

07358

pd cheque 250.00  
no. 1  
3/7/14



Intelligent Architecture  
& Surveying

Our Ref: MA/1099

~~25th June 2014~~

1st July 2014

Licensing Authority  
Brentwood Borough Council,  
Town Hall, Ingrave Road,  
Brentwood, Essex  
CM15 8AY

Dear Sirs or Madam,

**Re: Application for a Premises Licence at 72 – 74 Ongar Road Brentwood CM15 9AX**

I enclose herewith the formal Application for Premises License at above property. Please find attached copy of the following;

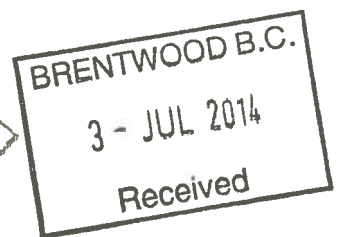
- Copy of the application
- Consent of individual to being specified as premises supervisor
- Floor Plan
- Cheque in the sum of £250.00p.

Should you have any queries or require additional information, please do not hesitate to contact me.

Please kindly acknowledge receipt of this Application and provide a receipt of the enclosed cheque

Yours faithfully

**Murat Aydemir BSc (Hons) MFPWS**  
Encs



*IntelliArch Ltd*







Brentwood Borough Council, Town Hall, Ingrave Road, Brentwood, Essex CM15 8AY

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 MR IDRAHM ASLAN 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: 72-74 ONGAR ROAD BRENTWOOD. Post town: ESSEX. Post code: CM15 9AX.

Telephone number at premises (if any): N/A. Non-domestic rateable value of premises: £ 15750.

Part 2 - Applicant details

Please state whether you are applying for a premises licence as

Please tick ✓ yes

- a) an individual or individuals\* [ ] please complete section (A)
b) a person other than an individual\*
i. as a limited company [x] please complete section (B)
ii. as a partnership [ ] please complete section (B)
iii. as an unincorporated association or [ ] please complete section (B)
iv. other (for example a statutory corporation) [ ] please complete section (B)
c) a recognised club [ ] please complete section (B)
d) a charity [ ] 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 tick  yes

- 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  Mrs  Miss  Ms  Other title (for example, Rev)

Surname  First names

Please tick  yes

I am 18 years old or over

Current postal address if different from premises address

Post Town  Postcode

Daytime contact telephone number

E-mail address (optional)

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr

Mrs

Miss

Ms

Other title   
(for example, Rev)

Surname

First names

Please tick  
✓ yes

I am 18 years old or over

Current postal  
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	NTK FOODS LTD
Address	72 - 74 ONGAR ROAD BRENTWOOD ESSEX CM15 9AX
Registered number (where applicable)	08842856
Description of applicant (for example partnership, company, unincorporated association etc)	COMPANY
Telephone number (if any)	-
E-mail address (optional)	-

### Part 3 Operating Schedule

When do you want the premises licence to start?

Day	Month	Year
01	08	2014

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

Day	Month	Year

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 (please read guidance note 1)

THE PREMISES IS A MID TERRACE SHOP WITH A SEPERATE FLAT UPSTAIRS.

THE PROPERTY HAS RECENTLY GONE THROUGH MAJOR REFURBISHMENT AND IT HAS A SUITABLE REAL FIRE EXIT.

THE PROPERTY AND THE BUSINESS WILL BE MANAGED AND OCCUPIED BY A FAMILY RUN BUSINESS.

THE PROPERTY IS APPROXIMATELY 110m<sup>2</sup> WITH FLAT ABOVE.

THE PROPERTY CONSIST OF 2 SUITABLE MEANS OF ESCAPE.

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 tick  yes

**Provision of regulated entertainment**

- 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 entertainment facilities for:**

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j)  
(if ticking yes, fill in box K)

**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

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of a play take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</b>	Indoors		
Day	Start	Finish		Outdoors		
Mon				<b>Please give further details here (please read guidance note 3)</b>	Both	
Tue						
Wed			<b>State any seasonal variations for performing plays (please read guidance note 4)</b>			
Thur						
Fri			<b>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 (please read guidance note 5)</b>			
Sat						
Sun						

# B

<b>Films</b> Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</b>	Indoors		
Day	Start	Finish		Outdoors		
Mon				<b>Please give further details here (please read guidance note 3)</b>	Both	
Tue						
Wed			<b>State any seasonal variations for the exhibition of films (please read guidance note 4)</b>			
Thur						
Fri			<b>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 (please read guidance note 5)</b>			
Sat						
Sun						



