

**Application for a premises licence to be granted under the Licensing Act 2003**

**PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST**

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

I/We LA PETITE BOULLANGERIE LTD.  
*(Insert name(s) of applicant)*

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

**Part 1 – Premises details**

Postal address of premises or, if none, ordnance survey map reference or description			
LA PETITE BOULLANGERIE 53-55 THE BROADWAY CHEAM, SUTTON			
Post town	CHEAM	Postcode	SM3 8BL

Telephone number at premises (if any)	[REDACTED]
Non-domestic rateable value of premises	£14,000 BAND "B"

**Part 2 – Applicant details**

Please state whether you are applying for a premises licence as Please tick as appropriate

- a) an individual or individuals \*  please complete section (A)
- b) a person other than an individual \*
  - i as a limited company/limited liability partnership  please complete section (B)
  - ii as a partnership (other than limited liability)  please complete section (B)
  - iii as an unincorporated association or  please complete section (B)
  - iv other (for example a statutory corporation)  please complete section (B)
- 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 (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; 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)

M <input type="checkbox"/>	Mr <input type="checkbox"/>	Mi <input type="checkbox"/>	M <input type="checkbox"/>	Other Title (for example, Rev)
r	s	ss	s	
Surname			First names	
Date of birth		I am 18 years old or over <input type="checkbox"/> Please tick yes		
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)

M <input type="checkbox"/>	Mr <input type="checkbox"/>	Mi <input type="checkbox"/>	M <input type="checkbox"/>	Other Title (for
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r	s	ss	s	example, Rev)	
Surname			First names		
Date of birth		I am 18 years old or over		<input type="checkbox"/>	Please tick yes
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	LA PETITE BOULLANGERIE LTD.
Address	ZAVROS MINTIKKIS ASSOCIATES 446 a GREEN LANES, PALMERS GREEN LONDON, N13 5XD
Registered number (where applicable)	11986544
Description of applicant (for example, partnership, company, unincorporated association etc.)	COMPANY LTD.
Telephone number (if any)	[REDACTED]
E-mail address (optional)	lapetiteboulangerie51@hotmail.com

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD MM YYYY  
28 02 2025

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

DD MM YYYY  
[ ][ ][ ][ ][ ][ ]

Please give a general description of the premises (please read guidance note 1)

PLEASE REFER TO NEXT PAGE  
4/A

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)

Provision of regulated entertainment (please read guidance note 2)

Please tick all 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

L/A

PART 3:

GENERAL DESCRIPTION OF THE PREMISES:

LA PETITE BOULANGERIE IS A FAMILY RUN CAFE SERVING HOT & COLD DRINKS ALONG WITH THE RANGE OF HOT SNACKS, SANDWICHES, SALADS, SOUPS, MORNING GOODS FOR BREAKFAST, SWEET TREATS & CAKES FOR AFTERNOON.

CUSTOMERS CAN SEAT INSIDE & OUTSIDE ON THE TERRACE WHEN THE WEATHER IS NICE TO ENJOY.

THERE IS ALSO A BREAD SECTION FOR TAKE AWAY AS WELL.

OUR OPERATING HOURS OF OUR PREMISES IS AS FOLLOWS:

MONDAY TO SUNDAY : FROM 7.00 TO 23.00

**A**

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

**B**

<b>Films</b> Standard days and timings (please read guidance note 7)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 4)	Both	<input type="checkbox"/>
Tue					
Wed			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 5)		
Thur					
Fri			<b>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</b> (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			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 (please read guidance note 6)
Fri			
Sat			
Sun			



**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 7)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)</u></b>	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here (please read guidance note 4)</u></b>		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for boxing or wrestling entertainment (please read guidance note 5)</u></b>		
Thur					
Fri					
Sat			<b><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 (please read guidance note 6)</u></b>		
Sun					

**E**

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

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 7)			<b>Will the playing of recorded music take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 4)	Both	<input type="checkbox"/>
Tue					
Wed			<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 5)		
Thur					
Fri			<b>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</b> (please read guidance note 6)		
Sat					
Sun					

