

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 GLOBAL FOOD CITY

(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 <u>518 LONDON ROAD</u> <u>NORTH CHEAM</u>			
Post town	<u>SUTTON</u>	Postcode	<u>SM3 8HW</u>
Telephone number at premises (if any)		<u>[REDACTED]</u>	
Non-domestic rateable value of premises		<u>£ 14250</u>	

Part 2 - Applicant details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- | | |
|--|---|
| a) an individual or individuals * | <input checked="" type="checkbox"/> please complete section (A) |
| b) a person other than an individual * | |
| i as a limited company/limited liability partnership | <input type="checkbox"/> please complete section (B) |
| ii as a partnership (other than limited liability) | <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 | <input type="checkbox"/> 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)

Mr <input checked="" type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
Surname AHAMED IMTHIAS			First names SHARIFFDEEN		
Date of birth		[REDACTED]	I am 18 years old or over <input checked="" type="checkbox"/> Please tick yes		
Nationality		[REDACTED]			
Current residential address if different from premises address		[REDACTED]			
Post town		[REDACTED]		Postcode [REDACTED]	
Daytime contact telephone number		[REDACTED]			
E-mail address (optional)		ISFI_EXPRESS@HOTMAIL.COM			
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) *N/A*

Mr <input type="checkbox"/>		Mrs <input type="checkbox"/>		Miss <input type="checkbox"/>		Ms <input type="checkbox"/>		Other Title (for 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 *N/A*

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
Address
Registered number (where applicable)
Description of applicant (for example, partnership, company, unincorporated association etc.)
Telephone number (if any)
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

THE PREMISES IS A GROUND FLOOR CONVENIENCE STORE TRADING AS GLOBAL FOOD CITY, SELLING GROCERIES, HOUSEHOLD GOODS AND OTHER EVERYDAY ITEMS. THE APPLICATION RELATES TO THE SALE OF ALCOHOL FOR CONSUMPTION OFF THE PREMISES ONLY, DURING THE HOURS 07:00 TO 23:00 MONDAY TO SUNDAY. THE PREMISES INCLUDES A DESIGNATED ALCOHOL DISPLAY AREA AND SECURE ALCOHOL STORAGE.

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

N/A

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

J

Supply of alcohol Standard days and timings (please read guidance note 7)			Will the supply of alcohol be for <u>consumption - please tick</u> (please read guidance note 8)	On the premises	<input type="checkbox"/>
Day	Start	Finish		Off the premises	<input checked="" type="checkbox"/>
Mon	07:00	23:00	State any seasonal variations for the supply of alcohol (please read guidance note 5)	Both	<input type="checkbox"/>
Tue	07:00	23:00	NONE (THE HOURS FOR THE SUPPLY OF ALCOHOL WILL REMAIN THE SAME THROUGHOUT THE YEAR).		
Wed	07:00	23:00			
Thur	07:00	23:00	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)		
Fri	07:00	23:00	NONE (THE PREMISES WILL OPERATE TO THE STANDARD HOURS ONLY, WITH NO NON STANDARD TIMINGS).		
Sat	07:00	23:00			
Sun	07:00	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):

[REDACTED]

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).

NONE - THE PREMISES WILL NOT PROVIDE ANY ADULT ENTERTAINMENT, SERVICES, ACTIVITIES OR MATTERS OF THIS NATURE

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	NONE - THE SUPPLY OF ALCOHOL WILL BE DURING THE STANDARD PERMITTED HOURS ONLY (07:00-23:00, MONDAY TO SUNDAY), NO SEASONAL VARIATIONS ARE PROPOSED.
Mon	07:00	23:00	
Tue	07:00	23:00	
Wed	07:00	23:00	
Thur	07:00	23:00	
Fri	07:00	23:00	
Sat	07:00	23:00	
Sun	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)			NONE - THE PREMISES WILL ONLY BE OPEN TO THE PUBLIC DURING THE STANDARD PERMITTED HOURS. NO NON-STANDARD TIMINGS ARE PROPOSED.