**C**

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			<b>Please give further details</b> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<b>State any seasonal variations for indoor sporting events</b> (please read guidance note 4)
Wed			
Thur			<b>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</b> (please read guidance note 5)
Fri			
Sat			
Sun			

**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick [Y]</b> (please read guidance note 2)	
Day	Start	Finish	Indoors	
Mon			Outdoors	
Tue			Both	
Wed			<b>Please give further details here</b> (please read guidance note 3)	
Thur				
Fri			<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 4)	
Sat				
Sun			<b>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 5)	

## E

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of live music take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</b>	Indoors	
Day	Start	Finish		Outdoors	
Mon			<b>Please give further details here (please read guidance note 3)</b>	Both	
Tue					
Wed			<b>State any seasonal variations for the performance of live music (please read guidance note 4)</b>		
Thur					
Fri			<b>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 5)</b>		
Sat					
Sun					

## F

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b>Will the playing of recorded music take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)</b>	Indoors	
Day	Start	Finish		Outdoors	
Mon			<b>Please give further details here (please read guidance note 3)</b>	Both	
Tue					
Wed			<b>State any seasonal variations for playing recorded music (please read guidance note 4)</b>		
Thur					
Fri			<b>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 5)</b>		
Sat					
Sun					

## G

Performances of dance Standard days and timings (please read guidance note 6)			Will the performance of dance take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)	Indoors	
Day	Start	Finish		Outdoors	
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for the performance of dance</b> (please read guidance note 4)		
Thur					
Fri			<b>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</b> (please read guidance note 5)		
Sat					
Sun					

## H

Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing		
Day	Start	Finish	Will this entertainment take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)	Indoor	
Mon					Outdoor
Tue			Both		
Wed			<b>Please give further details here</b> (please read guidance note 3)		
Thur					
Fri			<b>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</b> (please read guidance note 4)		

Sat			<p><b>Non standard timings. Where you intend to use the premises for the entertainment of 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 5)</b></p>
Sun			

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			<b>Please give a description of the facilities for making music you will be providing</b>							
			<b>Will the facilities for making music be indoors or outdoors or both – please tick [Y] (please read guidance note 2)</b>	<table border="1"> <tr> <td>Indoors</td> <td></td> </tr> <tr> <td>Outdoors</td> <td></td> </tr> <tr> <td>Both</td> <td></td> </tr> </table>	Indoors		Outdoors		Both	
Indoors										
Outdoors										
Both										
Day	Start	Finish								
Mon			<b>Please give further details here (please read guidance note 3)</b>							
Tue										
Wed			<b>State any seasonal variations for the provision of facilities for making music (please read guidance note 4)</b>							
Thur										
Fri			<b>Non standard timings. Where you intend to use the premises for provision of facilities for making music entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)</b>							
Sat										
Sun										

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			<b>Will the facilities for dancing be indoors or outdoors or both – please tick [Y] (see guidance note 2)</b>							
			<table border="1"> <tr> <td>Indoors</td> <td></td> </tr> <tr> <td>Outdoors</td> <td></td> </tr> <tr> <td>Both</td> <td></td> </tr> </table>	Indoors		Outdoors		Both		
Indoors										
Outdoors										
Both										
Day	Start	Finish	<b>Please give a description of the facilities for dancing you will be providing</b>							

Mon			<b>Please give further details here</b> (please read guidance note 3)
Tue			
Wed			<b>State any seasonal variations for providing dancing facilities</b> (please read guidance note 4)
Thur			
Fri			<b>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list</b> (please read guidance note 5)
Sat			
Sun			

## K

<b>Provision of facilities for entertainment of a similar description to that falling within I or J</b> Standard days and timings (please read guidance note 6)			<b>Please give a description of the type of entertainment facility you will be providing</b>	
Day	Start	Finish	<b>Will the entertainment facility be indoors or outdoors or both – please tick [Y]</b> (please read guidance note 2)	Indoor
				Outdoor
Mon				Both
Tue			<b>Please give further details here</b> (please read guidance note 3)	
Wed				
Thur			<b>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within j or k</b> (please read guidance note 4)	
Fri				
Sat			<b>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times to those listed in the column on the left, please list</b> (please read guidance note 5)	
Sun				