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 7)			<b>Will the performance of dance take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 4)		
Mon					
Tue			<b>State any seasonal variations for the performance of dance</b> (please read guidance note 5)		
Wed					
Thur			<b>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</b> (please read guidance note 6)		
Fri					
Sat					
Sun					

**H**

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 7)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	<b>Will this entertainment take place indoors or outdoors or both – please tick</b> (please read guidance note 3)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b>Please give further details here</b> (please read guidance note 4)		
Wed					
Thur			<b>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</b> (please read guidance note 5)		
Fri					
Sal			<b>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</b> (please read guidance note 6)		
Sun					

**I**

<b>Late night refreshment</b> Standard days and timings (please read guidance note 7)			<b>Will the provision of late night refreshment take place indoors or outdoors or both - please tick (please read guidance note 3)</b>	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 4)		
Mon					
Tue			<b><u>State any seasonal variations for the provision of late night refreshment</u></b> (please read guidance note 5)		
Wed					
Thur			<b><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></b> (please read guidance note 6)		
Fri					
Sat					
Sun					

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 7)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 8)	On the premises	<input type="checkbox"/>			
				Off the premises	<input type="checkbox"/>			
Day	Start	Finish		Both	<input checked="" type="checkbox"/>			
Mon	11.00	23.00	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 5)					
Tue	11.00	23.00						
Wed	11.00	23.00						
Thur	11.00	23.00				<b>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</b> (please read guidance note 6)		
Fri	11.00	23.00						
Sat	11.00	23.00						
Sun	11.00	23.00						

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):

**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).

N/A

### L

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 7)			<b>State any seasonal variations</b> (please read guidance note 5)
Day	Start	Finish	
Mon	7.00	23.00	
Tue	7.00	23.00	
Wed	7.00	23.00	
Thur	7.00	23.00	
Fri	7.00	23.00	
Sat	7.00	23.00	
Sun	7.00	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)

### 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)

A Challenge 25 proof of age scheme shall be operated at the premises where the only, acceptable forms of identification are recognised photographic identification cards, such as a driving licence, passport or proof of age card with the PASS Hologram.

DESCRIBE IN PAGE 15/A



A CCTV system will be installed at the premises covering the entrance, the external area and all internal areas.  
An incident log shall be kept at the premises and made available on request to the Police or an authorised officer of the Local Council.  
All staff members engaged, or to be engaged, on the premises shall receive full training pertinent to the Licensing Act.

**b) The prevention of crime and disorder**

A CCTV system will be installed at the premises covering the entrance, the external area and all internal areas. A head and shoulders image to identification standard shall be captured of every person entering the premises. Images shall be kept for 31 days and supplied to the police or local authority on request.

A member of staff trained in the use of the CCTV system must be available at the premises at all times that the premises is open to the public.

The CCTV system will display, on screen and on any recording, the correct time and date that images were captured.

CCTV signage will be displayed, reminding customers that CCTV is in operation.

An incident log shall be kept at the premises and retained for a period of 12 months and made available on request to an authorised officer of Local Council or the Police. It must be completed within 24 hours of the incident and will record the following:

(a) all crimes reported to the venue

(b) all ejections of patrons

(c) any complaints received

(d) any incidents of disorder

(f) any faults in the CCTV system

(g) any refusal of the sale of alcohol and the name of the member of staff who refused the sale

The premises shall operate a zero-tolerance policy to the supply and use of drugs. Anyone who appears to be drunk or intoxicated shall not be allowed entry to the premises and those who have gained entry will be escorted from the business immediately. Substantial food and non-intoxicating beverages, including drinking water, shall be available in the premises.

Take way orders - only food delivery orders do not include alcohol.

All staff member should be checked to ensure they have the right to work in the UK. These checks should be made available upon requests to all responsible authorities. All associated 'entitlement to work' documents. PAGE: 16/A

**c) Public safety**

The premises will have a refusal book or electronic system to record all refusals of sales, this must be made available to the Police and Local Authority officers upon reasonable request.

