

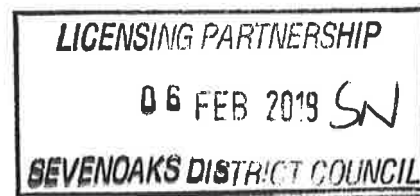
Bolanle Morafa

From: Uniform_Service_Request_Connector-Licensing@sevenoaks.gov.uk
Sent: 06 February 2018 10:13
To: Licensing
Subject: Uniform LI Connector: New Licensing application notification

A new Uniform Licensing application has been created by the Licensing Connector server.

Application Reference Value: 18/00376/LAPRE Application Type: LAPRE Application CaseType: NEW Application
Address: Emerson Grange Cinnamon Care Collection Rowhill Road Hextable
Created: 06/02/2018 00:00:00
Message sent from host name WKIP-SOAP-15 by user LicensingConnectorService_LIVE at 06/02/2018 10:12:52.

You have been sent this message because your address is defined as a contact address in the Uniform Licensing Connector configuration. Contact your Uniform systems administrator if you no longer wish to receive this message.



Licensing Authority: *The Licensing Partnership*

Licensing Partnership
P.O. Box 182
Sevenoaks
Kent TN13 1GP

Ref:

Application for a Premises Licence under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes found at bottom of Page 4 of this form.

Use the blank page at the end of the form to provide further details if necessary.

When it is complete you can submit the form directly to us - click on the Submit Form button.

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

For help information about filling in this type of electronic form, click on the help information button.

I / We **Emerson Grange** 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

Emerson Grange
Cinnamon Care Collection
Rowhill Road
Hextable

Post town

Swanley

Post code

BR8 7RL

Telephone number of premises (if any)

01233 224040

Non-domestic rateable value of premises

£

If the premises is under construction please check here



If the premises hasn't been assigned a rateable value yet, please check here



Part 2 - Applicant Details

Please state whether you are applying for a premises licence as

Please make selection with an "x"

- | | |
|-------------------------------------------------|-----------------------------------------------------------------|
| a) An individual or individuals* | <input type="checkbox"/> please complete section (A) |
| b) a person other than an individual* | |
| i as a limited company | <input checked="" type="checkbox"/> please complete section (B) |
| ii. as a partnership | <input type="checkbox"/> please complete section (B) |
| iii. as an unincorporated association or | <input type="checkbox"/> please complete section (B) |
| iv. other (for example a statutory corporation) | <input type="checkbox"/> please complete section (B) |
| c) A recognised club | <input type="checkbox"/> please complete section (B) |
| d) a charity | <input type="checkbox"/> 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 ☐ 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 make selection with an "x"

- 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)

You do not have to answer the questions in this section.

Title

Surname

First names

Are you 18 years or older?

☐ Yes

☐ No

Date of Birth

Nationality

Current postal address if different from premises address

Post Town

Postcode

Daytime contact telephone number

Email address (optional)

SECOND INDIVIDUAL APPLICANT (IF APPLICABLE)

Title

Surname

First names

Date of Birth
(you must be 18
years old or over)

Nationality

Current postal
address
if different from
premises address

Postcode

Post Town

Daytime contact telephone number

Email address
(optional)**(B) OTHER APPLICANTS**

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint nature (other than a body corporate), please give the name and address of each party concerned.

Name

Hextable Care Limited

Address

Garden Floor
2 Kensington Square
London
United Kingdom
W8 5EP.

Registered number (where applicable)

09530899

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

Limited Comapny

Telephone number (if any)

01233 244040

E-mail address (optional)

emerson.gm@cinnamoncc.com

Part 3 - Operating Schedule

When do you want the premises licence to start?

01/05/2018

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

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

General description of premises (please read guidance note 1)

The building is currently in the construction process and is laid out in Rowlands road which is on a hill for this reason some gardens are on the ground floor and some on the first floor.

The Buildings consist of two small blocks of apartments block one housing 23 apartments and block two housing 18 apartments, the main home also has 5 apartments attached to the ground floor.

The care home consists of 85 assisted rooms providing care over four floors, with 15 rooms on the third floor, 35 rooms on the second floor and 35 on the first floor.

On each of these floors are separate dining and lounge facility's, the ground floor is made up of A reception, A club room for apartment owners, a bar area with large tv, hairdressers, gym and Cinema, in addition to this there are two large garden areas one attached to the ground floor bar area and the second attached to the first-floor lounge area.

We would like a licence to cover the complete main building and attached rear gardens only this would enable us to supply residents and guests with drinks during meals and in the lounge and garden areas at other times.

