[Insert name and address of relevant licensing authority and its reference number (optional)]

Application for the review of a premises licence or club premises certificate 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 Andrew Tutton

(Insert name of applicant)

apply for the review of a premises licence under section 51 / apply for the review of a club premises certificate under section 87 of the Licensing Act 2003 for the premises described in Part 1 below (delete as applicable)				
Part 1 – Premises or club premises details				
Postal address of premises or, if none, ordnane	ce survey map reference or description			
Desh, 68-70 Hight Street, West Malling, Kent, ME19 6LU				
Post town West Malling	Post code (if known) ME19 6LU			
Name of premises licence holder or club holding club premises certificate (if known) Mr Sheikh ALAM				
Number of premises licence or club premises certificate (if known) 18/01283/PREM				
Part 2 - Applicant details				
I am	Please tick ✓ yes			
1) an individual, body or business which is not a responsible authority (please read guidance note 1, and complete (A) or (B) below)				
2) a responsible authority (please complete (C) below)				
3) a member of the club to which this application (please complete (A) below)	relates			

(A) DETAILS OF INDIVIDUAL APPLICANT (fill in as applicable)				
Please tick ✓ yes				
Mr Mrs Miss Miss	Ms Other title (for example, Rev)			
Surname	First names			
I am 18 years old or over	Please tick ✓ yes			
Current postal address if different from premises address				
Post town	Post Code			
Daytime contact telephone number				
E-mail address (optional)				
(B) DETAILS OF OTHER APPLICANT				
Name and address				
Name and address				
Name and address				
Name and address				
Name and address				
Name and address Telephone number (if any)				

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Name and address	
Andrew Tutton	
Immigration Officer	
Southeast Immigration Compliance and Enforcement (ICE)	Team
Immigration Enforcement	
Telephone number (if any)	
0300 106 3199	
E mail address (antional)	
E-mail address (optional)	
This application to review relates to the following licensi	ng objective(s)
This application to review relates to the following needs	
	Please tick one or more boxes ✓
1) the prevention of crime and disorder	
2) public safety	
3) the prevention of public nuisance	H
4) the protection of children from harm	H
4) the protection of children from harm	

Please state the ground(s) for review (please read guidance note 2)

On 24th May 2023 a team of Immigration Officers from Southeast ICE Team accompanied by officers from Tonbridge and Malling Borough Council Licensing Team conducted an enforcement visit to the above restaurant following receipt of intelligence that the business was employing immigration offenders.

Entry was gained to the premises at 18:50 hours under fully informed consent provided by the restaurant manager. Officers screened the staff working at the restaurant. Three workers were identified as possible immigration offenders. Two of these workers were arrested and interviewed with regard to their employment at the restaurant. There was insufficient evidence to establish whether the third worker was working in breach of the terms of his student visa and no further action was taken with regard to this worker. The director of the company running the restaurant (Sophia May Ltd), Mr Sheikh ALAM, was interviewed by the Officer in Charge of the visit with regard to the two illegal workers encountered. He was subsequently served a Notice of Penalty Liability for an Illegal Working Civil Penalty in respect of the two illegal workers encountered.

Southeast ICE Team has yet to hear from the Civil Penalty Compliance Team of Immigration Enforcement as to whether a civil penalty has been issued to the company running Desh or what level of penalty (if any) was set.

Employment of a worker who is disqualified from employment by reason of the employee's immigration status is a criminal offence under Section 21 of the Immigration, Asylum and Nationality Act 2006 (as amended) and is punishable by a sentence of up to 5 years' imprisonment and/or an unlimited fine. This is separate to the liability under legislation for a civil penalty for employing illegal workers.

Please provide as much information as possible to support the application (please read guidance note 3)				
A printout of the visit report from the Home Office PRONTO application (including illegal working interviews with the employees and employer) is included with this application.				

	Please tick ✓ yes
Have you made an application for review relating to the premises before	
If yes please state the date of that application	Day Month Year
If you have made representations before relating to the pre	mises please state what they were
and when you made them	mises please state what they were

	Plea	ase tick ✓			
yes					
 I have sent copies of this form and encloand the premises licence holder or club las appropriate 		,			
 I understand that if I do not comply with application will be rejected 	the above requirements my				
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.					
Part 3 – Signatures (please read guidance note	4)				
Signature of applicant or applicant's solicitor or other duly authorised agent (please read guidance note 5). If signing on behalf of the applicant please state in what capacity.					
Signature					
Date 04/006/2023					
Capacity					
Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 6)					
Post town	Post Code				
	Post Code				
Telephone number (if any)					
If you would prefer us to correspond with you using an e-mail address your e-mail address (optional)					

Notes for Guidance

- 1. A responsible authority includes the local police, fire and rescue authority and other statutory bodies which exercise specific functions in the local area.
- 2. The ground(s) for review must be based on one of the licensing objectives.
- 3. Please list any additional information or details for example dates of problems which are included in the grounds for review if available.
- 4. The application form must be signed.
- 5. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- 6. This is the address which we shall use to correspond with you about this application.