# 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.

apply premi to you Licen	(Insert for a ses d as th sing A	sus Property Holdings Limited frame(s) of applicant) premises licence under secrescribed in Part 1 below (the relevant licensing authority act 2003	e premises) a	and I/	we are making	this application	
Emb Olym	erton npia L	ress of premises or, if none, o House Hotel (Hyatt) ondon Development nith Road	rdnance surv	ey ma	ap reference or	description	
Post	town	London			Postcode	W14 8UX	
	•	number at premises (if any)	n/a				
Non- prem		stic rateable value of	£Not rated				
	e state	olicant details whether you are applying for	a premises li	cence	as Pl	ease tick as	
a)	an ir	ndividual or individuals *			please comp	lete section (A)	
b)	a pe	rson other than an individual *	:				
	i	as a limited company/limited	liability		please comp	lete section (B)	
	ii	partnership as a partnership (other than li liability)	mited		please comp	lete section (B)	
	iii	as an unincorporated associa	tion or		please comp	lete section (B)	
	iv	other (for example a statutory corporation)	,		please comp	lete section (B)	

c)	a recognised club							please con	nplete sectio	n (B)		
d)	a charity							please con	nplete sectio	n (B)		
e)	the pr	oprieto	r of ar	n educati	ional e	estab	lishm	ent		please con	nplete sectio	n (B)
f)	a hea	lth serv	ice bo	ody						please con	nplete sectio	n (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 con	nplete sectio	n (B)	
ga)	a person who is registered under Chapter 2 of  please complete section (EPart 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England						n (B)					
h)		nief offic and and		police of s	a poli	ice fo	orce in	า		please con	nplete sectio	n (B)
	ou are a oox belo		g as a	person	descri	bed i	in (a)	or (b)	plea	se confirm (l	by ticking ye	s to
prem	ises for	r licensa	able a	ctivities;	or		ousin	ess w	hich i	nvolves the	use of the	☑
I am making the application pursuant to a statutory function or												
	statut	tory fun	ction	or								
		-		or ged by v	irtue c	of He	r Maj	esty's	prero	ogative		
	a fun	ction di	schar				-	-	prero	ogative		
	a fun	ction di	schar	ged by v			-	-	Oth	ogative er Title (for mple, Rev)		
(A) INI	a fund	ction di	schar	ged by v			licabl Ms	-	Oth	er Title (for mple, Rev)		
Mr Surn	a fund	otion di	schar	ged by v	ll in as	з арр	Ms Fi	e)	Oth exa	er Title (for mple, Rev)	ase tick yes	
Mr Surn Date	a fundo	otion di	schar	ged by v	ll in as	з арр	Ms Fi	e)	Oth exa	er Title (for mple, Rev)	ase tick yes	
Mr Surn Date over Natio	a fundame  Of birt  Dividuality  ent resides if di	Mrs h	PLICA	ged by v	ll in as	з арр	Ms Fi	e)	Oth exa	er Title (for mple, Rev)	ase tick yes	
Mr Surn Date over Natio	a fundame  of birt  onality  ent residess if dipremis	Mrs h dential	PLICA	ged by v	ll in as	з арр	Ms Fi	e)	Oth exa	er Title (for mple, Rev)	ase tick yes	
Mr Surn Date over Natio	a fundame  Of birt  Onality  ent residess if dipremis  town  ime co	Mrs h dential	PLICA	ged by v	ll in as	з арр	Ms Fi	e)	Oth exa	er Title (for mple, Rev)	ase tick yes	

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr Mrs Miss Ms	Other Title (for example, Rev)
Surname Firs	st names
Date of birth I am 18 year over	rs old or Please tick yes
Nationality	
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 Olympus Property Holdings Limited
Address 1 Derby Road Eastwood Nottingham
Registered number (where applicable) NG16 3PA
Description of applicant (for example, partnership, company, unincorporated association) Company
Telephone number (if any) c/o – Matthew Phipps of TLT Solicitors – 03330 060201
E-mail address (optional) c/o – matthew.phipps@tlt.com

# Part 3 Operating Schedule

\/\hc	en do you want the premises licence to start? <b>ASAP</b>	DD	MM	YYYY
VVIIC	of do you want the premises leened to start: ADAI			
	u wish the licence to be valid only for a limited period, n do you want it to end?	MM	YYYY	
Plea	ase give a general description of the premises (please read g	uidand	e note	1)
Olyr	application forms part of a significant redevelopment of the mpia London, Hammersmith Road, London W14 8UX ('The Sa hotel within The Site as set out in the application.			
	premises will operate as a hotel with all facilities ancillary sable activities.	to tha	t functi	on, including
	premises includes a restaurant/ bar and other guest facilitiest rooms.	s, inclu	ıding m	ini-bars in all
	premises will be open to residents and bona fide guests 24 rictions set out below.	hours a	a day, w	rithin the
If E C	100 or more people are expected to attend the promises at			
	1000 or more people are expected to attend the premises at one time, please state the number expected to attend.	n/a		
What	licensable activities do you intend to carry on from the prem	ises?		
(pleas	se see sections 1 and 14 and Schedules 1 and 2 to the Licer	nsing A	ct 2003	)
Prov	vision of regulated entertainment (please read guidance note	2)	Pleas apply	e tick all that
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) (if ticking yes, fill in box H)	or (g)		

<u>Provision of late night refreshment</u> (if ticking yes, fill in box I)	☑
Supply of alcohol (if ticking yes, fill in box J)	$\square$
In all cases complete boxes K, L and M	

### Α

Plays Standard days and timings (please read quidance note 7)		read	Will the performance of a play take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
guidance note 7)		<b>( )</b>		Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read	guidance note	e 4)
Tue					
Wed			State any seasonal variations for performing read guidance note 5)	<b>g plays</b> (pleas	e
Thur					
Fri			Non standard timings. Where you intend to premises for the performance of plays at diff those listed in the column on the left, please guidance note 6)	ferent times t	to ead
Sat					
Sun					