What licensable activities do you intend to carry on from the premises?
(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

*Please check all
relevant boxes*

Provision of regulated entertainment (please read guidance note 2)

- | | |
|----------------------------------------------------------------------------------------------------------------|-------------------------------------|
| a) plays (if ticking yes, fill in box A) | <input checked="" type="checkbox"/> |
| b) films (if ticking yes, fill in box B) | <input type="checkbox"/> |
| c) indoor sporting events (if ticking yes, fill in box C) | <input type="checkbox"/> |
| d) boxing or wrestling entertainment (if ticking yes, fill in box D) | <input type="checkbox"/> |
| e) live music (if ticking yes, fill in box E) | <input checked="" type="checkbox"/> |
| f) recorded music (if ticking yes, fill in box F) | <input checked="" type="checkbox"/> |
| g) performances of dance (if ticking yes, fill in box G) | <input checked="" type="checkbox"/> |
| h) anything of a similar description to that falling within (e), (f) or (g)
(if ticking yes, fill in box H) | <input type="checkbox"/> |

Provision of late night refreshment (if ticking yes, fill in box L)

☐

Supply of alcohol (if ticking yes, fill in box M)

☒

In all cases complete boxes N, O and P

A

Plays Standard days and timings (please read guidance note 7)			<u>Will the performance of a play take place indoors or outdoors or both - please make selection with an "x"</u> (please read guidance note 3).	Indoors	
Day	Start	Finish		Outdoors	
Mon	10:00	23:00	<u>Please give further details here</u> (please read guidance note 4) None	Both	X
Tue	10:00	23:00			
Wed	10:00	23:00	<u>State any seasonal variations for performing plays</u> (please read guidance note 5) New Years Eve 10:00 - 00:30 New years Day.		
Thur	10:00	23:00			
Fri	10:00	23:00	<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 6) Premises will be open 24 hours for residents and visiting family and will be staffed at all times.		
Sat	10:00	23:00			
Sun	10:00	23:00			

B

Films Standard days and timings (please read guidance note 7)			<u>Will the exhibition of films take place indoors or outdoors or both - please make selection with an "x"</u> (please read guidance note 3).	Indoors	
Day	Start	Finish		Outdoors	
Mon			<u>Please give further details here</u> (please read guidance note 4)	Both	
Tue					
Wed			<u>State any seasonal variations for the exhibition of films</u> (please read guidance note 5)		
Thur					
Fri			<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 6)		
Sat					
Sun					

E

Live music Standard days and timings (please read guidance note 7)			Will the performance of live music take place <u>indoors or outdoors</u> or both - please make selection with an "x" (please read guidance note 3).	Indoors	
Day	Start	Finish		Outdoors	
Mon	10:00	23:00	Please give further details here (please read guidance note 4) None	Both	X
Tue	10:00	23:00			
Wed	10:00	23:00	State any seasonal variations for performance of live music (please read guidance note 5) New Years Eve 10:00 - 00:30 New years Day.		
Thur	10:00	23:00			
Fri	10:00	23:00	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) Premises will be open 24 hours for residents and visiting family and will be staffed at all times.		
Sat	10:00	23:00			
Sun	10:00	23:00			

F

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place <u>indoors or outdoors</u> or both - please make selection with an "x" (please read guidance note 3).	Indoors	
Day	Start	Finish		Outdoors	
Mon	10:00	23:00	Please give further details here (please read guidance note 4) None	Both	X
Tue	10:00	23:00			
Wed	10:00	23:00	State any seasonal variations for playing recorded music (please read guidance note 5) New Years Eve 10:00 - 00:30 New years Day.		
Thur	10:00	23:00			
Fri	10:00	23:00	Non standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times to those listed in the column on the left, please list (please read guidance note 6) Premises will be open 24 hours for residents and visiting family and will be staffed at all times.		
Sat	10:00	23:00			
Sun	10:00	23:00			

G

Performance of dance Standard days and timings (please read guidance note 7)			Will the performance of dance take place indoors or outdoors or both - please make selection with an "x" (please read guidance note 3).		Indoors	
Day	Start	Finish			Outdoors	
Mon	10:00	23:00	Please give further details here (please read guidance note 4) None		Both	X
Tue	10:00	23:00				
Wed	10:00	23:00	State any seasonal variations for the performance of dance (please read guidance note 5) New years Eve 10:00 - 00:30 New years Day.			
Thur	10:00	23:00				
Fri	10:00	23:00	Non standard timings. Where you intend to use the premises for the performance of dance entertainment at different times to those listed in the column on the left, please list (please read guidance note 6) Premises will be open 24 hours for residents and visiting family and will be staffed at all times.			
Sat	10:00	23:00				
Sun	10:00	23:00				