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)

THE PREMISES WILL OPERATE RESPONSIBLY AND IN FULL COMPLIANCE WITH THE LICENSING OBJECTIVES, POLICIES AND PROCEDURES ARE IN PLACE TO PROMOTE THE PREVENTION OF CRIME AND DISORDER, ENSURE PUBLIC SAFETY, PREVENT PUBLIC NUISANCE, AND PROTECT CHILDREN FROM HARM. ALL STAFF WILL BE TRAINED IN THEIR RESPONSIBILITIES UNDER THE LICENSING ACT 2003 AND IN THE IMPLEMENTATION OF THESE POLICIES. CCTV WILL BE MAINTAINED THROUGHOUT THE PREMISES, STAFF WILL OPERATE A CHALLENGE 25 POLICY AND REGULAR CHECKS WILL BE CARRIED OUT FOR SAFER ENVIRONMENT.

b) The prevention of crime and disorder

I WILL INSTALL AND MAINTAIN A HIGH QUALITY CCTV SYSTEM COVERING ALL CUSTOMER AREAS, ENTRY/EXIT AND EXTERNAL SURROUNDINGS. RECORDING WILL BE KEPT FOR 31 DAYS AND MADE AVAILABLE TO THE POLICE ON REQUEST. CLEAR SIGNAGE WILL BE DISPLAYED. I WILL OPERATE A CHALLENGE 25 POLICY. STAFF WILL RECEIVE TRAINING ON ACCEPTABLE FORM OF ID, AGE VERIFICATION, REFUSING SALE, DEALING WITH DIFFICULT SITUATION. I WILL REFUSE SALE AND ASK INDIVIDUALS TO LEAVE POLITELY, IF THEY INTOXICATED OR BEHAVING AGGRESSIVELY, WORK CLOSELY WITH POLICE.

c) Public safety

THE SHOP WILL COMPLY WITH ALL HEALTH & SAFETY, FIRE SAFETY AND BUILDING REGULATIONS. A FIRE ALARM, EXTINGUISHER AND EMERGENCY LIGHTING WILL BE REGULARLY TESTED. A CLEAR AND VISIBLE FIRE EXIT SIGNAGE WILL BE IN PLACE AND EXITS WILL BE KEPT CLEAR AT ALL TIMES. I WILL ENSURE REGULAR STAFF TRAINING IN FIRE SAFETY, FIRST AID, AND CUSTOMER WELFARE. THE PREMISES WILL BE WELL-LIT AND MAINTAINED TO AVOID ACCIDENTS OR HAZARDS FOR BOTH CUSTOMERS AND STAFF.

d) The prevention of public nuisance

THE PREMISES WILL OPERATE BETWEEN STANDARD HOURS – (07:00 AM TO 11PM, MONDAY TO SUNDAY) AND WILL AVOID CAUSING ANY LATE-NIGHT DISTURBANCES. I WILL DISPLAY NOTICES ASKING CUSTOMERS TO LEAVE QUIETLY, AND RESPECT NEIGHBOURS WHEN EXITING. DELIVERIES WILL BE ARRANGED AT A REASONABLE HOURS TO MINIMISE NOISE. ANY BACKGROUND MUSIC (IF PLAYED) WILL BE KEPT AT A LOW LEVEL. WASTE WILL BE SECURELY STORED AND REGULARLY COLLECTED TO PREVENT ODOUR.

e) The protection of children from harm

THE CHALLENGE 25 POLICY WILL ENSURE THAT ALCOHOL IS NOT SOLD TO UNDERAGE INDIVIDUALS. STAFF WILL BE TRAINED TO REFUSE ALCOHOL SALES TO ANYONE SUSPECTED OF PURCHASING FOR MINORS. NO PRODUCTS THAT MAY BE CONSIDERED HARMFUL OR INAPPROPRIATE (E.G. HIGH CAFFEINE, STRONG LANGUAGE LABELLING) WILL BE PROMINENTLY DISPLAYED. I WILL NOT ALLOW CHILDREN TO LOITER IN SHOP UNSUPERVISED, ESPECIALLY NEAR ALCOHOL DISPLAYS.

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.**

Declaration	<ul style="list-style-type: none">• [Applicable to 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, 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)
Signature	
Date	27/08/2025
Capacity	INDIVIDUAL APPLICANT

For joint applications, signature of 2nd applicant or 2nd 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	

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14) 518 LONDON ROAD NORTH CHAM			
Post town	BUTTON	Postcode	SM3 8HW
Telephone number (if any)			
If you would prefer us to correspond with you by e-mail, your e-mail address (optional) T3FI. EXPRESS@HOTMAIL.COM			

Operating Schedule: How I Will Promote the Four Licensing Objectives

1. The Prevention of Crime and Disorder

I will install and maintain a high-quality CCTV system covering all customer areas, entry/exit points, and external surroundings. Recordings will be kept for a minimum of 31 days and made available to the police on request.

Clear signage will be displayed to inform customers that CCTV is in operation.

I will operate a Challenge 25 policy for alcohol sales — requiring ID from anyone who looks under 25. Acceptable forms of ID include photo driving licences, passports, and PASS-accredited cards.

Staff will receive training on age verification, refusing service, and dealing with difficult situations.

I will refuse service and ask individuals to leave the premises if they are intoxicated or behaving aggressively, and will work closely with local police if any crime-related incidents occur.