Films Standard days and timings (please read			Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	v
guidance note 7)				Outdoors	
Day	Start	Finish		Both	
Mon	0000	0000	Please give further details here (please read	guidance note	e 4)
Tue	0000	0000			
Wed	0000	0000	State any seasonal variations for the exhibit (please read guidance note 5)	tion of films	
Thur	0000	0000			
Fri	0000	0000	Non standard timings. Where you intend to premises for the exhibition of films at different these listed in the solumn on the left place.	ent times to	and.
Sat	0000	0000	those listed in the column on the left, please guidance note 6)	<u>: IIst</u> (please f	eau
Sun	0000	0000			

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 reaguidance note 6)
Fri			
Sat			
Sun			

Boxing or wrestling entertainments Standard days and timings (please read			Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
timings (please read guidance note 7)				Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read	guidance note	÷ 4)
Tue					
Wed			State any seasonal variations for boxing or entertainment (please read guidance note 5)	wrestling	
Thur					
Fri			Non standard timings. Where you intend to premises for boxing or wrestling entertainm times to those listed in the column on the le (please read guidance note 6)	ent at differe	
Sat					
Sun					

Live music Standard days and timings (please read			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
guidance note 7)				Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read	guidance note	e 4)
Tue					
Wed			State any seasonal variations for the performusic (please read guidance note 5)	mance of live	
Thur					
Fri			Non standard timings. Where you intend to premises for the performance of live music to those listed in the column on the left, plear read guidance note 6)	at different til	
Sat					
Sun					

Recorded music Standard days and timings (please read guidance note 7)			Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
guidance note 7)				Outdoors	Ш
Day	Start	Finish		Both	
Mon			Please give further details here (please read	guidance note	e 4)
Tue					
Wed			State any seasonal variations for the playing music (please read guidance note 5)	of recorded	
Thur					
Fri			Non standard timings. Where you intend to premises for the playing of recorded music times to those listed in the column on the le (please read guidance note 6)	at different	
Sat					
Sun					

Performances of dance Standard days and			Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 3)	Indoors	
timings (please read guidance note 7)				Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read	guidance note	e 4)
Tue					
Wed			State any seasonal variations for the perform (please read guidance note 5)	nance of dan	<u>ce</u>
Thur					
Fri			Non standard timings. Where you intend to premises for the performance of dance at di those listed in the column on the left, please guidance note 6)	fferent times	
Sat					
Sun					

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 entertain providing	nment you will	be
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick (please	Indoors	
Mon			read guidance note 3)	Outdoors	
				Both	
Tue			Please give further details here (please read	guidance note	4)
Wed					
Thur			State any seasonal variations for entertainm description to that falling within (e), (f) or (g) guidance note 5)		
Fri					
Sat			Non standard timings. Where you intend to premises for the entertainment of a similar of that falling within (e), (f) or (g) at different times listed in the column on the left, please list (puidance note 6)	lescription to nes to those	
Sun					

Late night refreshment Standard days and		and	Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read	Indoors	Ø
	s (please nce note		guidance note 3)	Outdoors	
Day	Start	Finish		Both	
Mon		0500	Please give further details here (please read	guidance note	4)
	2300				
Tue		0500			
	2300				
Wed		0500	State any seasonal variations for the provision refreshment (please read guidance note 5)	ion of late nig	<u>ıht</u>
	2300				
Thur		0500			
	2300				
Fri		0500	Non standard timings. Where you intend to premises for the provision of late night refre		
	2300		different times, to those listed in the column		
Sat		0500	please list (please read guidance note 6)		
	2300				
Sun		0500			
	2300				

Supply of alcohol Standard days and timings (please read		and	Will the supply of alcohol be for consumption – please tick (please read quidance note 8)	On the premises	
	nce note			Off the premises	
Day	Start	Finish		Both	Ø
Mon	0000	0000	State any seasonal variations for the supply (please read guidance note 5)	of alcohol	
Tue	0000	0000	For non residents – Monday to Sunday 0700 until 0000		
Wed	0000	0000			
Thur	0000	0000	Non standard timings. Where you intend to use the premises for the supply of alcohol at different times listed in the column on the left, please list (please re		ose
Fri	0000	0000	guidance note 6)  For non residents –  Until 0200 following New Year's Eve, with the premises closin 30 minutes after to non residents.	na	
Sat	0000	0000		iĄ	
Sun	0000	0000			

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 Gillian Elizabeth Kiamil
Date of birth
Personal licence number (if known) LN/200501381
Issuing licensing authority (if known) London Borough of Enfield

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

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)  For non-residents –  Monday to Sunday 0700 until 0030
Day	Start	Finish	
Mon	0000	0000	
Tue	0000	0000	
Wed	0000	0000	
			Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the
Thur	0000	0000	column on the left, please list (please read guidance note 6)
			For non residents –
Fri	0000	0000	Until 0200 following New Year's Eve, with the premises closing 30 minutes after to non residents.
Sat	0000	0000	
Sun	0000	0000	

<b>M</b> 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)
Please see attached.
b) The prevention of crime and disorder
Please see attached.
a) Public cofety
c) Public safety Please see attached.
r loade dos altadrios.
d) The prevention of public nuisance
Please see attached.
L
e) The protection of children from harm
Please see attached.

### Checklist:

### Please tick to indicate agreement

•	I have made or enclosed payment of the fee.	$\checkmark$
•	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. <b>ONLINE APPLICATION</b>	
•	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.	
•	will be rejected.	$\overline{\checkmark}$
	[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 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.

# [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, if appropriate (please see note 15)

Signature	Matthew Phipps for TLT Solicitors		
Date	26 <sup>th</sup> February 2024		
Capacity	Solicitor for applicant		
	ations, signature of 2 <sup>nd</sup> applicant or 2 <sup>nd</sup> applicant's solicitor or other nt (please read guidance note 13). If signing on behalf of the applicant, what capacity.		
Signature			
Date			
Capacity			
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13)  Matthew Phipps TLT Solicitors One Redcliff Street			

+44(0)3330 060201

If you would prefer us to correspond with you by e-mail your e-mail address (optional)
matthew.phipps@tlt.com

Post

code

BS1 6TP

Post town

Bristol

Telephone number (if any)

### **Emberton House Hotel (Hyatt)**

### Olympia London Development Hammersmith Road London W14 8UX

### **Operating Schedule**

### **Brief description of premises**

The premises will operate as a hotel with all facilities ancillary to that function, including licensable activities.

