

Tonbridge and Malling Application for a premises licence Licensing Act 2003

For help contact licensing.services@tmbc.gov.uk

Telephone: 01732 876368

i		* required information
Section 1 of 19		
You can save the form at any	time and resume it later. You do not need to	be logged in when you resume.
System reference	Not Currently In Use	This is the unique reference for this application generated by the system.
Your reference	WMM	You can put what you want here to help you track applications if you make lots of them. It is passed to the authority.
Are you an agent acting on b	pehalf of the applicant?	Put "no" if you are applying on your own behalf or on behalf of a business you own or work for.
Applicant Details		
* First name	Joseph	
*,Family name	Lefournour	
* E-mail	jle four nour@gmail.com	
Main telephone number	01622299017	Include country code.
Other telephone number	07415091876	
☐ Indicate here if you wo	uld prefer not to be contacted by telephone	
Are you:		
Applying as a businessApplying as an individu	or organisation, including as a sole trader ual	A sole trader is a business owned by one person without any special legal structure. Applying as an individual means you are applying so you can be employed, or for some other personal reason, such as following a hobby.
Applicant Business		
* Is your business registered in the UK with Companies House?		
* Registration number	08502920	
* Business name KKL & Co Ltd TA Where Memories Meet		If your business is registered, use its registered name.
* VAT number -	none	Put "none" if you are not registered for VAT.
* Legal status	Private Limited Company	ADMIN/LEGAL SERVICES
		2 8 APR 2014
		PASS TO CONTROL POPULATION

Continued from previous page		
* Your position in the business	General Manager	
Home country	United Kingdom	The country where the headquarters of your business is located.
Registered Address		Address registered with Companies House.
* Building number or name	188	·
* Street	Tonbridge Road	
District	Wateringbury	,
* City or town	Maidstone	,
County or administrative area		
* Postcode	ME185NS	
* Country	United Kingdom	
Section 2 of 19	:	
PREMISES DETAILS		
I/we, as named in section 1, ap described in section 2 below (t in accordance with section 12 of	ply for a premises licence under section 17 of the premises) and I/we are making this application the Licensing Act 2003.	ne Licensing Act 2003 for the premises on to you as the relevant licensing authority
Premises Address		
Are you able to provide a post	al address, OS map reference or description of t	he premises?
♠ Address ← OS ma	p reference C Description	
Postal Address Of Premises		
Building number or name	188 Tonbridge Road	
Street		
District	Wateringbury	
City or town	Maidstone	
County or administrative area		
Postcode	ME18 5NS	
Country	United Kingdom	
Further Details		
Telephone number	01622299017	
Non-domestic rateable value of premises (£)	3,950	

Sect	ion 3 of 19		
APP	LICATION DETAILS		
In w	nat capacity are you apply	ying for the premises licence?	
	An individual or individual	uals	
	A limited company		
	A partnership		
	An unincorporated asso	ociation	
	A recognised club		
	A charity		
	The proprietor of an edu	ucational establishment	
	A health service body		
	•	red under part 2 of the Care Standards Act an independent hospital in Wales	
	Social Care Act 2008 in r	red under Chapter 2 of Part 1 of the Health and respect of the carrying on of a regulated ning of that Part) in an independent hospital in	
	The chief officer of polic	e of a police force in England and Wales	
	Other (for example a sta	tutory corporation)	
Conf	irm The Following		
\boxtimes	I am carrying on or prop the use of the premises t	osing to carry on a business which involves for licensable activities	
	I am making the applica	tion pursuant to a statutory function	
	I am making the applicativirtue of Her Majesty's p	tion pursuant to a function discharged by rerogative	
Section	on 4 of 19		
NON	INDIVIDUAL APPLICAN	TS	
		address of applicant in full. Where appropriate give any registered number. In the case of ture (other than a body corporate), give the name and address of each party concerned.	a
Nonl	Individual Applicant's N	lame	
Name	ì	KKL & Co Ltd trading as Where Memories Meet	
Detai	is		
Regist applic	tered number (where cable)	08502920	
Descr	iption of applicant (for ex	xample partnership, company, unincorporated association etc)	

