

# Havering Temporary Event Notice Licensing Act 2003

For help contact

licensing@havering.gov.uk Telephone: 01708 432777

\* required information

| Section 1 of 9  |   |  |
|---|---|--|
| You can save the form at any t                                    | ime and resume it later. You do not need to b | e 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  | Meteor Restaurant Wedding application.        | 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 be                                     | half 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  | Astrit  |  |
| * Family name   | Kurtaj  |  |
| * E-mail  | meteorgrillrestaurant@gmail.com               |  |
| Main telephone number   | 07946507123                                   | Include country code.  |
| Other telephone number  |   |  |
| ☐ Indicate here if you wou  | ld prefer not to be contacted by telephone    |  |
| Are you:  |   |  |
| <ul><li>Applying as a business of</li></ul>                       | or organisation, including as a sole trader   | A sole trader is a business owned by one person without any special legal structure.   |
| <ul> <li>Applying as an individual</li> </ul>                     | al  | 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<br>the UK with Companies<br>House? | Yes   | Note: completing the Applicant Business section is optional in this form.  |
| Registration number   | 11575069                                      |  |
| Business name   | METEOR RESTAURANT LTD                         | If your business is registered, use its registered name.   |
| VAT number -  |   | Put "none" if you are not registered for VAT.  |
| Legal status  | Private Limited Company                       |  |
|   |   |  |

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|--|--|--|
| Your position in the business                                  | Director                                     |  |
| 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  | 216-218                                      |  |
| Street   | Main Road, Gidea Park                        |  |
| District   |  |  |
| City or town   | Gidea Park                                   |  |
| County or administrative area                                  |  |  |
| Postcode   | RM2 5HA                                      |  |
| Country  | United Kingdom                               |  |
|  |  |  |
| Section 2 of 9   |  |  |
| APPLICATION DETAILS (See a                                     | also guidance on completing the form, gene   | ral notes and note 1)  |
| Have you had any previous or I                                 |  |  |
| ○ Yes  | <ul><li>No</li></ul>                         |  |
| * Your date of birth   | /  | Applicant must be 18 years of age or older   |
|  | dd mm yyyy                                   | This box need not be completed if you are an                                       |
| National Insurance number                                      |  | individual not liable to pay UK national insurance.                                |
| Place of birth   | ALBANIA                                      |  |
| <b>Correspondence Address</b> Is the address the same as (or s | imilar to) the address given in section one? | If "Yes" is selected you can re-use the details from section one, or amend them as |
| • Yes  | ○ No   | required. Select "No" to enter a completely new set of details.                    |
| Building number or name  | 216-218,                                     |  |
| Street   | Main Road, Gidea Park                        |  |
| District   |  |  |
| City or town   | Gidea Park                                   |  |
| County or administrative area                                  |  |  |
| Postcode   | RM2 5HA                                      |  |
| Country  | United Kingdom                               |  |

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|---|---|--|--|
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| Additional Contact Details  |   | 15 "// - " :   |  |
| Are the contact details the sam                                     | ne as (or similar to) those given in section one?   | If "Yes" is selected you can re-use the details from section one, or amend them as |  |
| • Yes   | ○ No  | required. Select "No" to enter a completely new set of details.                    |  |
| E-mail  | meteorgrillrestaurant@gmail.com   |  |  |
| Telephone number  | 07946507123   |  |  |
| Other telephone number  |   |  |  |
| Section 3 of 9  |   |  |  |
| THE PREMISES  |   |  |  |
| activity at the premises describ<br>Give the address of the premise | ve notice under section 100 of the Licensing Ac<br>oed below.<br>es where you intend to carry on the licensable a<br>nance Survey references). (See also guidance o | activities or if it has no address give a detailed                                 |  |
| * Does the premises have an ac                                      | ddress?   |  |  |
| <ul><li>Yes</li></ul>   | ○ No  |  |  |
| <b>Address</b> Is the address the same as (or s                     | imilar to) the address given in section one?  | If "Yes" is selected you can re-use the details from section one, or amend them as |  |
| • Yes   | O No required. Select "No" to enter a connew set of details.  |  |  |
| * Building number or name   | 216-218   |  |  |
| * Street  | Main Road, Gidea Park   |  |  |
| District  |   |  |  |
| * City or town  | Gidea Park  |  |  |
| County or administrative area                                       |   |  |  |
| * Postcode  | RM2 5HA   |  |  |
| * Country   | United Kingdom  |  |  |
| * Does a premises licence or cluto the premises (or any part of     | ub premises certificate have effect in relation the premises)?  |  |  |
| O Neither   Premise   | es licence Club premises certificate  |  |  |
| * Premises licence number   | 27848   |  |  |
| Location Details  |   |  |  |
| * Provide further details about                                     | the location of the event   |  |  |
| 216-218 Main Road, Gidea Parl                                       | k RM2 5HA   |  |  |