The premises includes a restaurant/ bar and other guest facilities, including mini-bars in all guest rooms

The premises will be open to residents and bona fide guests 24 hours a day, within the restrictions set out below.

### Proposed hours of operation

Opening hours

24 hours a day

Hours for the provision of licensable activities

Sale by Retail of Alcohol

Monday to Sunday: 00:00 to 00:00 (residents and bona fide guests)

Monday to Sunday 07:00 to 00:00 (non residents)

• Regulated entertainment

Film

Monday to Sunday: 00:00 to 00:00

Late Night Refreshment

Monday to Sunday: 23:00 to 05:00

### Seasonal/ non-standard timings

For non-residents of the hotel only - All licensable activities extended to 02:00 for New Year's Eve, with the premises closing to non residents 30 minutes thereafter.

### Schedule of proposed Conditions.

### General - all four licensing objectives

- 1. Locations of fire safety and other safety equipment subject to change in accordance with the requirements of the responsible authorities or following a risk assessment.
- 2. Any detail shown on the plan that is not required by the licensing plans regulations is indicative only and subject to change at any time.
- 3. The premises shall operate as a Hotel.
- 4. With the exception of residents and their bona fide guests, no alcohol shall be consumed more than 30 minutes after the permitted terminal hour for the supply of alcohol.

### Prevention of Crime and Disorder

- 5. A safeguarding policy ('The Policy') will be drawn up and implemented at the Premises. The Policy will be relevant to the provision of licensable activities on the premises licence and separate to any safeguarding policy relating to non-licensable activities, such as hotel room management or check in/ check out procedures. The policy will include as a minimum:
  - a. Drink spiking
  - b. Drugs / intoxication
  - c. 'Ask Angela' or other adopted national schemes relating to customer vulnerability
- 6. The Premises shall have a policy to ensure the welfare and safeguarding of vulnerable patrons. Staff shall be able to support and assist people who feel unsafe, vulnerable or threatened. Should customers approach the venue for assistance, these incidents shall be recorded in the incident log. This policy shall be made available to police or authorised officers of the Licensing Authority upon request.

### **CCTV**

- 7. High-Definition CCTV shall be installed, operated and maintained, at all times that the premises are open for licensable activities or customers are on the premises and
- at least one camera will show a close-up of the entrance/entrances to the premises, to capture a clear, image of anyone entering.

- shall cover any internal or external area of the premises where licensable activities take place.
- recordings shall be in real time and stored for a minimum period of 31 days with date and time stamping.
- footage shall be provided free of charge to the Police or authorised Council officer within 24 hours of a request or within any other agreed timeframe.
- a staff member from the premises that is conversant with the operation of the CCTV system shall be on the premises at all times the premises is open to the public. This staff member will be able to show Police or authorised officers of the Licensing Authority footage with the minimum of delay when requested.
- Appropriate signage shall be displayed in prominent positions, informing customers
   CCTV is in operation.

### Incident Register.

8. An incident log shall be maintained by the premises that details incidents of note that occur in the premises. This shall include any incidents of disorder and ejections as a minimum and shall be available for inspection at any reasonable time by an authorised officer of the licensing authority.

### Refusals book

9. A refusals book shall be kept at the premises to record details of all refusals to sell alcohol. This book shall contain the date and time of the incident, a description of the customer, the name of the staff member who refused the sale, and the reason the sale was refused. The book shall be made available to the police and authorised council officers on request.

### Public Safety

- 10. Adequate and appropriate first aid equipment and materials will be kept on site, regularly checked and kept in an easily accessible place for staff.
- 11. All exit routes will be kept unobstructed, with non-slippery and even surfaces, free of trip hazards and clearly signed.
- 12. Guest/ Customer capacities shall be limited to those set out in the Fire Risk Assessment.

13. The Licensee shall provide training for all staff to ensure that they are familiar with all means of ingress and egress and the appropriate procedures in case of any emergencies that require an immediate evacuation of the premises.

### Prevention of Public Nuisance

- 14. Loudspeakers shall not be located outside the premises building.
- 15. The premises will make suitable provision for smokers.
- 16. Music shall not be played at such a level that it is likely to cause a public nuisance.
- 17. Any outside areas are to be monitored and supervised during the hours that the premises are open to the public. The DPS or manager 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. The area shall be swept and/or washed, and litter and sweeping collected and stored in accordance with refuse storage arrangements.

### Protection of Children from Harm

18. At all times that the premises is operating under this licence, the Premises Licence Holder shall ensure that its staff operate a Challenge 25 Policy to minimise the risk of alcohol being sold to underage customers. This Policy shall provide that before any sale of alcohol any person who appears to be under the age of 25 will be required to produce photo ID in the form of a passport; driving licence, UK Military ID card; PASS (or similar) card, or any other form of ID approved by the Home office for age verification in relation to sales of alcohol, to prove that he/she is over the age of 18.