Continued from previous page	
Private Limited Company	
Address	
Building number or name	188 Tonbridge Road
Street	
District	Wateringbury
City or town	Maidstone
County or administrative area	
Postcode	ME185NS
Country	United Kingdom
Contact Details	
E-mail	joseph@wherememoriesmeet.com
Telephone number	01622299017
Other telephone number	07415091876
	Add another applicant
Section 5 of 19	
OPERATING SCHEDULE	
When do you want the premises licence to start?	28 / 05 / 2014 dd mm yyyy
If you wish the licence to be valid only for a limited period, when do you want it to end	dd mm yyyy
Provide a general description o	of the premises
licensing objectives. Where you	ses, its general situation and layout and any other information which could be relevant to the ur application includes off-supplies of alcohol and you intend to provide a place for olies you must include a description of where the place will be and its proximity to the
	area made up of a part cafe/part retail shop. It is utilized as tearoom and an Antique Shop. It ctive features of the building aimed at tourists.
Plans attached on this applicati	ion in Appendix (a) clearly show the premises and the proposed licensed area.
If 5,000 or more people are expected to attend the premises at any one time, state the number expected to attend	

: Continued from previous p	paae		
Section 6 of 19	/ug-m		
PROVISION OF PLAYS			
Will you be providing p	lays?		
	← No		
Standard Days And Tir	mings		
MONDAY			_ Give timings in 24 hour clock.
	Start 12:00	End 23:00	(e.g., 16:00) and only give details for the days
	Start	End	of the week when you intend the premises to be used for the activity.
TUESDAY	L	***************************************	•
	Start 12:00	End 23:00]
	Start	End	
WEDNESDAY			J
YALDIALOU!!	Start 12:00	End 23:00]
	Start	End 23.00]]
~!!!!DCDAV	Start	LINU [J
THURSDAY	2	5-4 22,00	1
	Start 12:00	End 23:00] 1
	Start	End	
FRIDAY	[ר
	Start 12:00	End 23:00	
	Start	End	
SATURDAY			_
	Start 12:00	End 23:00	
	Start	End	
SUNDAY			
	Start 12:00	End 23:00	
	Start	End	
Will the performance of	a play take place indoors or ou	utdoors or both?	Where taking place in a building or other
Indoors	← Outdoors	C Both	structure tick as appropriate. Indoors may include a tent.
	be authorised, if not already sta not music will be amplified or u		further details, for example (but not
We may have children's	entertainment provided on the	e premises in form of pla	ays or re-enactments for a family audience.

Continued from previous	Continued from previous page					
State any seasonal vari	State any seasonal variations for performing plays					
For example (but not e	xclusively) where the acti	ivity will occur on additional days during the summer months.				
New Years Eve: from er	nd of permitted hours on	New Year's Eve until the start of Permitted Hours on New Year's day.				
the column on the left,	list below	be used for the performance of a play at different times from those listed in ships				
roi example (but not e.	xciusively), where you wi	sh the activity to go on longer on a particular day e.g. Christmas eve.				
Section 7 of 19			4			
PROVISION OF FILMS	· · · · · · · · · · · · · · · · · · ·					
Will you be providing fi	lms?					
(Yes	← No					
Standard Days And Ti	mings					
MONDAY	Start 07:00	Give timings in 24 hour clock. End 23:00 (e.g., 16:00) and only give details for the day of the week when you intend the premises to be used for the activity.	rs			
TUESDAY						
	Start 07:00	End 23:00				
	Start	End				
WEDNESDAY						
	Start 07:00	End 23:00				
	Start	End				
THURSDAY	•					
	Start 07:00	End 23:00				
	Start	End End				
FRIDAY	· · · · · · · · · · · · · · · · · · ·					
	Start 07:00	End 23:00				
	Start	End				