**L**

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick [Y] (please read guidance note 2)	Indoors		
Day	Start	Finish		Outdoors		
Mon			<b>Please give further details here</b> (please read guidance note 3)	Both		
Tue						
Wed				<b>State any seasonal variations for the provision of late night refreshment</b> (please read guidance note 4)		
Thur						
Fri				<b>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat						
Sun						

**M**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			Will the sale of alcohol be for consumption (Please tick box Y) (please read guidance note 7)	On the premises	
Day	Start	Finish		Off the premises	
Mon	08.00	23.00	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)	Both	
Tue	08.00	23.00			
Wed	08.00	23.00			
Thur	08.00	23.00	<b>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</b> (please read guidance note 5)		
Fri	08.00	24.00			
Sat	08.00	24.00			

Sun	08.00	24.00	

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name..... IBRAHIM ASLAN.....

Address..... FLAT ABOVE 72-74 ONGAR ROAD.....  
BRENTWOOD.....

Postcode..... CM15 9AX.....

Personal Licence number(if known)..... LN/201100012.....

Issuing licensing authority (if known)..... ENFIELD COUNCIL.....

**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 8)

N/A

**O**

Hours premises are open to the public Standard timings (please read guidance note 6)			State any seasonal variation (please read guidance note 4)
Day	Start	Finish	
Mon	08.00	23.00	Non standard timings. Where you intend to use 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 5)
Tue	08.00	23.00	
Wed	08.00	23.00	
Thur	08.00	23.00	
Fri	08.00	24.00	
Sat	08.00	24.00	
Sun	08.00	24.00	

## 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 9)

- + THE PREMISES IS FITTED WITH A PANIC BUTTON LINK TO LOCAL POLICE STATION.
- + THE PREMISES IS FITTED WITH VIDEO CAMERA RECORDING 24/7 INSIDE AND OUTSIDE.
- + CHALLENGE 21 SCHEME WILL BE IN PLACE

b) The prevention of crime and disorder

- + FULL COLOR CCTV WILL BE FITTED WITH NOTICES DISPLAYED AROUND.
- + CHALLENGE 21 SCHEME IN PLACE & ID'S WILL BE ASKED IF NEEDED.
- + REFUSAL/INCIDENT BOOK WILL BE KEPT AND MADE AVAILABLE FOR INSPECTION
- + ALL STAFF WILL BE TRAINED AND RECORDS WILL BE KEPT.
- + STAFF WILL DISCOURAGE PERSONS DRINKING AND LOITERING OUTSIDE.
- + FULL BURGLAR ALARM WITH RED CABLE AND PANIC BUTTON TO BE FITTED.

c) Public safety

- + FULL FIRE ALARM IS INSTALLED WITH SERVICE LOG BOOK TO BE RETAINED.
- + FIRE FIGHTING EQUIPMENT WILL BE PROVIDED AROUND THE PROPERTY.
- + CORRECT SIGNAGE DISPLAYED AROUND THE PREMISES FOR EXIT ROUTE.
- + FULL FIRE RISK ASSESSMENT WILL BE CARRIED OUT.

d) The prevention of public nuisance

- + NOTICES DISPLAYED ASKING LEAVE QUIETLY.
- + NOT TO SELL ALCOHOL TO DRUNK PERSON AND NOT TO SERVE ANYONE PURCHASING ALCOHOL FOR UNDERAGE.
- + NOT TO ALLOW ANYONE DRINK ALCOHOL INSIDE/OUTSIDE PREMISES.
- + NOTICES WILL BE DISPLAYED STATING CCTV AND CHALLENGE 21 IS IN USE.

e) The protection of children from harm

- + AVOID STRONG LANGUAGE AND VIOLENCE IN THE PREMISES.
- + STAFF WILL BE TRAINED FOR THEIR ROLE AND RESPONSIBILITY.
- + TRAINING RECORDS WILL BE KEPT ON PREMISES.
- + CHILDREN UNDER 14 YEARS NOT ACCOMPANIED BY AN ADULT NOT TO BE PERMITTED OR REMAIN IN THE PREMISES AFTER 21:00.



Please tick ✓ yes

- 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 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

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 4 – Signatures (please read guidance note 10)

Signature of applicant or applicant’s solicitor or other duly authorised agent. (See guidance note 11) If signing on behalf of the applicant please state in what capacity.