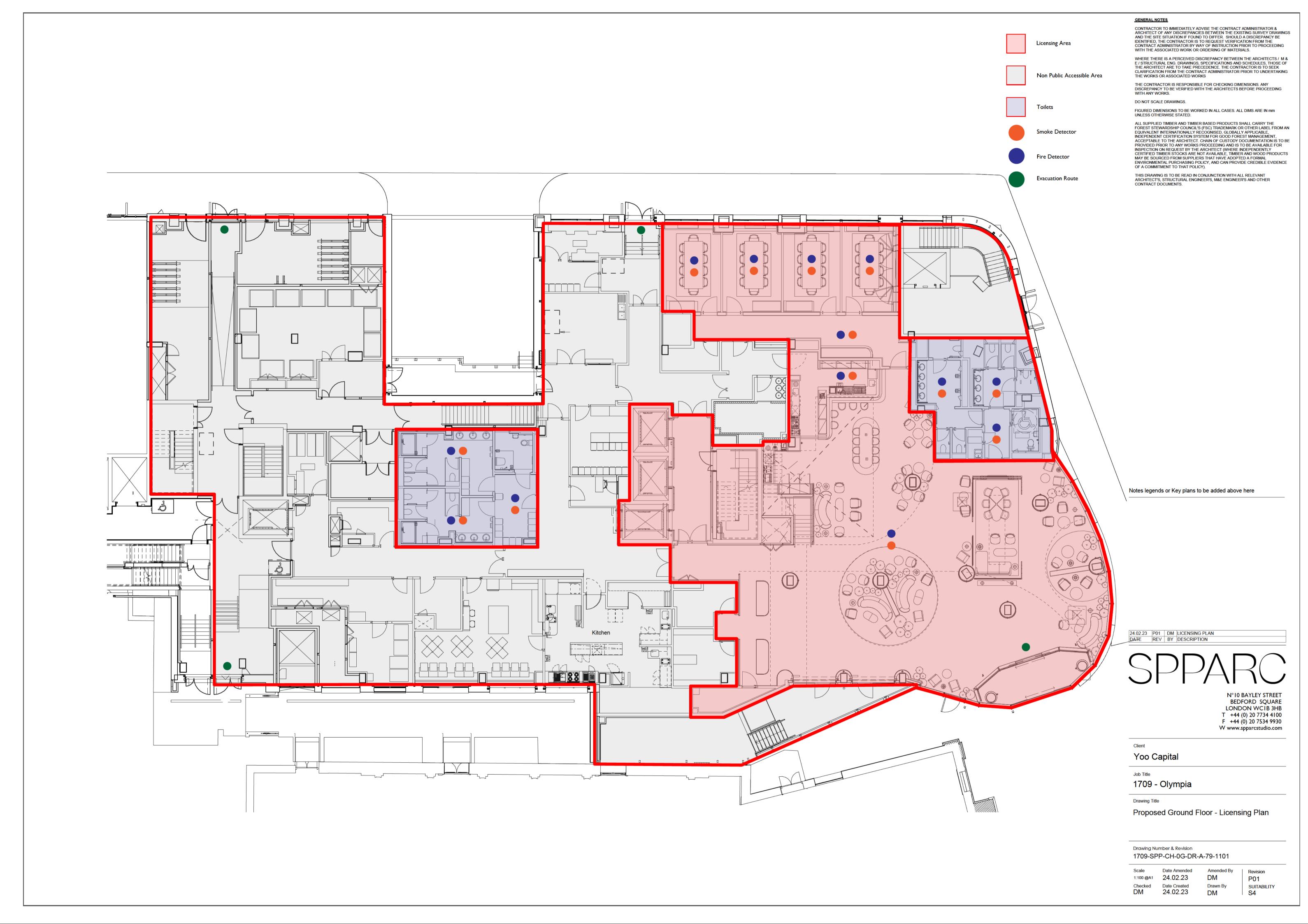
### Staff training

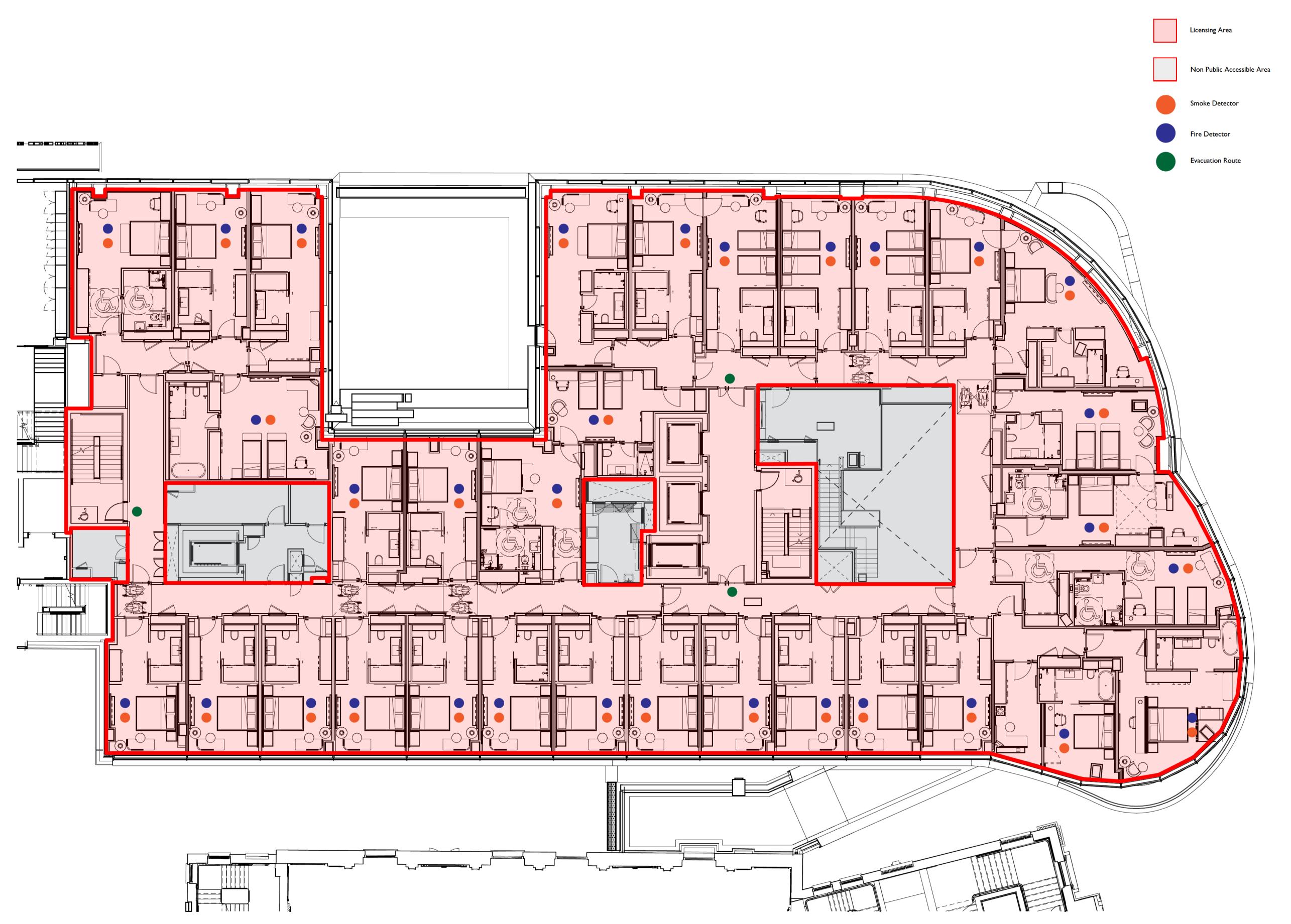
- 19. The Designated Premises Supervisor shall ensure that all existing staff, new staff, supervisors and managers responsible for selling alcohol receive a written/online induction in the law relating to alcohol sales prior to undertaking the sale of alcohol. This training shall include times of operation, licensable activities, relevant offences and conditions from the premises licence, in particular in relation to completion of the incident and refusals logs.
- 20. The premises licence holder shall ensure that the management team register and successfully complete the nationally recognised counter terrorism training product referred to as ACT eLearning package or can demonstrate that the ACT eLearning product has been successfully completed within the preceding 12 months and that all