The Business will have a Health Safety and A Fire Risk Assessment. PAGE: 16 /B

**d) The prevention of public nuisance**

During the hours of operation, the licence holder shall ensure sufficient measures are in place to remove and prevent litter or waste arising or accumulating from customers in the area immediately outside the premises, and that this area shall be swept and or washed and litter and sweepings collected and stored in accordance with the approved refuse storage arrangements by close of business. Deliveries and Rubbish Collection will be done within the hours approved by the Local Authority. PAGE: 16 /C

M

DESCRIBE THE STEPS YOU INTENDED TO TAKE TO PROMOTE THE FOUR LICENSING OBJECTIVES:

a) GENERAL

WE ARE RUNNING A FAMILY CAFE / RESTAURANT WITH THE OPERATING TIME MENTIONED BELOW:

MON 7.00 To 23.00

TUES 7.00 To 23.00

WED 7.00 To 23.00

THRS 7.00 To 23.00

FRI 7.00 To 23.00

SAT 7.00 To 23.00

SUN 7.00 To 23.00

b) THE PREVENTION OF CRIME AND DISORDER:

WE WILL PROVIDE FULLY OPERATIONAL CCTV CAMERA DURING OUR WORKING HOURS.

PROMOTIONS WILL BE OFFERED

### C) PUBLIC SAFETY

WE HAVE AN EVACUATION PLAN FOR OUR PREMISES TAKING INTO CONSIDERATION ABLE BODIES AND DISABLED PERSON.

OUR STAFF ARE FULLY TRAINED TO CARRY OUR SAFETY CHECKS AND MAINTENANCE THROUGHOUT THE DAY. WE HAVE EXIT/FIRE NOTICES THROUGHOUT THE CAFE.

THERE ARE NO MATERIAL OR FABRIC THAT NOT MEET FIRE SAFETY STANDARDS IN OUR CAFE.

AS A FAMILY RUN CAFE WE ARE WILLING TO COMPLY WITH ANY HEALTH AND SAFETY ASSESSMENT, IF NECESSARY.

16/c

d) THE PREVENTION OF PUBLIC NUISANCE  
WE DISPLAY NOTICE(S) THAT ASKS OUR  
PATRONS TO LEAVE THE PREMISES  
QUIETLY.

WE HAVE EXTRACT VENTILATION WHICH  
DOES NOT IMPACT ON OUR NEIGHBOURS.

e) THE PROTECTION OF CHILDREN FROM HARM:

OUR CAFE IS DESIGNED WITH  
FAMILIES IN MIND, THERE IS NO AGE  
RESTRICTION. CHILDREN ARE PROTECTED  
THROUGH STANDARD HEALTH & SAFETY  
PROCEDURES WHICH ALLOW OUR STAFF ADHERE  
TO. NO ADULTS ENTERTAINMENT IS PERMITTED  
ON THE PREMISES.

**e) The protection of children from harm**

A challenge 25 policy will be in operation at the premises with operate signage on display throughout the premises.

All staff members engaged, or to be engaged, on the premises shall receive full training pertinent to the Licensing Act, specifically regarding age-restricted sales, and the refusal of sales to persons believed to be under the influence of alcohol or drugs. This shall take place every 12 months.

Training records shall be kept at the premises and made available upon request to either Police Officers or an authorised officer of Local Authority.

**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 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.**

**Part 4 – Signatures** (please read guidance note 11)

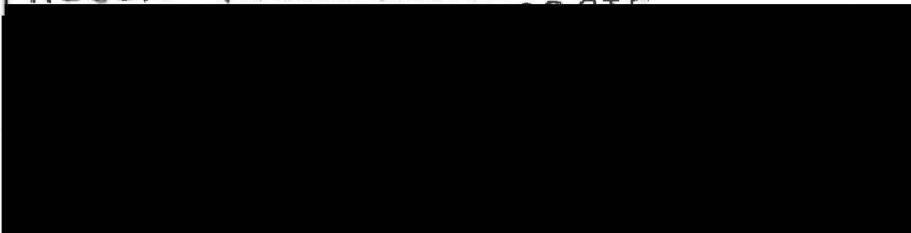
Signature of applicant or applicant's solicitor or other duly authorised agent (see guidance note 12). If signing on behalf of the applicant, please state in what capacity.