Signature [Handwritten Signature]

Date 01/07/14

Capacity AUTHORISED AGENT

For joint applications signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant’s solicitor or other authorised agent. (please read guidance note 12) 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 13)	
MR MURAT AYDEMIR OF INTELLIARCH LTD 30 PEMBROKE AVENUE	
Post town ENFIELD	Post code EN1 4HB
Telephone number (if any) 07956 296 076      0208443 5882	
If you would prefer us to correspond with you by e-mail your e-mail address (optional) murataydemir1@hotmail.co.uk	



Brentwood Borough Council, Town Hall, Ingrave Road, Brentwood, Essex CM15 8AY

**Consent of individual to being specified as premises supervisor**

I, MR IBRAHIM ASLAN  
[full name of prospective premises supervisor]

of FLAT ABOVE 72-74 ONGAR ROAD BRENTWOOD CM15 9AX.  
[home address of prospective premises supervisor]

hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for

PREMISES LICENCE  
[type of application]

by IBRAHIM ASLAN  
[name of applicant]

relating to a premises licence ..... [number of existing licence, if any]

for.....  
[name and address of premises to which the application relates]

and any premises licence to be granted or varied in respect of this application made

by .....  
[name of applicant]

concerning the supply of alcohol at

NTX FOOD STORE 72-74 ONGAR ROAD BRENTWOOD  
[name and address of premises to which application relates] CM15 9AX

I also confirm that I am applying for, intend to apply for or currently hold a personal licence, details of which I set out below.

Personal licence number LN/201100012 [insert personal licence number, if any]

Personal licence issuing authority ENFIELD COUNCIL  
CIVIL CENTRE SILVER STREET

ENFIELD EN1 3XA 020 8379 1000  
[Insert name and address and telephone number of personal licence issuing authority, if any]