staff employed by or at the premises complete the ACT eLearning within a reasonable period not exceeding 3 months from the day they start their employment.

### Striptease and nudity

21. No striptease, no nudity and all persons to be decently attired at all times.





CONTRACTOR TO IMMEDIATELY ADVISE THE CONTRACT ADMINISTRATOR & ARCHITECT OF ANY DISCREPANCIES BETWEEN THE EXISTING SURVEY DRAWINGS AND THE SITE SITUATION IF FOUND TO DIFFER. SHOULD A DISCREPANCY BE IDENTIFIED, THE CONTRACTOR IS TO REQUEST VERIFICATION FROM THE CONTRACT ADMINISTRATOR BY WAY OF INSTRUCTION PRIOR TO PROCEEDING WITH THE ASSOCIATED WORK OR ORDERING OF MATERIALS.

WHERE THERE IS A PERCEIVED DISCREPANCY BETWEEN THE ARCHITECTS / M & E / STRUCTURAL ENG. DRAWINGS, SPECIFICATIONS AND SCHEDULES, THOSE OF THE ARCHITECT ARE TO TAKE PRECEDENCE. THE CONTRACTOR IS TO SEEK CLARIFICATION FROM THE CONTRACT ADMINISTRATOR PRIOR TO UNDERTAKING THE WORKS OR ASSOCIATED WORKS

THE CONTRACTOR IS RESPONSIBLE FOR CHECKING DIMENSIONS. ANY DISCREPANCY TO BE VERIFIED WITH THE ARCHITECTS BEFORE PROCEEDING WITH ANY WORKS.

DO NOT SCALE DRAWINGS.

UNLESS OTHERWISE STATED.

FIGURED DIMENSIONS TO BE WORKED IN ALL CASES. ALL DIMS ARE IN mm

ALL SUPPLIED TIMBER AND TIMBER BASED PRODUCTS SHALL CARRY THE FOREST STEWARDSHIP COUNCIL'S (FSC) TRADEMARK OR OTHER LABEL FROM AN EQUIVALENT INTERNATIONALLY RECOGNISED, GLOBALLY APPLICABLE, INDEPENDENT CERTIFICATION SYSTEM FOR GOOD FOREST MANAGEMENT, ACCEPTABLE TO THE ARCHITECT. CHAIN OF CUSTODY DOCUMENTATION IS TO BE PROVIDED PRIOR TO ANY WORKS PROCEEDING AND IS TO BE AVAILABLE FOR INSPECTION ON REQUEST BY THE ARCHITECT (WHERE INDEPENDENTLY CERTIFIED TIMBER STOCKS ARE NOT AVAILABLE, TIMBER AND WOOD PRODUCTS MAY BE SOURCED FROM SUPPLIERS THAT HAVE ADOPTED A FORMAL ENVIRONMENTAL PURCHASING POLICY, AND CAN PROVIDE CREDIBLE EVIDENCE OF A COMMITMENT TO THAT POLICY).

THIS DRAWING IS TO BE READ IN CONJUNCTION WITH ALL RELEVANT ARCHITECT'S, STRUCTURAL ENGINEER'S, M&E ENGINEER'S AND OTHER CONTRACT DOCUMENTS.

Notes legends or Key plans to be added above here

24.02.21 P01 DM LICENSING PLAN DATE REV BY DESCRIPTION

N°10 BAYLEY STREET BEDFORD SQUARE LONDON WCIB 3HB T +44 (0) 20 7734 4100 F +44 (0) 20 7534 9930 W www.spparcstudio.com

