# Application amended on the 21/03/2023 with applicant's consent

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

Case number 2023/00346/LAPR

Payment transaction

reference

Amount paid £190

Date submitted 02/03/2023 Are you the applicant or their Applicant

agent?

### PREMISES DETAILS

Premises address

811 Fulham Road, London SW6 5HG

If the premises could not be found please enter the address here, or if the premises has no address give a detailed description (including the Ordnance Survey references)

**Bridge Baker** Trading name (if any)

Telephone number at the

premises (if any)

Are the premises in the course of construction?

Yes

Non-domestic rateable value 27000

if the premises

Will the premises be exclusively or primarily used for the supply of alcohol for consumption on the premises?

Yes

### APPLICANT DETAILS

I am applying as a person other than an individual

Please confirm if you are

applying as

as a limited company/ limited liability partnership

**Bread & Beyond Limited** Applicant name **Address** The Station Masters House

168 Thornbury Road

**ISLEWORTH TW7 4QE** 

Registered company number 11204870

Telephone number

**Email address** gauri@bridgebaker.co.uk

I confirm that: I am carrying on or proposing to carry on a business

which involves the use of the premises for licensable

activities

Alternative details for correspondence

Contact name (if different

from premises user)

Gauri Miss NAFREY

**Business** name Bridge Baker (Bakery & Pizzeria) Correspondence address Bridge Baker (Bakery & Pizzeria)

124 Wandsworth Bridge Road

Wandsworth SW62UL

Daytime/ business telephone 020 77316475

number

Evening/ home telephone

number

Mobile phone number

**Email address** 

### **OPERATING SCHEDULE**

When do you want the premises licence to start?

31/03/2023

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

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

Please give a general description of the premises.

A corner shop on Fulham Road, set out over two floors (Ground and Basement)

What licensable activities do you intend to carry on from the premises?

late night refreshment, supply of alcohol

## **HOURS OPEN TO THE PUBLIC**

Standard days

# **Mondays**

Start 07:00

Finish 00:30 23:00

**Tuesdays** 

Start 07:00

Finish <del>00:30</del> 23:00

Wednesdays

Start 07:00

Finish <del>00:30</del> 23:00

**Thursdays** 

Start 07:00

Finish <del>00.30</del> 23:00

**Fridays** 

Start 07:00

Finish <del>00:30</del> 23:00

**Saturdays** 

Start 07:00

Finish <del>00:30</del> 23:00

**Sundays** 

Start 07:00

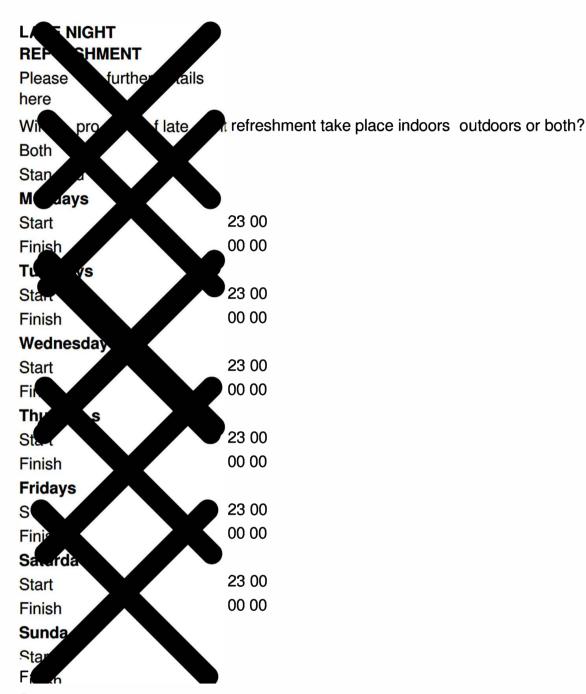
Finish 11:30 23:00

Please state any seasonal variations

British summer and winter time

Non standard timings. Where you intend to use the premises at different times to those listed above, please list

Dhuli week until 02:00, Ramadan month (sunset till Dawn)



Please state any seasonal variations

British summer and winter time

Non standard timings Where you intend to use the premises for late night refreshment at different times to those listed above, please list.

# SUPPLY OF ALCOHOL

Please give further details here

Will the supply of alcohol be for consumption on the premises off the premises or both?

Both

Standard days

**Mondays** 

Start 11:00

Finish 90:00 22:30

**Tuesdays** 

Start 11:00

Finish <del>00:00</del> 22:30

Wednesdays

Start 11:00

Finish 90:00 22:30

**Thursdays** 

Start 11:00

Finish 99:99 22:30

**Fridays** 

Start 11:00

Finish <del>00:00</del> 22:30

**Saturdays** 

Start 11:00

Finish 90:00 22:30

**Sundays** 

Start 11:00

Finish 23:00 22:30

Please state any seasonal variations

British Summer time and winter time

Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed above, please list.

# Details of the individual whom you wish to specify on the licence as the designated premises supervisor

Full name Miss GAURI NAFREY

Date of birth

Home address of prospective designated premises supervisor

Personal licence number (if



2019-00528-LAPER

known)

Issuing authority (if known) Hammersmith And Fulham Council

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

None

Describe the steps you intend to take to promote the licensing objectives

a) General- all four licensing objectives (b,c,d and e)

See attached

b) The prevention of crime and disorder

See attached

c) Public safety

See attached

d) The prevention of public nuisance

See attached

e) The protection of children from harm

See attached

## **DECLARATIONS**

I have enclosed a plan of the premises

Yes

I have enclosed the consent form completed by the individual I wish to be designated premises supervisor

Yes

I understand I must now advertise my application

Yes

I s an o ence, unde sec on 158 o he cens ng Ac 2003, o make a a se s a emen n o n connec on w h h s app ca on. Those who make a fa se s a emen may be ab e on summary conv c on o a f ne of any amoun.

Is an offence under second 24b of he Immigra on Aci 1971 for a person of work when hey know, or have reasonable cause of be eve, had hey are disquarted from doing so by reason of heir mmigra on sialus. Those who employ an adulushous eave or who is subjected or conditioned one as of employment with the limmigra on, Asylum Andia on any Acid 2006 and pursuan of second 21 of he same aci, with the employee sides of squarted.

The DPS named n h s app ca on form s en ed o work n he UK (and s no subject o conditions prevening h m or her from doing work relating of a censable activity) and I have seen a copy of his or her proof of en emen o work, or have conducted an online right of work check using he ome Office on neight of work checking service which confirmed her ghow work.

I have he consen o any nd v dua s o h d pa es s ed n h s o m o p ov de he pe sona de a s and I am au ho sed o subm h s app ca on on beha f of a app can s.

I have read he pr vacy po cy and agree for my de a s o be used by he counc o con ac me abou h s app ca on and any changes o h s serv ce ha may affec me.

I agree to the above Yes I agree to the above declaration

Full name GAURI NAFREY

Capacity gauri nafrey
Date 02/03/2023