Signed 

Name (please print) MURAT AYDEMIR

Dated 01/07/14

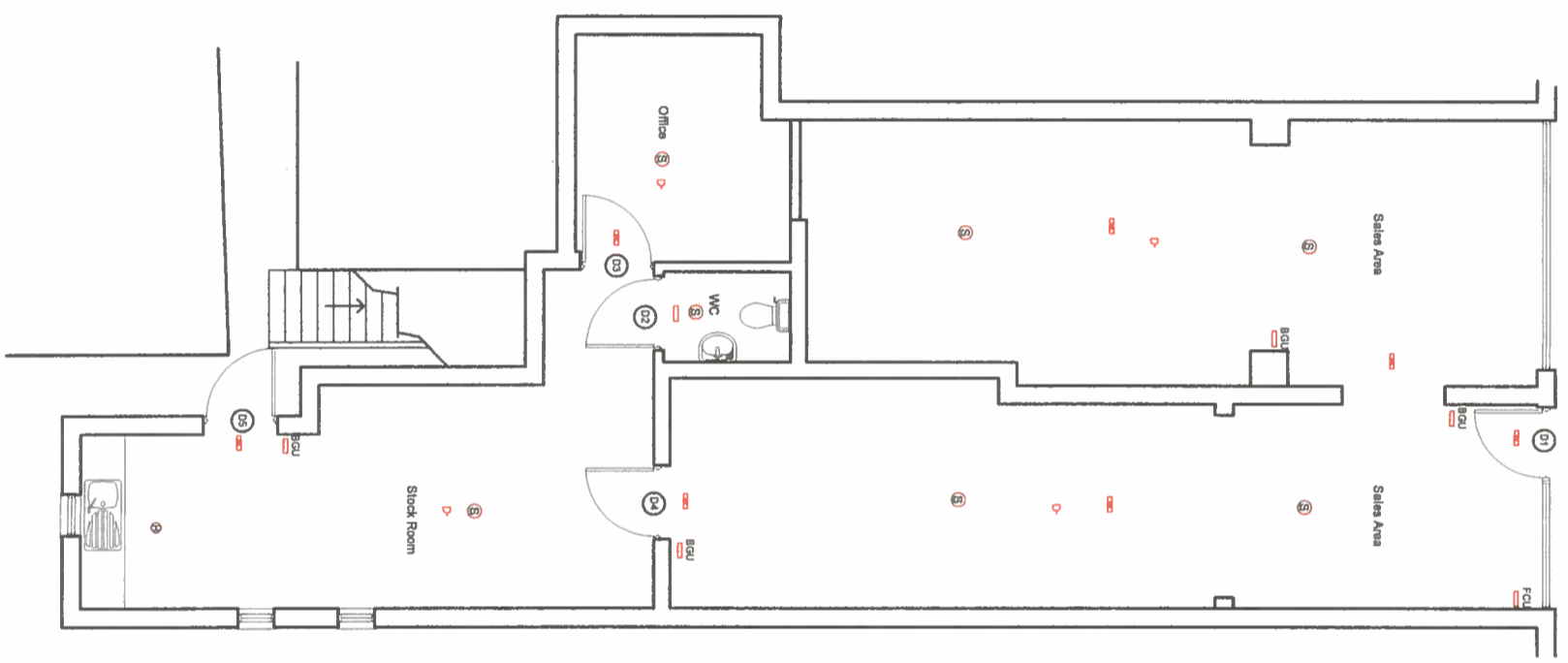


Scale: 1:100

**Notes**  
 All dimensions to be checked by the Contractor before construction proceeds.  
 This drawing is the copyright of IntelliArch Limited and shall not be anyway used or reproduced without their prior written consent.

rev	date	drawn

- Key**
- Emergency lighting
  - Emergency illuminated exit sign
  - Smoke detectors
  - Heat detectors
  - FCU Fire control unit
  - BGU Break glass unit
  - Fire alarm sounder



**FOR APPROVAL**

**IntelliArch Ltd**  
 IntelliArch Architecture and Surveying  
 30 Pembroke Avenue, Ebbw Vale, NP23 5PH  
 T: 0208 4435882 M: 07956 296 076 E: murat@intelliarch.co.uk  
 W: www.intelliarch.co.uk

Project: 72 - 74 Ongar Road  
 Brentwood CM15 9AX

**Proposed Floor Plans**

scale: 1:100 @ A3  
 date: March 2014  
 drawn: MA  
 checked: MA

drawn: MA  
 checked: MA  
 date: March 2014  
 scale: 1:100 @ A3  
 project: 72 - 74 Ongar Road  
 Brentwood CM15 9AX  
 IntelliArch Ltd  
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 30 Pembroke Avenue, Ebbw Vale, NP23 5PH  
 T: 0208 4435882 M: 07956 296 076 E: murat@intelliarch.co.uk  
 W: www.intelliarch.co.uk



Our Ref: MA/1099

7<sup>th</sup> July 2014

Licensing Authority  
Brentwood Borough Council,  
Town Hall, Ingrave Road,  
Brentwood, Essex  
CM15 8AY



Dear Sirs or Madam,

**Re: Application for a Premises Licence at 72 – 74 Ongar Road Brentwood CM15 9AX**

I enclose herewith a revised floor plan showing the fixtures and fittings including the CCTV through the shop.

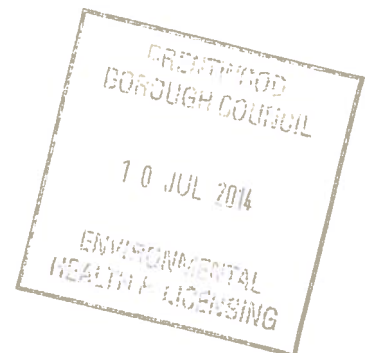
Should you have any queries or require additional information, please do not hesitate to contact me.

Yours faithfully

A handwritten signature in black ink, appearing to read "Murat Aydemir".