Yoo Capital

Job Title

1709 - Olympia

Drawing Title

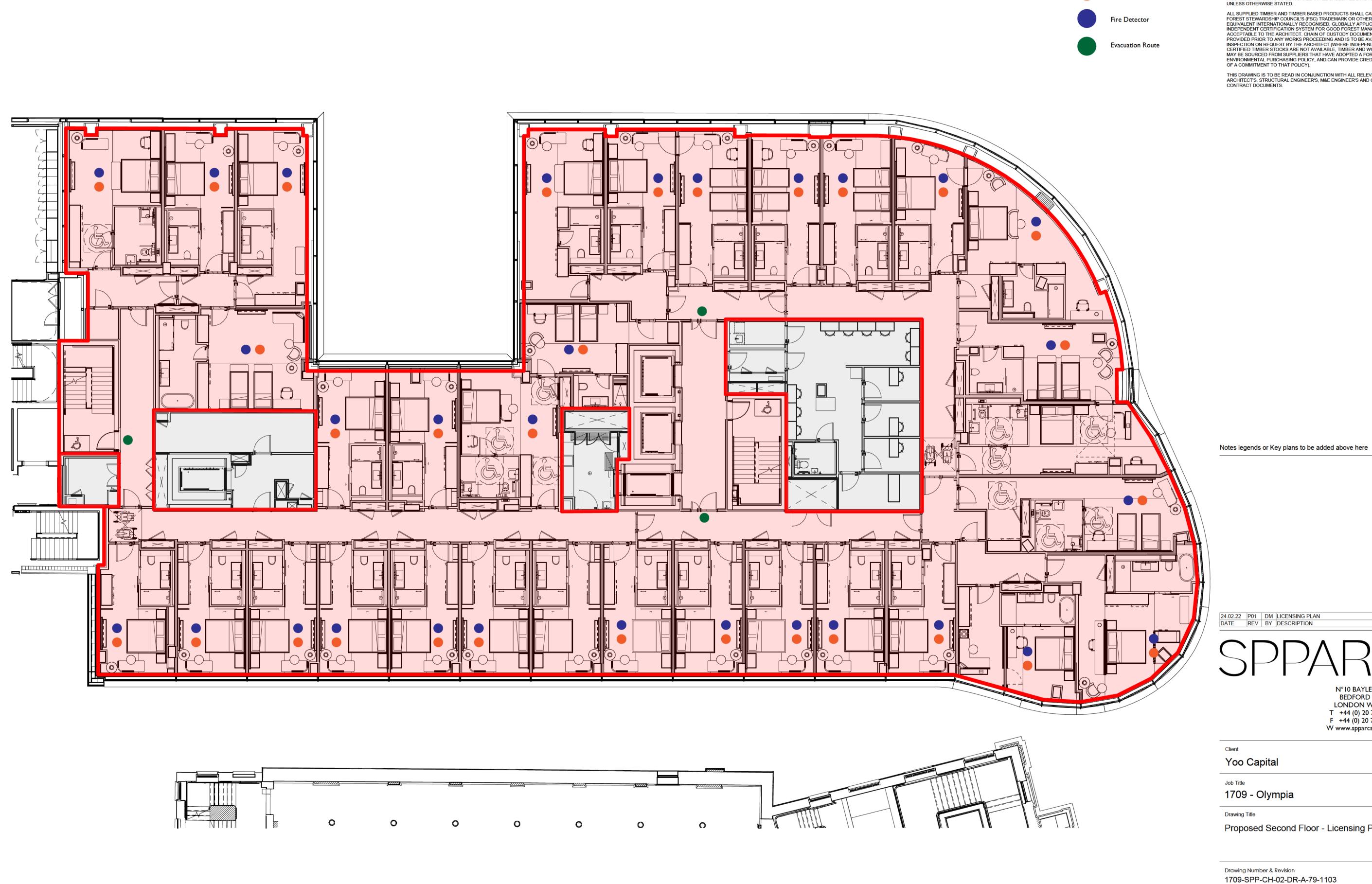
Proposed First Floor - Licensing Plan

Drawing Number & Revision 1709-SPP-CH-01-DR-A-79-1102

Date Created **24.02.21** 

Drawn By DM

SUITABILITY S4



Licensing Area

Non Public Accessible Area

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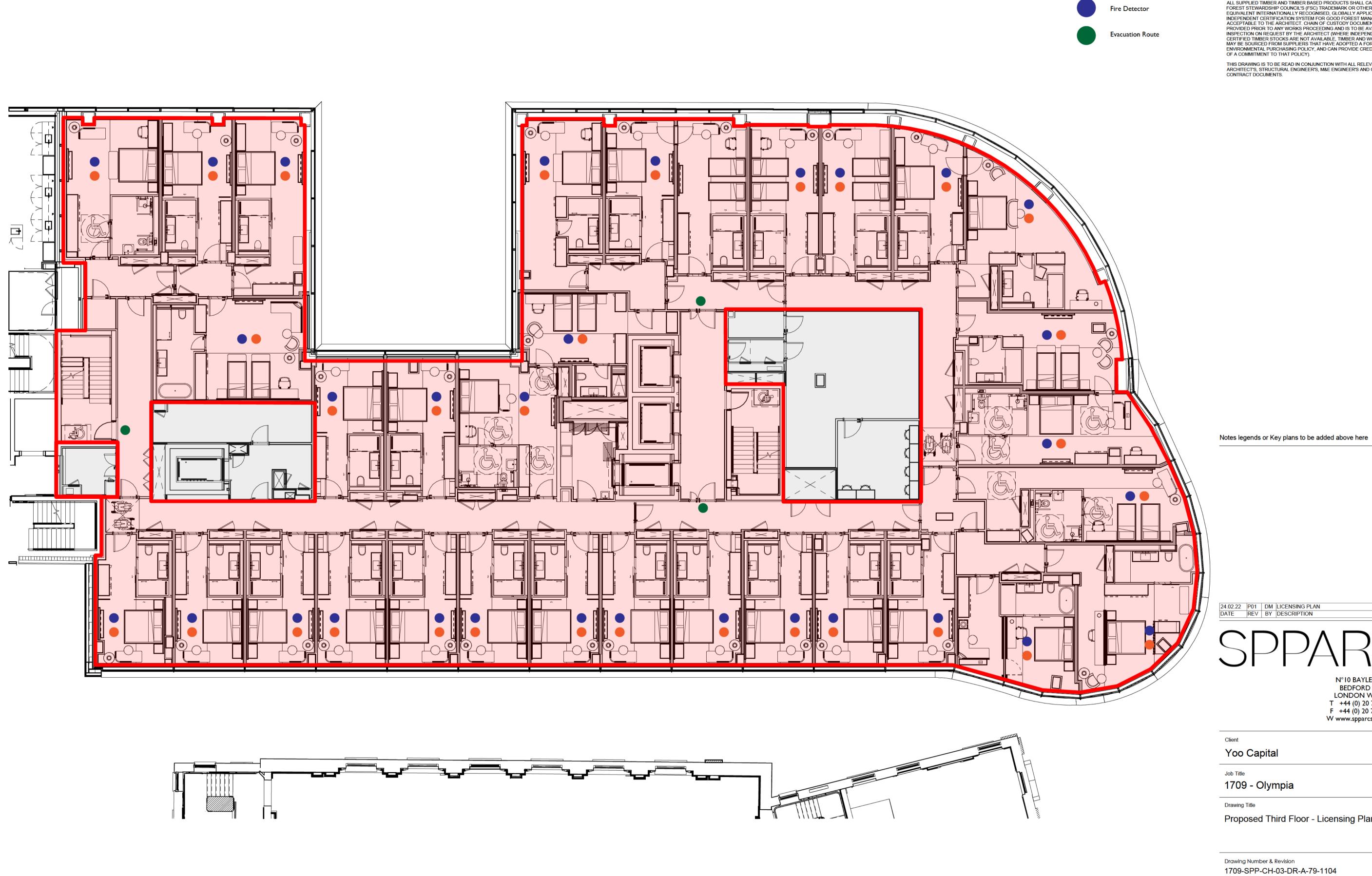
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SUITABILITY