2. Public Safety

The shop will comply with all health and safety, fire safety, and building regulations.

A fire alarm, extinguishers, and emergency lighting will be installed and regularly tested.

Clear and visible fire exit signage will be in place, and exits will be kept clear at all times.

I will ensure regular staff training in fire safety, first aid, and customer welfare.

The premises will be well-lit and maintained to avoid accidents or hazards for both customers and staff.

3. The Prevention of Public Nuisance

The premises will operate between standard hours (e.g., 7:00 AM to 11:00 PM) and will avoid causing any late-night disturbances.

I will display notices asking customers to leave quietly and respect neighbours when exiting.

Deliveries will be arranged at reasonable hours to minimise noise.

Any background music (if played) will be kept at a low level and not audible outside the premises.

Waste will be securely stored and regularly collected to prevent odours and littering.

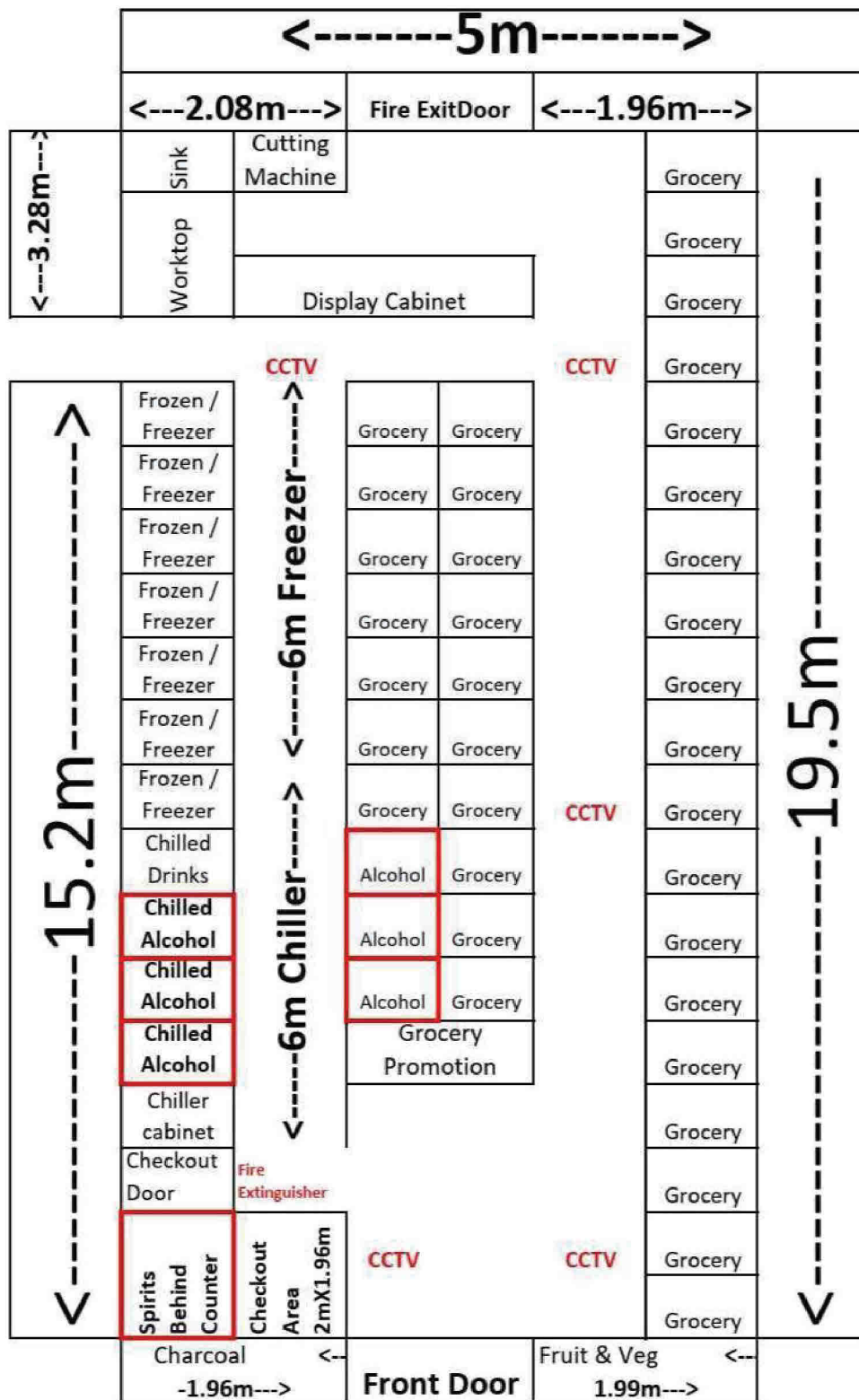
4. The Protection of Children from Harm

The Challenge 25 policy will ensure that alcohol is not sold to underage individuals.