Continued from previous page			
SATURDAY			
Start 07	7:00	End 23:00	
Start		End	
SUNDAY			
Start 07	2:00	End 23:00	
Start		End	
Will the exhibition of films take pl	ace indoors or outdoors or	both?	Where taking place in a building or other
(Indoors C	Outdoors C	Both	structure tick as appropriate. Indoors may include a tent.
			urther details, for example (but not
Vintage or classic films with a glas	s of wine or popcorn show	n once a week dur	ing with a predefined format. Seasonal
variation may result in shows bein	ig less frequent than stated	l above.	
1 I		_	
State any seasonal variations for t	he exhibition of film		
For example (but not exclusively)		ur on additional da	ys during the summer months.
			f Permitted Hours on New Year's day.
,			,
<u> </u>			
Non standard timings. Where the column on the left, list below	premises will be used for t	he exhibition of fil	m at different times from those listed in the
	where you wish the activit	ty to go on longer	on a particular day e.g. Christmas Eve.
1 of champic (but not exclusively),	The year man are active	., 55 5	, , , , , , , , , , , , , , , , , , , ,
Section 8 of 19	Address of the second s		
PROVISION OF INDOOR SPORTIN	NG EVENTS		
Will you be providing indoor spor	ting events?	M-10-11-11-11-11-11-11-11-11-11-11-11-11-	A de la constant de l
← Yes •	No		
Section 9 of 19			
PROVISION OF BOXING OR WRE	STLING ENTERTAINMENT	S	
Will you be providing boxing or w	restling entertainments?		
← Yes	No		
Section 10 of 19			
PROVISION OF LIVE MUSIC			

Continued from previou	ıs page		
Will you be providing	live music?		
(● Yes)	C No		
Standard Days And T	imings		
MONDAY			Give timings in 24 hour clock.
	Start 07:00	End 23:00	(e.g., 16:00) and only give details for the day
	Start	End	of the week when you intend the premises to be used for the activity.
TUESDAY			
	Start 07:00	End 23:00	
	Start	End	
WEDNESDAY			
	Start 07:00	End 23:00	
	Start	End	
THURSDAY		<u> </u>	•
	Start 07:00	End 23:00	
	Start	End	
FRIDAY	<u> </u>	•	
	Start 07:00	End 23:00	
	Start	End	
SATURDAY		<u> </u>	
	Start 07:00	End 23:00	
	Start	End	
SUNDAY	<u> </u>	<u> </u>	
	Start 07:00	End 23:00	
	Start	End	
Will the performance o	f live music take place indo	oors or outdoors or both?	Where taking place in a building or other
Indoors	C Outdoors	C Both	structure tick as appropriate. Indoors may include a tent.
	be authorised, if not alread not music will be amplified		urther details, for example (but not
Classical, jazz or Operat	ic live performances, held o	once or twice a month.	
State any seasonal varia	ations for the performance	of live music	
For example (but not ex	· κclusively) where the activi	ty will occur on additional da	ys during the summer months.

Continued from previous	page		
Non-standard timings.	Where the premises will b	oe used for the pe	erformance of live music at different times from those listed
in the column on the le	•		La constante de la constante de Chairtage Christian
	w		go on longer on a particular day e.g. Christmas Eve.
New Years Eve: from en	d of permitted hours on f	New Year's Eve un	ntil the start of Permitted Hours on New Year's day.
Section 11 of 19	A Administration of the Control of t		
PROVISION OF RECOR	DED MUSIC		
Will you be providing re	ecorded music?		
Yes	○ No		
Standard Days And Ti	mings		
MONDAY			Give timings in 24 hour clock.
	Start 07:00	End	(e.g., 16:00) and only give details for the days of the week when you intend the premises
	Start	End	to be used for the activity.
TUESDAY			
	Start 07:00	End	23:00
	Start	End	
WEDNESDAY			
	Start 07:00	End	23:00
	Start	End	
THURSDAY			
	Start 07:00	End	23:00
	Start	End	
FRIDAY			
	Start 07:00	End	23:00
	Start	End	
SATURDAY			
	Start 07:00	End	23:00
	Start	End	