Proposed Second Floor - Licensing Plan

Date Created **24.02.22** Drawn By DM



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Proposed Third Floor - Licensing Plan

Date Created 24.02.22 Drawn By

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Licensing Area

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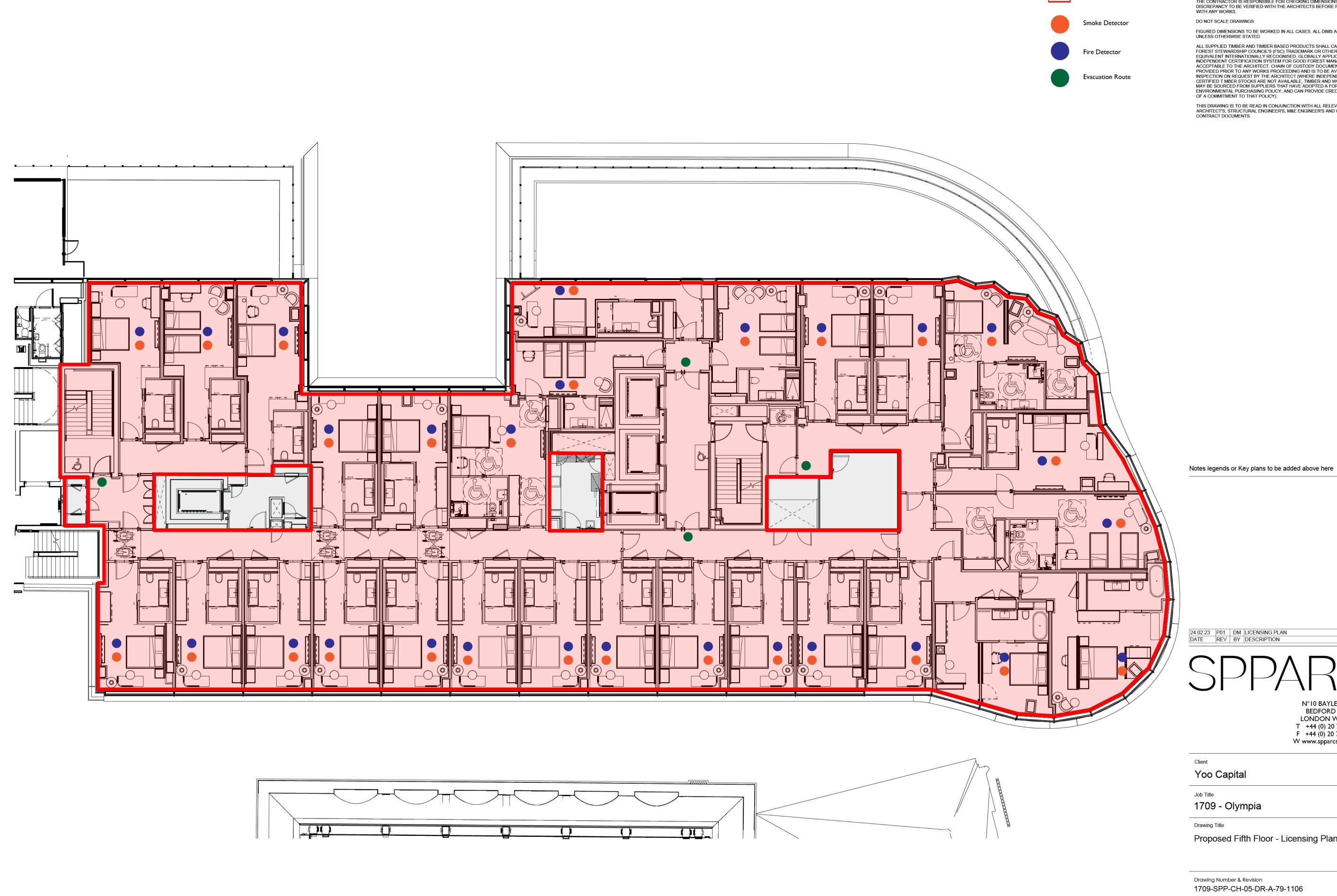
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Proposed Fourth Floor - Licensing Plan

