Lambeth Council

Lambeth Council, P.O. Box 734, Winchester, S023 5DG

T: 020 7926 1000

E: infoservice@lambeth.gov.uk

Vary a Premises Licence

Review	
Please review the details to below to ensure they are correct before proceeding. If the details shown are not correct, click previous to enter the correct licence number.	
Current Licence number	22/00206/PRMVAR
Current Premises address	The Terrace, Brixton Village, Coldharbour Lane London SW9 8PS
Premises Details	
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Premises Licence Number *	22/00206/PRMVAR
Premises Address *	The Terrace, Brixton Village, Coldharbour Lane London SW9 8PS
Telephone Number at Premises (if any)	
Non-domestic rateable value of premises. *	£ 40000
Type of Premises Licence Holder	
Type of Premises Licence Holder *	Non-Individual(s)
Premises Licence Holder - Non Individual	
Name *	Incipio Group Limited
Street address *	4 O'Meara Street

Premises Licence Holder - Non Individual	
Town/City *	London
County	
Postcode *	SE1 1TE
Registered number (where applicable)	08814874
Description of applicant (for example partnership, company, unincorporated association etc.) *	Limited Company
Email *	
Daytime Contact Telephone Number	
Variation	
Do you want the proposed variation to take effect as soon as possible? *	Yes
Vaniation	
Variation	
Do you want the proposed variation to have effect in relation to the introduction of the late night levy? (Please see Guidance Note 1)*	No
Briefly describe the nature of the proposed variation. (Please see Guidance Note 2) *	To approve a new layout plan which shows a very minor change decreasing the licence area by having a lobby to the staircase centrally. To allow licensable activities on New Years Eve until 0230 with the premises closing at 0300.
If your proposed variation would mean that 5,000 or more people are expected to attend the premises at any one time, please state the number.	
Operating Schedule	
Complete those parts of the Operating Schedule below which v successful.	would be subject to change if this application to vary is

Provision of regulated entertainment (please read guidance note 3) *

Operating Schedule		
	Plays	
✓	Films	
	Indoor Sporting Events	
	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	
Турє	e of Variation - Films	
Please	Please select the type of variation that applies to this activity. Change an existing Activity.	
*		Change an existing Activity
Film Standard Times		
Standard days and timings, where you intend to use the premises for the exhibition of films. (please read guidance note 8) * Please enter times in 24hr format (HH:MM)		
Day *		Every Day
		11:00
		23:30

Film Standard Times	
Films	
Will the exhibition of films take place indoors or outdoors or both? (please read guidance note 4) *	Indoors
Please provide further details. (please read guidance note 5)	
State any seasonal variations for the exhibition of films. (please read guidance note 6)	New Years Eve 11:00 to 02:30
Please state any non-standard timings, where you intend to use the premises for the exhibition of films at different times from the Standard days and times listed? (please read guidance note 7)	
Type of Variation - Live Music	
Please select the type of variation that applies to this activity.	Change an existing Activity
Live Music Standard Times	
Standard days and timings, where you intend to use the premis note 8) * Please enter times in 24hr format (HH:MM)	ses for the performance of live music. (please read guidance
Day *	Every Day
	11:00
	23:30
Live Music	
Will the Performance of Live Music take place indoors or outdoors or both? (please read guidance note 4) *	Indoors
Please provide further details.(please read guidance note 5)	
State any seasonal variations for the Performance of Live Music (please read guidance note 6)	New Years Eve 11:00 until 02:30
Please state any non-standard timings, where you intend to use the premises for the performance of live music at different times from the Standard days and times listed? (please read guidance note 7)	

Type of Variation - Recorded Music	
Please select the type of variation that applies to this activity. *	Change an existing Activity
Recorded Music Standard Times	
Standard days and timings, where you intend to use the premisguidance note 8) * Please enter times in 24hr format (HH:MM)	ses for the performance of recorded music. (please read
Day *	Every Day
	11:00
	23:30
Recorded Music	
Will the playing of recorded music take place indoors or outdoors or both? (please read guidance note 4) *	Indoors
Please provide further details (please read guidance note 5)	
State any seasonal variations for the playing of recorded music (please read guidance note 6)	New Years Eve 11:00 until 02:30
Please state any non-standard timings, where you intend to use the premises for the performance of recorded music at different times from the Standard days and times listed? (please read guidance note 7)	
Type of Variation - Late Night Refreshm	nent
Please select the type of variation that applies to this activity.	Change an existing Activity
Late Night Refreshment Standard Time	s
Standard days and timings, where you intend to use the premiselease enter times in 24hr format (HH:MM)	ses for late night refreshment. (please read guidance note 8) *
Day *	Every Day
	23:00
	23:30

