

## New Premises Licence

### Premises Details

Premises Address \*

REIGATE KEBAB AND BURGER HOUSE 6 LONDON  
ROAD REIGATE SURREY RH2 9HY

Telephone number at premises (if any)

01737 223841

Non-domestic value of premises. \*For further details on how to find the non-domestic rateable value of the premises please consult further guidance on the council's premises related licensing pages.

£ 8100

### Applicant Details

I/We 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.

Please state whether you are applying for a premises licence as:

an individual or individuals

### Applicant Details

If you are applying as a person described in one of the above please confirm: \*

I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or

## Individual Applicant

Title *	Mr
First name *	Erdal
Surname *	Eskisan
Street address *	6 London Road
	Reigate
Town/City *	Reigate
County	Surrey
Postcode *	RH2 9HY
Date of Birth *	05/11/1968
<input checked="" type="checkbox"/> I am 18 years old or over	
Nationality *	British
Daytime Contact Telephone Number *	07864878349
Email *	erdal.eskisan@gmail.com

## Operating Schedule

When do you want the premises licence to start? *	25/12/2019
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. *	Kebab Take Away
If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.	

## Operating Schedule

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

Provision of regulated entertainment (please read guidance note 2) \*

☐

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

Late Night Refreshment Standard Times

Standard days and timings, where you intend to use the premises for late night refreshment.(please read guidance note 7)\*  
Please enter times in 24hr format (HH:MM)

Day \*

Monday to Thursday

23:00

00:00

Late Night Refreshment Standard Times

Standard days and timings, where you intend to use the premises for late night refreshment.(please read guidance note 7)\*  
Please enter times in 24hr format (HH:MM)

Day \*

Friday to Saturday

23:00

02:00

Late Night Refreshment Standard Times

Standard days and timings, where you intend to use the premises for late night refreshment.(please read guidance note 7)\*  
Please enter times in 24hr format (HH:MM)

Day \*

Sunday

23:00

00:00

## Late Night Refreshment

Will the provision of late night refreshment take place indoors or outdoors or both? (please read guidance note 3)\*

Indoors

Please provide further details.(please read guidance note 4)

Reigate Kebab Centre will be providing hot food during the hours of 23:00 - 02:00. The food will be served from a waiting area in the shop (please refer to the attached plan, showing the customer waiting area)

State any seasonal variations for the provision of late night refreshment.(please read guidance note 5)

N/A

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 6)

N/A

## Adult Entertainment

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

## Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 7) \* Please enter times in 24hr format (HH:MM)

Day \*

Monday to Thursday

16:00

00:00

## Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 7) \* Please enter times in 24hr format (HH:MM)

Day \*

Friday to Saturday

16:00

02:00

## Opening Hours Standard Times

Standard days and timings, where the premises are open to the public. (please read guidance note 7) \* Please enter times in 24hr format (HH:MM)

Day *	Sunday
	16:00
	00:00

## Opening Hours

State any seasonal variations. (please read guidance note 5)	N/A
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 6)	N/A

## 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 10)	We are happy with any conditions that the council may impose
b) The prevention of crime and disorder	Install Security Cameras
c) Public safety	We are happy with any conditions that the council may impose
d) The prevention of public nuisance	We are happy with any conditions that the council may impose
e) The protection of children from harm	We are happy with any conditions that the council may impose

## Declarations

Declaration Type *	Sole Applicant - Individual or Other
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## Declarations

I have uploaded a copy of the plan of the premises. I have uploaded a copy of the consent form completed by the individual I wish to be designated premises supervisor, if applicable. I understand 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 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.

Signature/Declaration of applicant or applicant's solicitor or other duly authorised agent (see Guidance Note 11 & 12). 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.

☒ 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).

Full Name \*

Mr Erdal Eskisan

Date \*

26/11/2019

Capacity \*

Applicant

☒ Declaration made

Do you wish to provide alternative correspondence details? \*

Yes

## Alternative Correspondence

Please provide Contact Name and postal address for correspondence associated with this application.

Title	Mr
First name	Murat
Surname	Surucu
Street address *	52 High Street
	Flat 9
	Addlestone
Town/City *	Addlestone
County	Surrey
Postcode *	KT15 1TR
Telephone Number	07864878349
Email *	INFO@MA-PLANNING.CO.UK

## Email confirmation

On submission an email confirmation will be sent using the details below

Forename	Murat
Surname /Company Name	Surucu
Email *	INFO@MA-PLANNING.CO.UK
Telephone	07864878349



# GENERAL NOTES

1. Dimensions should not be scaled from the drawings where accuracy is essential.
2. Details, dimensions and levels to be checked on site by builder prior to commencement of work. Any works commenced prior to approval necessary local authority approvals are entirely at the risk of the owner & builder.
3. Structural details are subject to exposure of existing construction and any necessary revised details are to be agreed with the L.A. Surveyor prior to carrying out the affected works.

REV	DESCRIPTION	DATE

**M** Architecture Planning Ltd  
25a Stroudgate Broadway  
Epsom KT17 2HU

0203 801 2823  
0753 400 713  
info@m-arch.co.uk  
www.m-arch.co.uk

**SITE ADDRESS**  
8 London Road, Reigate RH2 9HY

**PROJECT TITLE**  
Premises Plan for Extension of time  
licensing

**TITLE/NO:**  
201601 - Existing Ground Floor

**SCALE:** 1:50 @ A3

**DATE:** 10.11.2019

**REV:** 0

**DRAWN BY:** Mural Surucu

## PREMISES PLAN