<b>Declaration</b>	• [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled
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	<p>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).</p> <ul style="list-style-type: none"> <li>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, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15)</li> </ul>
Signature	
Date	02/02/2025
Capacity	DIRECTOR

For joint applications, signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant's solicitor or other authorised agent (please read guidance note 13). If signing on behalf of the applicant, please state in what capacity.

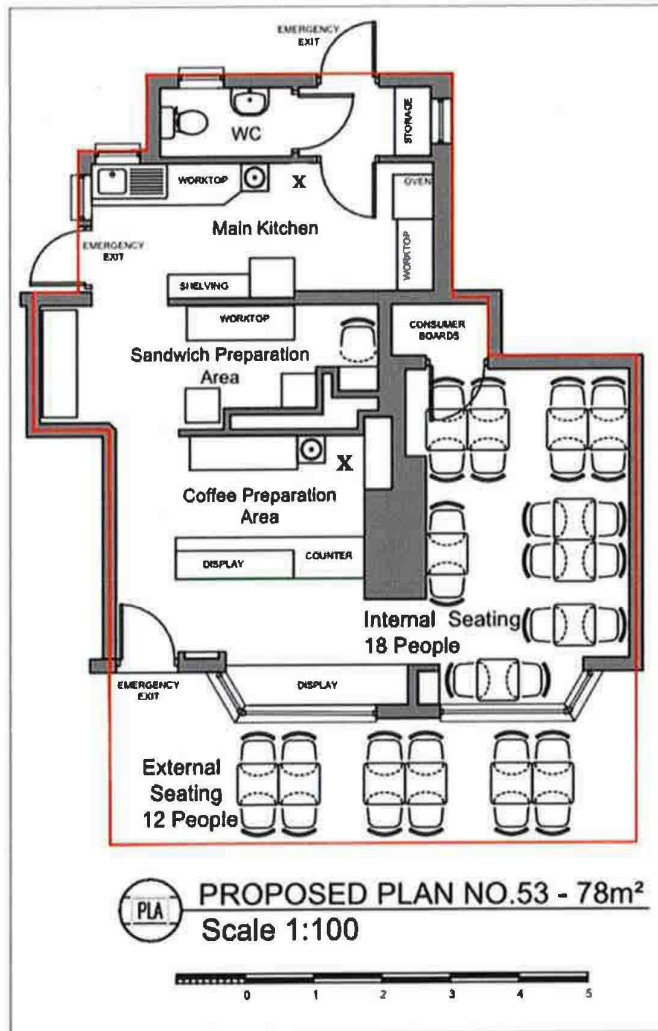
Signature	
Date	
Capacity	

<p>Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)</p> <p>NEGIN KHALATBARI</p> 
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#### Notes for Guidance

- 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.
- In terms of specific regulated entertainments please note that:
  - Plays: no licence is required for performances between 08:00 and 23:00 on any day, provided that the audience does not exceed 500.
  - Films: no licence is required for 'not-for-profit' film exhibition held in community premises between 08:00 and 23:00 on any day provided that the audience does not exceed 500 and the organiser (a) gets consent to the screening from a person who is responsible for the premises; and (b) ensures that each such screening abides by age classification ratings.





**X= Fire Fighter equipment**

<b>PROJECT</b>	APPLICATION FOR WINE LICENSE	<b>SCALE</b> 1:100@A4	<b>DRAWING NUMBER</b> 24025-PLA-105 REV001
<b>SITE ADDRESS</b>	LA PETITE BOULANGERIE, 53-55 THE BROADWAY, SM3 8BL, CHEAM SURREY		