

- 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)
 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
- 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; **X** 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)

		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			
E-mail address (optional)			
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)

		Other Title (for example, Rev)	
Surname		First names	
Date of birth		I am 18 years old or over	
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 Taste of Europe Supermarket Ltd
Address UNIT 5 BOWES INDUSTRIAL CENTRE WROTHAM ROAD GRAVESEND Kent DA13 0QB
Registered number (where applicable) 12734984

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?

03/12/2021

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 (please read guidance note 1)

Its a Restaurant and a Cafe. We have tables and chairs for our costumers and also toilet facilities

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

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)

Please
tick all

Provision of regulated entertainment (please read guidance note 2)

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)

anything of a similar description to that falling within (e), (f) or (g) h
 (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)

X

In all cases complete boxes K, L and M

A

Plays Standard days and timings (please read guidance note 7)			Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
				Both	
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon					
Tue					
Wed					
Thur					
Fri					
Sat					
Sun					
			State any seasonal variations for performing plays (please read guidance note 5)		
			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 (please read guidance note 6)		

B

Films Standard days and timings			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	

(please read guidance note 7)			Outdoors	
Day	Start	Finish	Both	
Mon			Please give further details here (please read guidance note 4)	
Tue				
Wed			State any seasonal variations for the exhibition of films (please read guidance note 5)	
Thur				
Fri			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 (please read guidance note 6)	
Sat				
Sun				

C

Indoor sporting events Standard days and timings (please read guidance note 7)			Please give further details (please read guidance note 4)	
Day	Start	Finish		
Mon				
Tue			State any seasonal variations for indoor sporting events (please read guidance note 5)	
Wed				

Thur			<p><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)</p>
Fri			
Sat			
Sun			

D

<p>Boxing or wrestling entertainments Standard days and timings (please read guidance note 7)</p>			<p><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)</p>	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			<p><u>Please give further details here</u> (please read guidance note 4)</p>		
Tue					
Wed			<p><u>State any seasonal variations for boxing or wrestling entertainment</u> (please read guidance note 5)</p>		
Thur					
Fri			<p><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)</p>		
Sat					

Sun		

E

Live music Standard days and timings (please read guidance note 7)			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors				
				Outdoors				
Both								
Day	Start	Finish	Please give further details here (please read guidance note 4)					
Mon								
Tue								
Wed						State any seasonal variations for the performance of live music (please read guidance note 5)		
Thur								
Fri								
Sat						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 (please read guidance note 6)		
Sun								

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
Both					
Day	Start	Finish	Please give further details here (please read guidance note 4)		
Mon					

Tue			
Wed			State any seasonal variations for the playing of recorded music (please read guidance note 5)
Thur			
Fri			
Sat			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 (please read guidance note 6)
Sun			

G

Performances of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
				Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read guidance note 4)		
Tue					
Wed			State any seasonal variations for the performance of dance (please read guidance note 5)		
Thur					
Fri					

Sat			<p><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)</p>
Sun			

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 7)</p>			<p>Please give a description of the type of entertainment you will be providing</p>		
Day	Start	Finish	<p><u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 3)</p>	Indoors	
Mon				Outdoors	
				Both	
Tue			<p><u>Please give further details here</u> (please read guidance note 4)</p>		
Wed					
Thur			<p><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)</p>		
Fri					
Sat			<p><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)</p>		
Sun					

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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	
					Both	
Day	Start	Finish	<u>Please give further details here (please read guidance note 4)</u>			
Mon						
Tue						
Wed			<u>State any seasonal variations for the provision of late night refreshment</u> (please read guidance note 5)			
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 6)			
Sat						
Sun						

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	
Day	Start	Finish			Both	X

Mon	10:00	22:30	State any seasonal variations for the supply of alcohol (please read guidance note 5)
Tue	10:00	22:30	
Wed	10:00	22:30	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 6)
Thur	10:00	22:30	
Fri	10:00	22:30	
Sat	10:00	22:30	
Sun	10:00	22:30	

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 Mr. John Paul Canilho Panayi	
Date of birth	
Address	
Postcode	
Personal licence number (if known)	
Issuing licensing authority (if known) Medway Council	

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).