Continued from previou	s page		
SUNDAY			
	Start 07:00	End 23:00	
	Start	End	
Will the playing of reco	orded music take place ind	loors or outdoors or both?	Where taking place in a building or other
, 🕟 Indoors	Outdoors	← Both	structure tick as appropriate. Indoors may include a tent.
	o be authorised, if not alrear r not music will be amplifie		urther details, for example (but not
State any seasonal vari	ations for playing recorded	d music	
For example (but not e	xclusively) where the activ	vity will occur on additional da	ys during the summer months.
Non-standard timings. in the column on the le		e used for the playing of recor	rded music at different times from those listed
For example (but not e	xclusively), where you wisl	h the activity to go on longer o	on a particular day e.g. Christmas Eve.
New Years Eve: from er	nd of permitted hours on N	lew Year's Eve until the start of	f Permitted Hours on New Year's day.
Section 12 of 19			
PROVISION OF PERFO			
	performances of dance?		
	○ No		
Standard Days And Ti	mings		
MONDAY			Give timings in 24 hour clock.
	Start 07:00	End 23:00	(e.g., 16:00) and only give details for the days of the week when you intend the premises
	Start		to be used for the activity.
TUESDAY			
	Start 07:00	End 23:00	
	Start	End	

			Will will be a second of the s
Continued from previous	; page		
WEDNESDAY			_
	Start 07:00	End 23:00	
	Start	End	
THURSDAY			
	Start 07:00	End 23:00	
	Start	End	
FRIDAY			
	Start 07:00	End 23:00	
	Start	End	
SATURDAY		1	•
	Start 07:00	End 23:00	
	Start	End	
SUNDAY			
	Start 07:00	End 23:00	
	Start	End	
Will the performance of	f dance take place indoors or outdoo		Where taking place in a building or other
• Indoors	Outdoors C	Both	structure tick as appropriate. Indoors may include a tent.
State type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.			
State any seasonal varia	ations for the performance of dance		
For example (but not ex	xclusively) where the activity will occ	ur on additional da	ays during the summer months.
Non-standard timings. It the column on the left,		the performance o	f dance at different times from those listed in
For example (but not ex	clusively), where you wish the activi	ty to go on longer	on a particular day e.g. Christmas Eve.
New Years Eve: from end	d of permitted hours on New Year's E	Eve until the start o	of Permitted Hours on New Year's day.

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Section 13 of 19			4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -
PROVISION OF ANYTH	IING OF A SIMILAR DESC	RIPTION TO LIVE MUSIC,	RECORDED MUSIC OR PERFORMANCES OF
Will you be providing a performances of dance	nything similar to live mu: ?	sic, recorded music or	
Yes	← No		
Standard Days And Ti	mings		
MONDAY			Cive timings in 24 hours alogs
	Start 07:00	End 23:00	Give timings in 24 hour clock. (e.g., 16:00) and only give details for the days
	Start	End	of the week when you intend the premises to be used for the activity.
TUESDAY			
	Start 07:00	End 23:00	
	Start	End	
WEDNESDAY		 	
	Start 07:00	End 23:00	
	Start	End	
THURSDAY	<u> </u>	<u> </u>	
	Start 07:00	End 23:00	
	Start	End	
FRIDAY		<u> </u>	
	Start 07:00	End 23:00	
	Start	End	Annana anna
SATURDAY		•	
	Start 07:00	End 23:00	
	Start	End	
SUNDAY	<u> </u>	<u> </u>	
	Start 07:00	End 23:00	
	Start	End	
Give a description of th	e type of entertainment th	nat will be provided	
Comedy Acts, Cabaret, I	Magic etc		
Will this entertainment	take place indoors or outc	loors or both?	Where taking place in a building or other structure tick as appropriate. Indoors may
Indoors	Outdoors	← Both	include a tent.