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SUITABILITY S4



Licensing Area

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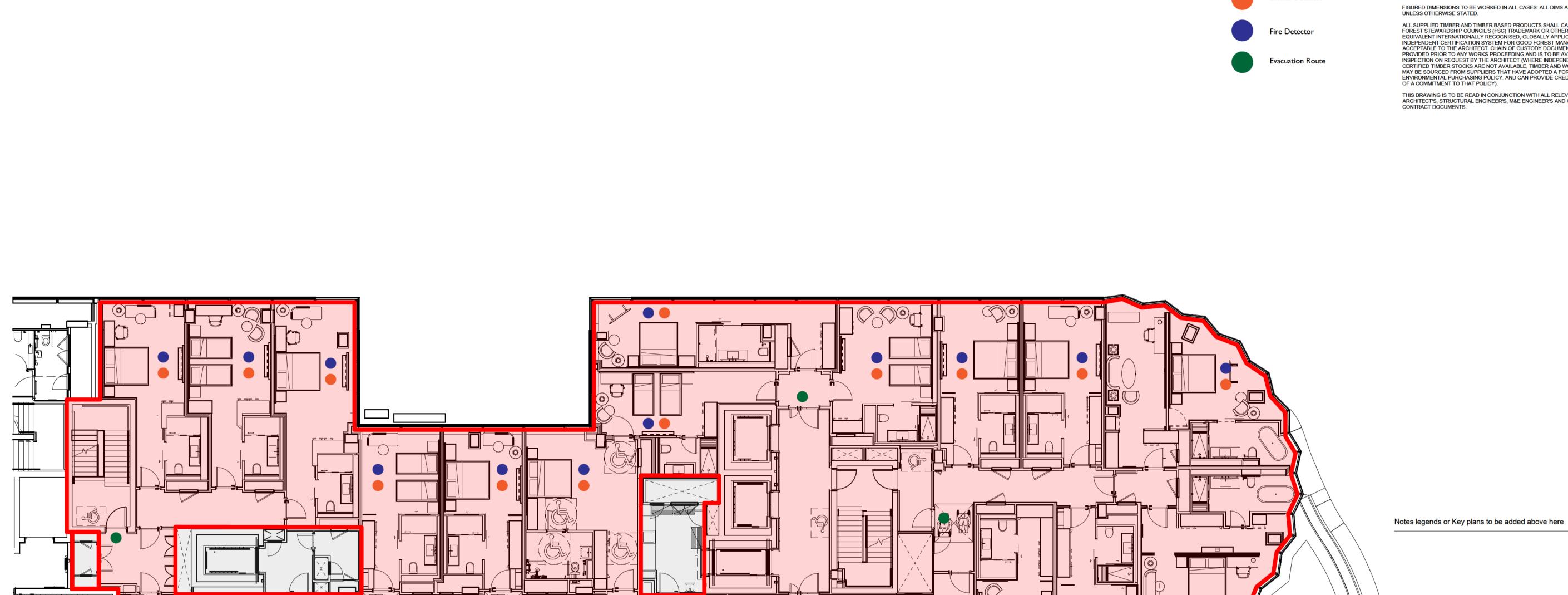
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Proposed Fifth Floor - Licensing Plan

1709-SPP-CH-05-DR-A-79-1106

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Licensing Area

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24.02.23 P01 DM LICENSING PLAN DATE REV BY DESCRIPTION

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Yoo Capital

Job Title

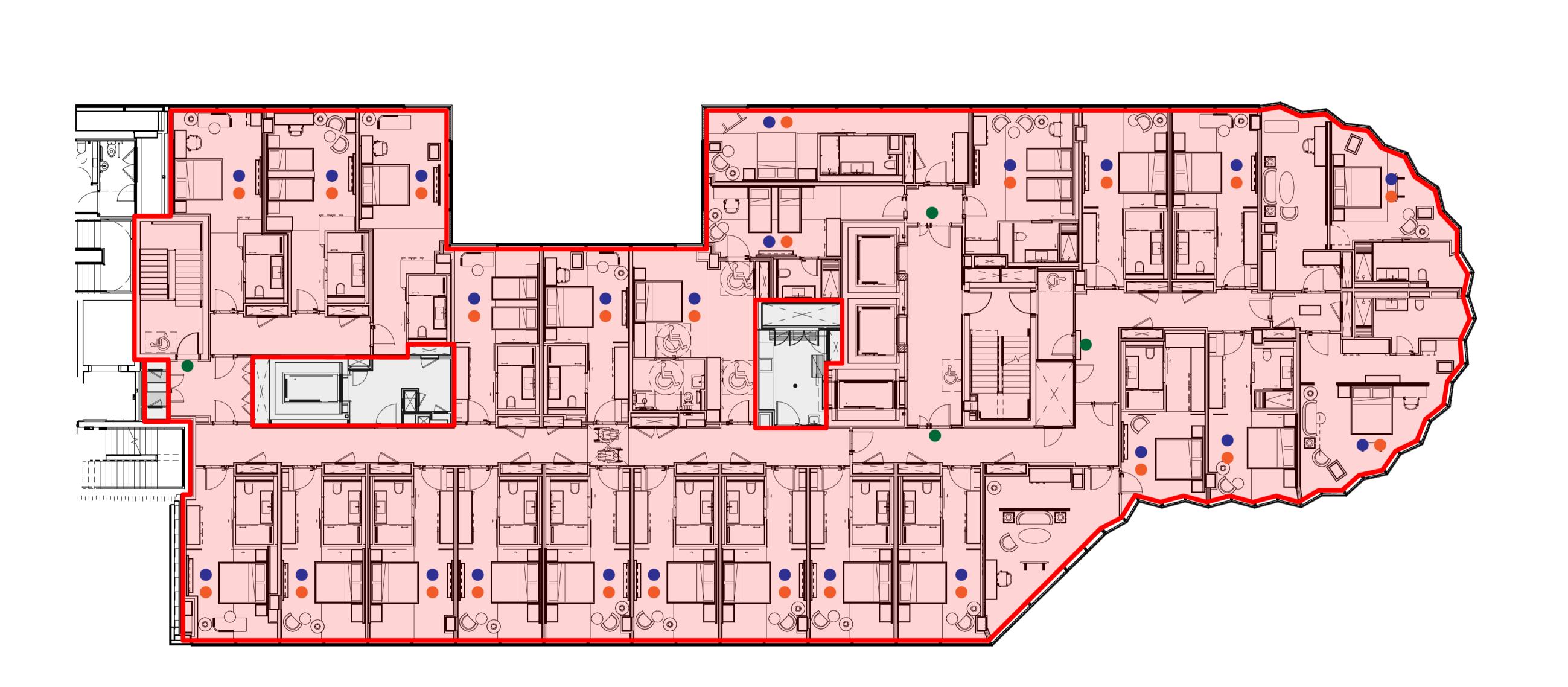
1709 - Olympia

Drawing Title

Proposed Sixth Floor - Licensing Plan

Drawing Number & Revision 1709-SPP-CH-06-DR-A-79-1107

Date Created 24.02.23 Checked DM SUITABILITY S4 Drawn By DM



Licensing Area

**Evacuation Route** 

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Job Title

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Drawing Title

Proposed Seventh Floor - Licensing Plan

Drawing Number & Revision 1709-SPP-CH-07-DR-A-79-1108

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SUITABILITY S4