L

Hours premises are open to the public Standard days and timings (please read guidance note 7)			State any seasonal variations (please read guidance note 5)	
Day	Start	Finish		
Mon	07:00	23:00		
Tue	07:00	23:00		
Wed	07:00	23:00		
Thur	07:00	23:00		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 (please read guidance note 6)
Fri	07:00	23:00		
Sat	07:00	23:00		
Sun	08:00	23:00		

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 10)

CCTV with 31 days data be Installed Staff Training regarding the 4x License Objectives, Under 25 Challenge, No Proof, No Sale, Respect our neighbours when you leave the premises or smoking, signage will be displayed. Staff Training Records. Drunk and Violent Costumers will not be served.We will have a Fire and Health and Safety Risk Assessment.No vertical Drinking, table service only. Beers, cider and Ales on Sale will not exceed 6%ABV. Refusal Book.

b) The prevention of crime and disorder

CCTV with 31 days data will be installed. The business will always have a staff member on duty that is familiar with the CCTV operation. Staff will be trained to do not serve drunk or violent costumers. No Irresponsible Promotions of Alcohol drinks No vertical Drinking, table service only. Beers and cider on Sale will not exceed 6%ABV .CCTV signage will be displayed, reminding customers that CCTV is in operation.The premises shall operate a zero-tolerance policy to the supply and use of drugs

c) Public safety

Drunk and Violent Costumers will not be served. CCTV with 31 Days Data will be Installed. We will have a Fire and Health and Safety Risk Assessment. No Irresponsible promotions of alcohol drinks. Alcohol will be stored in a cool dry place and away of any heat source. We will participate in Pub Watch Meetings or with other similar associations. We welcome recommendations given by the Authorities and the Police.

d) The prevention of public nuisance

Deliveries and rubbish bin collections done by our suppliers will take place within the recommended times by the Local Authorities. Staff member to clean any rubbish or littering in front of our premises in a regular basis, respect our neighbours when you leave the premises or smoking, signage will be displayed. Service at the tables outside will finish at 21:30 and Tables and Chairs will be removed at 22:00 everyday

e) The protection of children from harm

Our Business will have a Under 25 Challenge Policy. Our staff will be trained regarding the 4 x License Objectives. Staff training will recorded. No Proof, No Sale. Posters will go up. Refusal Book. Refresher Training every 6x Months to all staff members. For all orders taken over the phone or via the internet, customers should be informed of Challenge 25 and the requirement to have ID ready for inspection should the need arise before receipt of alcoholic beverages.

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.