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				ther details, for example (but not
			v-117	
i i				
ŕ	ations for entertainmer			
For example (but not e	xclusively) where the a	ctivity will occur on	additional days 	during the summer months.
Non-standard timings. on the left, list below	Where the premises wi	ll be used for entert	ainment at diffe	erent times from those listed in the column
,	volusively) where you y	wish the activity to c	no on longer on	a particular day e.g. Christmas Eve.
				ermitted Hours on New Year's day.
New Years 2ve. Holli Cr	ia oi perimittea nours o	THIRDY TOURS EVE OR	itii tric start or r	erranted riours or riew rears day.
Section 14 of 19			:	
LATE NIGHT REFRESH	MENT		•	
Will you be providing la				
← Yes	No			
Section 15 of 19	·			
SUPPLY OF ALCOHOL	1			
Will you be selling or su	ipplying alcohol?		and the second s	
Yes	← No			
Standard Days And Ti	mings			
MONDAY			c	ive timings in 24 hour clock.
	Start 07:00	End	23:30 (€	e.g., 16:00) and only give details for the days
	Start	End		f the week when you intend the premises be used for the activity.
TUESDAY				, 50 4504 70, 1110 4011710,1
TOLSDAT	Start 07:00	End	23:30	
			[23.30	
	Start	End		
WEDNESDAY				
	Start 07:00	End	23:30	
	Start	End		

Continued from previous page			
THURSDAY			
Start	07:00	End 23:30	
Start		End	
FRIDAY	<u> </u>	t	
	07:00	End 23:30	
	[07.00		
Start		End	
SATURDAY			
Start	07:00	End 23:30	
Start		End	
SUNDAY			
Start	07:00	End 23:30	
Start		End	
Will the sale of alcohol be for co	onsumption:		If the sale of alcohol is for consumption on
	·	Onth	the premises select on, if the sale of alcohol
C On the premises	C Off the premises	Both	is for consumption away from the premises select off. If the sale of alcohol is for
			consumption on the premises and away
			from the premises select both.
State any seasonal variations			
For example (but not exclusive	ly) where the activity will occu	ur on additional da	ys during the summer months.
Non-standard timings. Where t column on the left, list below	he premises will be used for t	he supply of alcoh	ol at different times from those listed in the
For example (but not exclusive	ly), where you wish the activit	y to go on longer	on a particular day e.g. Christmas Eve.
New Years Eve: from end of per	mitted hours on New Year's E	ve until the start o	f Permitted Hours on New Year's day.
		····	
State the name and details of the licence as premises supervisor	he individual whom you wish	to specify on the	
Name			
First name	Joseph		
Family name	Lefournour		

Continued from previous page	***************************************		
Enter the contact's address			
Building number or name	Flat 2, 1 Redhill		
Street			
District]
City or town	Maidstone		
County or administrative area			
Postcode	ME185NN		
Country	United Kingdom		
Personal Licence number (if known)			
Issuing licensing authority (if known)			
PROPOSED DESIGNATED PRE	MISES SUPERVISOR CONS	ENT	
How will the consent form of the supplied to the authority?	ne proposed designated pre	emises supervisor	
Electronically, by the prop	posed designated premises	supervisor	
As an attachment to this	application		
Reference number for consent form (if known)			If the consent form is already submitted, ask the proposed designated premises supervisor for its 'system reference' or 'your reference'.
Section 16 of 19			TOTAL TITLE
ADULT ENTERTAINMENT			
Highlight any adult entertainm premises that may give rise to c			nt or matters ancillary to the use of the
Give information about anythin rise to concern in respect of chi (but not exclusively) nudity or s	Idren, regardless of whether	r you intend childre	y to the use of the premises which may give on to have access to the premises, for example gambling machines etc.
Section 17 of 19			
HOURS PREMISES ARE OPEN T	O THE PUBLIC		
Standard Days And Timings			
MONDAY			Give timings in 24 hour clock.
Start [07:00	End 23:30 End	(e.g., 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
		L	