Late Night Refreshment Standard Times	
Late Night Refreshment	
Will the provision of late night refreshment take place indoors or outdoors or both? (please read guidance note 4) *	Both
Please provide further details. (please read guidance note 5)	
State any seasonal variations for the provision of late night refreshment. (please read guidance note 6)	New Years Eve 11:00 until 02:30
Please state any non-standard timings, where you intend to use the premises for late night refreshment at different times from the Standard days and times listed? (please read guidance note 7)	
Type of Variation - Supply of Alcohol	
Please select the type of variation that applies to this activity.	Change an existing Activity
Supply of Alcohol Standard Times	
Standard days and timings, where you intend to use the premise Please enter times in 24hr format (HH:MM)	ses for the supply of alcohol. (please read guidance note 8) *
Day *	Every Day
	11:00
	23:30
Supply of Alcohol	
Will the supply of alcohol be for consumption on premises or off premises or both? (please read guidance note 9) *	On the premises
State any seasonal variations for the supply of alcohol. (please read guidance note 6)	New Years Eve 11:00 until 02:30
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 7)	

Opening Hours Standard Times	
Standard days and timings, where the premises are open to the 24hr format (HH:MM)	e public. (please read guidance note 8) * Please enter times in
Day *	Every Day

11:00

00:00

Opening Hours

State any seasonal variations. (please read guidance note 6)

New Years Eve 11:00 until 03:00

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 7)

Variation

Please identify those conditions currently imposed on the licence which you believe could be removed as a consequence of the proposed variation you are seeking.

None

I agree to return the original premises licence or the relevant part of the original premises licence: *

Yes

Note: This application cannot be processed until the original licence is received or a statement as to why it cannot be returned has been accepted.

Licensing Objectives

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

a) General - all four licensing objectives (b, c, d and e) (please read guidance note 11)

No additional conditions are required to promote the licensing objectives. The premises has operated on New Years Eve with Temporary Events.

b) The prevention of crime and disorder

No additional conditions are required to promote the licensing objectives.

c) Public safety

No additional conditions are required to promote the licensing objectives.

d) The prevention of public nuisance

No additional conditions are required to promote the licensing objectives.

Licensing Objectives		
e) The protection of children from harm	No additional conditions are required to promote the licensing objectives.	
Declarations		
Declaration Type *	Sole Applicant - Individual or Other	
Declarations		
I have made or enclosed payment of the fee or. I have not made or enclosed payment of the fee because this application has been made in relation to the introduction of the late night levy. I have sent copies of this application and the plan to responsible authorities and others where applicable. I understand I must now advertise my application. I understand I must now return the original premises licence, or relevant part of it or have provided an explanation why I will not be able to do this. I understand that if I do not comply with the above requirements my application will be rejected.		
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		
Signature/Declaration of applicant (the current premises licence holder) or applicant's solicitor or other duly authorised agent (see Guidance Note 13). 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.		
Full Name *	John Gaunt & Partners	
Date *	18/01/2023	
Capacity *	Applicant's Solicitor	
✓ Declaration made		
Do you wish to provide alternative correspondence details? *	Yes	
Alternative Correspondence Address		
This is the address which we shall use to correspond with you	about this application.	
Please provide Contact Name (where not previously given) and postal address for correspondence associated with this application (See guidance note 15).		
Title *	Mr	

Alternative Correspondence Address	
First name *	Jon
Surname *	Wallsgrove
Street address *	John Gaunt & Partners
Town/City *	
County	
Postcode *	
Telephone Number	
Email Address *	
Email confirmation	
On submission an email confirmation will be sent using the deta	ails below
Forename	Jon
Surname /Company Name	Wallsgrove
Email *	
Telephone	