H

Anything of a similar description to that falling within (e), (f) or (g) 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	Will the entertainment take place indoors or outdoors or both - please make selection with an "x" (please read guidance note 3).		Indoors	
Mon					Outdoors	
Tue			Please give further details here (please read guidance note 4)			
Wed						
Thur			State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 5)			
Fri						
Sat			Non standard timings. Where you intend to use the premises for 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 (please read guidance note 6)			
Sun						

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for consumption – <u>please tick</u> (please read guidance note 8)	On the premises	X
				Off the premises	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5) None.		
Mon	10:00	23:00			
Tue	10:00	23:00			
Wed	10:00	23:00			
Thur	10:00	23:00			
Fri	10:00	23:00			
Sat	10:00	23:00			
Sun	10:00	23:00			
<u>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</u> (please read guidance note 6) New years eve 10:00 to 00:30 New years Day.					

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 George Goodson	
Date of birth: 03/02/1963	
Address 274 Lynmouth Avenue Morden Surrey	
Postcode	SM4 4RS
Personal licence number (if known) LN 2006 1263	
Issuing licensing authority (if known) London Borough of Merton	

N

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)

None.

O

Hours premises are open to the public
Standard days and timings
(please read guidance note 7)

Day	Start	Finish
Mon	00:01	00:00
Tue	00:01	00:00
Wed	00:01	00:00
Thur	00:01	00:00
Fri	00:01	00:00
Sat	00:01	00:00
Sun	00:01	00:00

State any seasonal variation (please read guidance note 5)

None

Non standard timings. Where you intend to use the premises to be open to the public at different times to those listed in the column on the left, please list (please read guidance note 6)

None.

P Describe the steps you intend to take to promote the four licensing objectives:

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

During the day the Premises Reception will be staffed, All visitors must sign in at all times, at other times when the reception is not staffed the main doors will be set to exit only, Access will then only be granted by using the front door bell and credentials checked prior to access, Family members and residents will be issued with a coded fob which will allow them access at any time but they will still be required to sign in and out.

Training will also be given to all staff on the licensing objectives and how they apply to us.

b) The prevention of crime and disorder

Only residents and guests will be served alcohol providing they can prove they are above the age of 18, any one who looks intoxicated will be refused Alcohol drinks of any type.

Any person showing signs of being disorderly will be asked to leave, residents will be asked to return to their room or apartment.

c) Public safety

The home has a fully functional fire alarm system, Emergency lighting and sprinkler all of which are tested at regular intervals by the on-site maintenance team, in addition to this the fire alarm is maintained by an outside contractor every three month and the emergency lighting every six months and sprinkler system every year.

All staff are trained in evacuation procedures for the building and notices are displayed at exits next to emergency call pushes.

d) The prevention of public nuisance

In addition to residents and family signing in Limits will be placed on times of live music as follows, no live music outside in the gardens beyond 21:00 and no live Music inside the building Beyond 22:30 on any day of the year (except New years eve) also garden doors will be closed at this time to stop any noise traveling to disrupt the public, at the end of any event all attendees will be asked to leave quietly so not to disturb any residents of the home or the local area.

Any one displaying signs of intoxication or aggressive behavior will be requested to leave and refused any further alcohol of any sort.

e) The protection of children from harm

Alcohol will only be sold from the main bar situated on the ground floor after 21:00.

No Children will be allowed in any area of the home selling alcohol after 21:00.

Please make
selection with an "x"

I have enclosed the plan of the premises ☒

I have enclosed the consent form completed by the individual I wish to be 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 (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 5 - Declaration (please read guidance note 11)

Confirmation of applicant or applicant's solicitor or other duly authorised agent. (See guidance note 12) **If confirming on behalf of the applicant please state in what capacity.**

• [Applicable to all individual applicants only, including those in a partnership which is not a limited liability partnership] 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).

Confirmation ☒

Name Date

Capacity

For joint applications confirmation of 2nd applicant or 2nd applicant's solicitor or other authorised agent. (please read guidance note 13) **If confirming on behalf of the applicant please state in what capacity.**

Confirmation ☒

Name Date

Capacity

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14)

Name

Address

Post Town

Postcode

Telephone number (if any)

If you would prefer us to correspond with you by e-mail your e-mail address (optional)

Use this page if there is any other information that you think we should know about.
Information entered on this page will be sent to us, along with the data on the rest of the form when you use the "Submit" option.

As a care home we plan to have several full time activities staff who will arrange varied activities every day to engage and promote good health to the residents, these will include singing, dancing, watching films and TV, residents parties and bbq's.
in addition to this we will have performers coming into the building who may also sing, dance and act in plays.
this is not an exhaustive list as we will arrange activities that the residents would like within the limits of the Licence.
In addition we do also have a minibus for regular outings.