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TUESDAY		
Sta	rt 07:00	End 23:30
Star	rt	End
WEDNESDAY		
Star	rt 07:00	End 23:30
Star	rt	End
THURSDAY		
	rt 07:00	End 23:30
Sta		End
FRIDAY		L
	rt 07:00	End 23:30
Star	•	End End
SATURDAY	. [07.00	5-d 22.20
	rt 07:00	End 23:30
Star.	rt	End
SUNDAY		r
Star	rt 07:00	End 23:30
Star	rt	End
State any seasonal variations	S	
For example (but not exclusi	ively) where the activity will o	ccur on additional days during the summer months.
those listed in the column or	n the left, list below	ises to be open to the members and guests at different times from ivity to go on longer on a particular day e.g. Christmas Eve.
		's Eve until the start of Permitted Hours on New Year's day.
Section 18 of 19		
LICENSING OBJECTIVES		
Describe the steps you inter	nd to take to promote the fou	r licensing objectives:
a) General – all four licensing	g objectives (b,c,d,e)	

Continued from previous page...

List here steps you will take to promote all four licensing objectives together.

Appropriate training of key members of staff in their responsibilities under the licensing Act 2003 to ensure that the Four Licensing objectives are promoted during the operation of Regulated activities under the Premises License.

b) The prevention of crime and disorder

The premises will operate a challenge 25 scheme with regards to the sale of Alcohol with clear and appropriate signage to the public informing them of the operation of the above scheme.

Staff will not serve any persons who are deemed to be clearly under the influence of alcohol or under age. A refusals register will be maintained at the premises available for viewing at a reasonable time by the police, Licensing Authorities or any other party with similar authority.

The refusal register will contain the following: a) Time of Refusal; b) name or description of persons refused sale; c) item refused; d) reason for refusal; e) name of staff making the refusal and supervisor on duty will sign or countersign the entries n the refusal register at the end of every shift.

c) Public safety

All staff are trained and made aware of their responsibilities under the health and Safety Legislation.

d) The prevention of public nuisance

The Premises License Holder will act in accordance with the relevant statutory bodies to minimize the impact of operation of a premises license on those that live / work in the vicinity of the premises in particular our next door neighbors with whom we share a thin wall. For each event we shall ensure that all that live and work in the vicinity are informed before hand start times and end times, and staff will be trained to ensure that such times are adhered to.

All regulated live or recorded music will be indoors. The Premises license holder will work and liaise with the Environmental Health office to ensure minimal disturbance to the neighbors.

e) The protection of children from harm

Where there is event of an adult nature no persons under the age of 18 will be permitted into the premises. In addition most of the entertainment will be geared to a family environment. We will work with relevant authorities to ensure that all rules and regulation with regards to our practices and routines are in line with latest guidelines with regards to protecting children from harm / harmful content.

Section 19 of 19

PAYMENT DETAILS

This fee must be paid to the authority. If you complete the application online, you must pay it by debit or credit card.

Rateable value of £0 - £4300 Band A: £100

Rateable value of £4301 - £33000 Band B: £190

Rateable value of £33001 - £87000 Band C: £315

Rateable value of £87001 - £125000 Band D: £450

Rateable value of £125000 and above Band E: £635

* Fee amount (£)

100.00

Continued from previous page	·
ATTACHMENTS	
AUTHORITY POSTAL ADDRES	S
Address	
Building number or name	
Street	
District	
City or town	
County or administrative area	
Postcode	
Country	United Kingdom
DECLARATION	
M. A. M. A.	
This section should be complete behalf of the applicant?"	ted by the applicant, unless you answered "Yes" to the question "Are you an agent acting on
* Full name	
* Capacity	
Date (dd/mm/yyyy)	
* Full name	
* Capacity	
Date (dd/mm/yyyy)	
	Remove this signatory
	Add another signatory
Once you're finished you need 1. Save this form to your composition.	
	uk/apply-for-a-licence/premises-licence/tonbridge-and-malling/apply-1 to upload this file
and continue with your applica	
	nave all your supporting documentation to hand.
	SUMMARY CONVICTION TO A FINE NOT EXCEEDING LEVEL 5 ON THE STANDARD OF THE LICENSING ACT 2003, TO MAKE A FALSE STATEMENT IN OR IN CONNECTION