**Murat Aydemir BSc (Hons) MFPWS**

Encs



*IntelliArch Ltd*





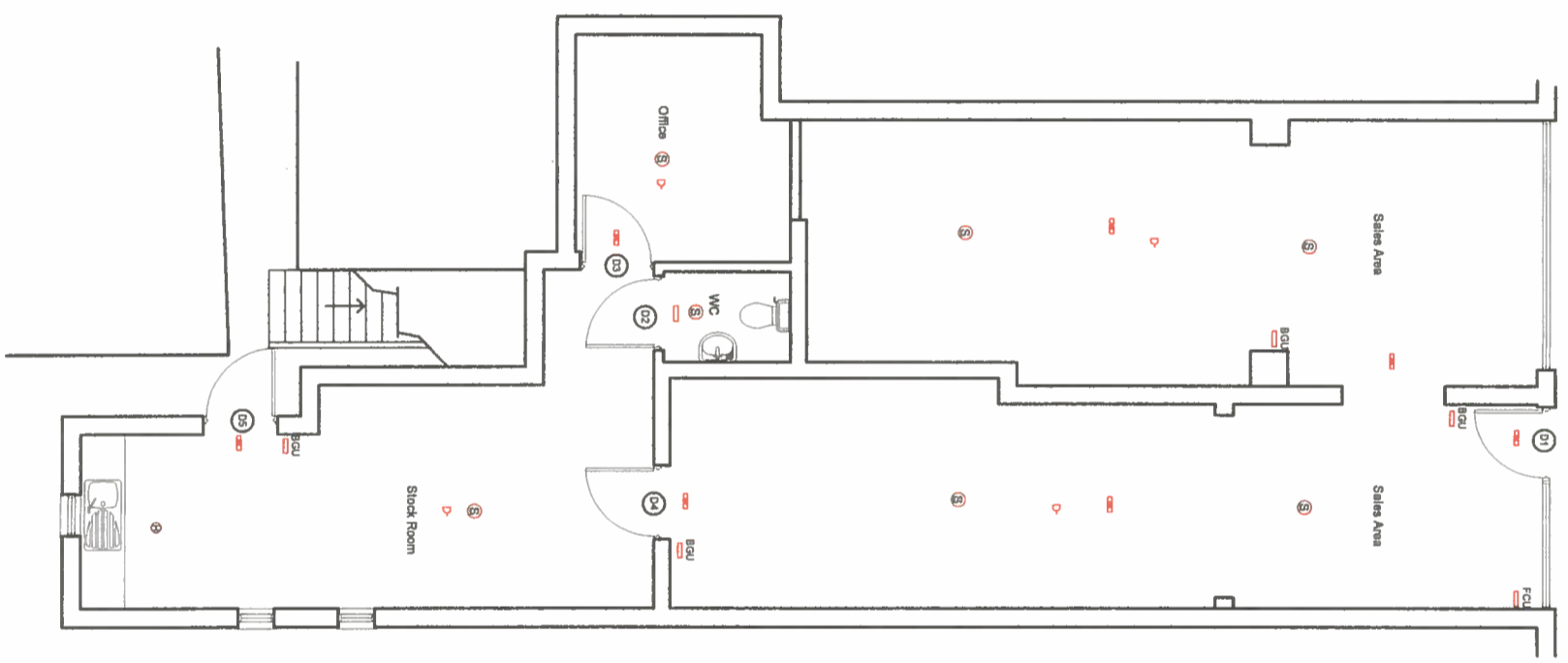


Scale: 1:100

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rev	date	drawn

- Key**
- Emergency lighting
  - Emergency illuminated exit sign
  - Smoke detectors
  - Heat detectors
  - FCU Fire control unit
  - BGU Break glass unit
  - Fire alarm sounder



**FOR APPROVAL**

**IntelliArch Ltd**  
 IntelliArch Architecture and Surveying  
 30 Pembroke Avenue, Ebbw Vale, NP23 5PH  
 T: 0208 4435882 M: 07956 296 076 E: murat@intelliarch.co.uk  
 W: www.intelliarch.co.uk

Project: 72 - 74 Ongar Road  
 Brentwood CM15 9AX

Scale: 1:100 @ A3  
 Date: March 2014  
 Drawn: MA  
 Check: CK

Proposed Floor Plans

Rev	Date	Drawn	Checked

1099-10





# PUBLIC NOTICE OF APPLICATION

## APPLICATION FOR A PREMISES LICENCE (Section 17, Licensing Act 2003)

Name of Applicant	IBRAHIM ASLAN
Postal address of premises or a description to enable the location to be identified.	72-74 ONGAR ROAD BRENTWOOD CM15 9AX
Statement of Relevant Licensable Activities which it is proposed will be carried on on or from the premises.	SALE OF ALCOHOL FROM 08.00 TO 23.00 MONDAY TO THURSDAY 08.00 TO 24.00 FRIDAY TO SUNDAY

The Licensing Register may be inspected at the Town Hall, Ingrave Road, Brentwood, Essex, CM15 8AY between 8.30 am and 5.00 pm Monday to Thursday and between 8.30 am and 4.30 pm Friday, excluding public holidays. Details are also provided on Brentwood Borough Council's website at [www.brentwood.gov.uk](http://www.brentwood.gov.uk).

Any representations by a Responsible Authority or Interested Party must be made in writing to the Licensing Authority at the above address by... 28/07/14...

It is an offence knowingly or recklessly to make a false statement in connection with an application punishable on summary conviction by a maximum fine of £5,000.