Staff will be trained to refuse alcohol sales to anyone suspected of purchasing for minors.

No products that may be considered harmful or inappropriate to children (e.g., high-caffeine drinks, strong language labelling) will be prominently displayed.

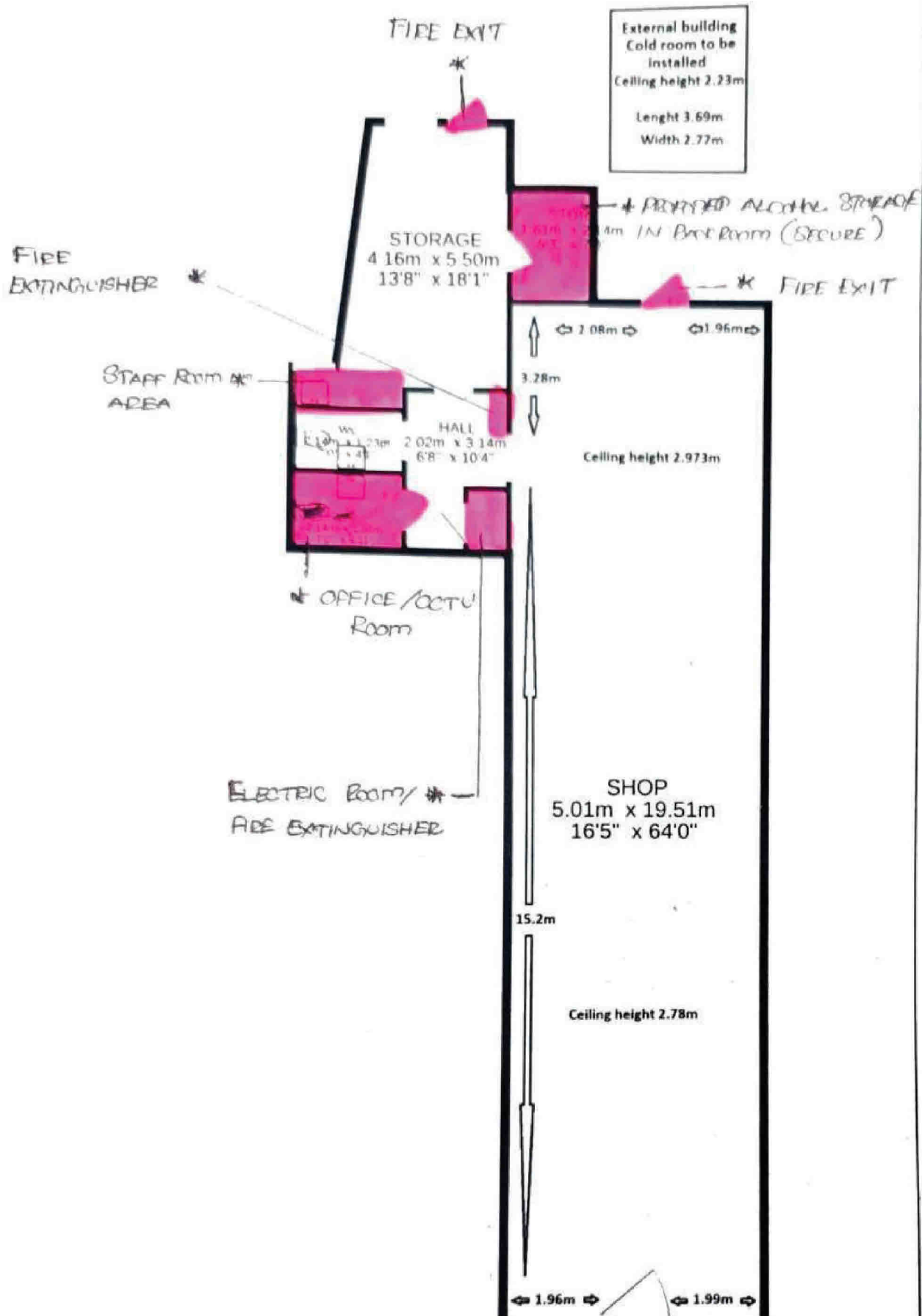
I will not allow children to loiter in the shop unsupervised, especially near alcohol displays.



Proposed Alcohol Display Subject to Licensing Outlined in Red

16 Camera's covering shop floor, backroom and backyard

Fire Extinguishers in appropriate locations



Ground floor
130.1 sq.m. (1401 sq.ft.) approx.

TOTAL FLOOR AREA: 130.1 sq.m. (1401 sq.ft.) approx.
Measurements are approximate Not to scale Illustrative purposes only
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