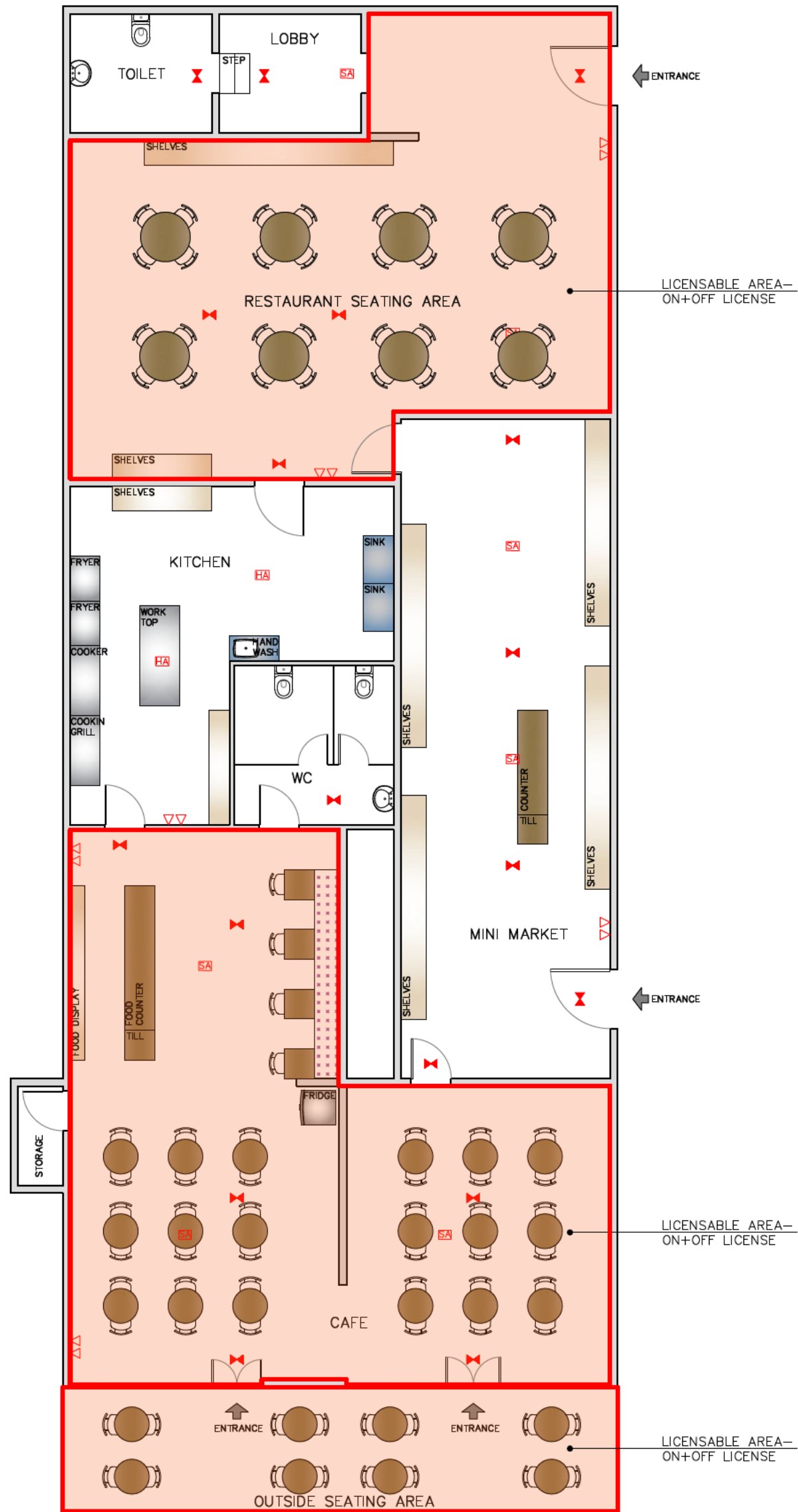
I understand that if I do not comply with the above requirements my application will be rejected. [Applicable to all individual applicants, including those in a partnership which is not a limited liability partnership, but not companies or limited liability partnerships] I have included documents demonstrating 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

Post town		Postcode	
Telephone number (if any)	02084040297		
If you would prefer us to correspond with you by e-mail, your e-mail address (optional)			



- LICENSABLE AREA
- SA SMOKE ALARM
- HA HEAT ALARM
- Δ FIRE EXTINGUISHER
- ⌘ EMERGENCY LIGHT

CAFE, BAR AND RESTAURANT
ALCOHOL LICENSE – ON+OFF LICENSE
 JOSE MANUEL ROCHA
 UNIT 35 – BATTERSEA BUSINESS CENTRE 99–109 LAVENDER HILL
 LONDON SW11 5QL
 TEL: +44 (0) 7868–697778 / E-MAIL: [REDACTED]

APPLICANT:
GABRIELA'S CAFE BAR RESTAURANT
 48–52 NAPIER ROAD
 GILLINGHAM
 ME7 4HD

SCALE:
 A3_1/100
 DATE:
 26–OCTOBER–2021