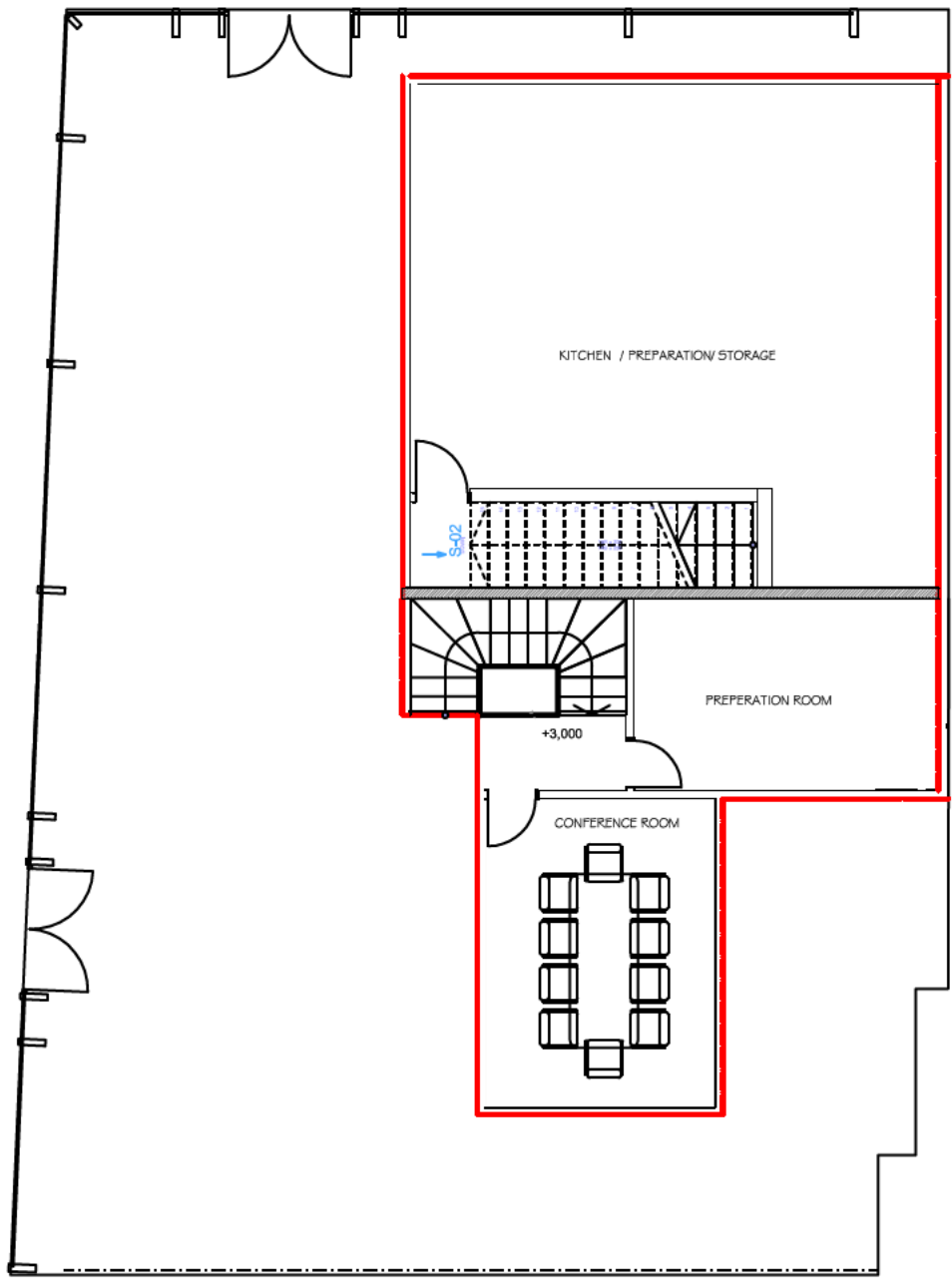
29/04/2019



## NOTES



GROUND FLOOR PLAN



MEZANINE FLOOR PLAN

SCALE 1:100 0 0.5m 1 1.5 2 2.5 3 3.5 4 4.5 5