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|---|---|---|--|
|   | t of the premises at this address or intend to res<br>w <u>(see also guidance on completing the form, r</u> | strict the area to which this notice applies, give a note 3)  |  |
|   |   |   |  |
|   |   |   |  |
|   |   |   |  |
| Describe the nature of the pr                 | remises below <u>(see also guidance on completin</u>  | g the form, note 4)   |  |
| Mediterranean and Turkish r                   | estaurant   |   |  |
|   |   |   |  |
|   |   |   |  |
| Describe the nature of the ev                 | vent below (see also guidance on completing th  | ne form, note 5)  |  |
| Wedding Celebration.                          |   |   |  |
|   |   |   |  |
|   |   |   |  |
| Section 4 of 9                                |   |   |  |
| LICENSABLE ACTIVITIES                         |   |   |  |
| State the licensable activities               | that you intend to carry on at the premises   |   |  |
| (see also guidance on comple                  | eting the form, note 6):  |   |  |
| ∑ The sale by retail of alcorate              | ohol  |   |  |
| ☐ The supply of alcohol b member of the club  | y or on behalf of a club to, or to the order of, a  |   |  |
|   | ∑ The provision of regulated entertainment  |   |  |
|   | ght refreshment   |   |  |
| ☐ The giving of a late temporary event notice |   | Late notices can be given no later than 5 working days but no earlier than 9 working days before the event.                                 |  |
|   |   | (See also guidance on completing the form,  |  |
| Event Dates                                   |   | <u>note 8).</u>   |  |
| There must be a period of at                  | least 10 working days between the date you su<br>premises for licensable activities.                        | Ibmit this form and the date of the earliest event  |  |
| State the dates on which you                  | ı intend to use these premises for licensable ac  | tivities  |  |
| (see also guidance on comple                  |   | arracs  |  |
| Event start date                              | 20 / 08 / 2025<br>dd mm yyyy  | The maximum period for using premises for licensable activities under the authority of a temporary event notice is 168 hours or seven days. |  |
| Event end date                                | 21 / 08 / 2025<br>dd mm yyyy  |   |  |

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|--|------|---------|-------------|-----|--|
| Have you already given a temporary event notice for the same premises in which the event period:  a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice?   | O    | Yes     | (           | •   | No                                     |
| Section 8 of 9   |      |         |             |     |  |
| ASSOCIATES AND BUSINESS (  | COLI | LEAGUES | (See also g | uic | lance on completing the form, note 16) |
| Has any associate of yours given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice?   | 0    | Yes     | (           | •   | No                                     |
| Has any associate of yours already given a temporary event notice for the same premises in which the event period:  a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice?   | 0    | Yes     | (           | •   | No                                     |
| Has any person with whom you are in business carrying on licensable activities given a temporary event notice for an event in the same calendar year as the event for which you are now giving a temporary event notice?   | 0    | Yes     | (           |     | No                                     |
| Has any person with whom you are in business carrying on licensable activities already given a temporary event notice for the same premises in which the event period:  a) Ends 24 hours or less before; or b) Begins 24 hours or less after the event period proposed in this notice? | 0    | Yes     | (           |     | No                                     |

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## CONDITION (See also guidance on completing the form, note 18)

It is a condition of this temporary event notice that where the relevant licensable activities described in Sections 4 and 5 above include the supply of alcohol that all such supplies are made by or under the authority of the premises user.

#### **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.

This formality requires a fixed fee of £21

## **DECLARATION** (See also guidance on completing the form, note 19)

- The information contained in this form is correct to the best of my knowledge and belief
- \* I understand that it is an offence:
- (i) to knowingly or recklessly make a false statement in connection with this temporary event notice and that a person is liable on conviction for such an offence to a fine up to level 5 on the standard scale; and
- (ii) to permit an unauthorised licensable activity to be carried on at any place and that a person is liable on conviction for any such offence to a fine not exceeding £20,000, or to imprisonment for a term not exceeding six months, or to both
- ☐ Ticking this box indicates you have read and understood the above declaration

This section should be completed by the applicant, unless you answered "Yes" to the question "Are you an agent acting on behalf of the applicant?"

\* Full name

\* Capacity

\* Date

Astrit Kurtaj

80

28 / 07 / 2025

dd mm yyyy

Add another signatory

Once you're finished you need to do the following:

- 1. Save this form to your computer by clicking file/save as...
- 2. Go back to <a href="https://www.gov.uk/apply-for-a-licence/temporary-event-notice/havering/apply-1">https://www.gov.uk/apply-for-a-licence/temporary-event-notice/havering/apply-1</a> to upload this file and continue with your application.

Don't forget to make sure you have all your supporting documentation to hand.

| OFFICE USE ONLY              |   |
|------------------------------|---|
|                              |   |
| Applicant reference number   | Meteor Restaurant Wedding application.              |
| Fee paid                     |   |
| Payment provider reference   |   |
| ELMS Payment Reference       |   |
| Payment status               |   |
| Payment authorisation code   |   |
| Payment authorisation date   |   |
| Date and time submitted      |   |
| Approval deadline            |   |
| Error message                |   |
| Is Digitally signed          |   |
| 1 <u>2</u> <u>3</u> <u>4</u> | <u>5</u> <u>6</u> <u>7</u> <u>8</u> <u>9</u> Next > |