

Application for a Premises Licence under the Licensing Act 2003

Please read the following instructions first –

- Use the extra page at the end of the form to provide further details if necessary
- When it is complete you can submit the form directly to us – use the submit button. You may wish to print and keep a copy of the completed form for your records. For information about filling in this type of electronic form, use the help button
- For any applications which include the sale of alcohol, you will need to ensure the Designated Premises Supervisor has completed the consent form and upload it to validate your application
- Before you complete this form -
 - [Please read the available information on the Licensing Act 2003 \(opens in a new tab\)](#)
 - [Please read the application specific guidance notes \(opens in a new tab\)](#)
 - [Please read the Home Office guidance and refer to it while completing your application \(opens in a new tab\)](#)

What district/local area are you applying to?

I / We (premises licence holder name)

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described 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.

Premises Details

Postal address of premises or, if none, ordinance survey map reference or description

Postcode

Telephone number of premises

What is the non-domestic rateable value of the premises?

Trading name of the business

Applicant Details

Please state whether you are applying for a premises licence as

Please confirm:

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 His Majesty's prerogative

INDIVIDUAL APPLICANTS (fill in as applicable)

Note, names provided in this section must match the premises licence holder names given earlier.

Title	<input type="text"/>
Forename(s)	<input type="text"/>
Surname	<input type="text"/>
Are you 18 years or older?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Date of birth	<input type="text"/>
Current postal address if different from premises address	<input type="text"/>
Postcode	<input type="text"/>
Telephone number	<input type="text"/>
Email address	<input type="text"/>
Confirm email address	<input type="text"/>

Right to Work - where applicable (if demonstrating a right to work via the [Home Office online right to work checking service \(opens in a new tab\)](#)), the 'share code' provided to the applicant by that service.

Input share code if applicable	<input type="text"/>
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SECOND INDIVIDUAL APPLICANT (IF APPLICABLE)

Title	<input type="text"/>
Forename(s)	<input type="text"/>
Surname	<input type="text"/>
Date of birth (you must be 18 years old or over)	<input type="text"/>
Current postal address if different from premises address	<input type="text"/>
Postcode	<input type="text"/>
Telephone number	<input type="text"/>
Email address	<input type="text"/>
Confirm email address	<input type="text"/>

Right to Work - where applicable (if demonstrating a right to work via the [Home Office online right to work checking service \(opens in a new tab\)](#)), the 'share code' provided to the applicant by that service.

Input share code if applicable	<input type="text"/>
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OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In case of a partnership or other joint nature (other than a body corporate), please give the name and address of each party concerned.

Name

Hilmi Aksahin

Address

[Redacted Address]

Registered number (where applicable)

Description of applicant (for example, partnership, company, unincorporated association etc.)

Owner

Telephone number (if any)

Email address (optional)

Confirm email address (optional)

Agent details

Title

Mr

Forename(s)

Hilmi

Surname

Aksahin

Address

[Redacted]

Postcode

[Redacted] -

Telephone number

[Redacted]

Email address

[Redacted]

Confirm email address

[Redacted]

Operating Schedule

When do you want the premises licence to start?

25/04/2026

Please note, your application for a premises licence may take up to two months to determine.

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

Are more than 5,000 people to attend the premises at any one time?

Yes

No

If 5,000 or more people attend the premises at any one time, please state the number expected to attend

General description of premises [\(please read guidance note 1 \(opens in a new tab\)\)](#)

Warehouse Unit Converted Into Commercial Kitchen Premises.
Contains A Main Kitchen Area With Workstations
Oven
Prep Area
Walk In Fridge And Cleaning Area
A Office
Back Storage Area
Small Staff Kitchen And Toilet.

Operating Schedule Continued

What licensable activities do you intend to carry on from the premises?

(Please see [section 1 of the Licensing Act 2003 \(opens in a new tab\)](#) and [Schedule 1 and 2 to the Licensing Act \(opens in a new tab\)](#)).

Provision of regulated entertainment

- a) plays
- b) films
- c) indoor sporting events
- d) boxing or wrestling entertainment
- e) live music
- f) recorded music
- g) performance of dance
- h) anything of a similar description to that falling within e, f or g

i) Provision of late night refreshment (hot food and, or drink 11pm-5am)

j) Supply of alcohol

Is the premises exclusively or primarily selling alcohol for consumption on the premises?

Do you want to remove the requirement to name a Designated Premises Supervisor (DPS)? Yes No

A

Plays Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the performance of a play take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>
				No	<input type="checkbox"/>
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))		
Mon	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Tues	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text"/>	<input type="text"/>	State any seasonal variations for performing plays (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>			
Thur	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Fri	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			

B

Films Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the exhibition of films take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>
				No	<input type="checkbox"/>
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))		
Mon	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Tues	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text"/>	<input type="text"/>	State any seasonal variations for the exhibition of films (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>			
Thur	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Fri	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			

C

Indoor Sporting Events Standard days and timings (please read guidance note 6 (opens in a new tab))				
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))	
Mon	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>		
Tues	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>		
Wed	<input type="text"/>	<input type="text"/>		State any seasonal variations for indoor sporting events (please read guidance note 4 (opens in a new tab))
	<input type="text"/>	<input type="text"/>		
Thur	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>		
Fri	<input type="text"/>	<input type="text"/>	Non standard timings. Where you intend to use the premises for indoor sporting events at different times than those listed, please list (please read guidance note 5 (opens in a new tab))	
	<input type="text"/>	<input type="text"/>		
Sat	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>		
Sun	<input type="text"/>	<input type="text"/>		
	<input type="text"/>	<input type="text"/>		

D

Boxing or wrestling entertainment Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the boxing or wrestling entertainment take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>			
				No	<input type="checkbox"/>			
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))					
Mon	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Tues	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Wed	<input type="text"/>	<input type="text"/>				State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>						
Thur	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Fri	<input type="text"/>	<input type="text"/>	Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times than those listed, please list (please read guidance note 5 (opens in a new tab))					
	<input type="text"/>	<input type="text"/>						
Sat	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Sun	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						

E

Live music Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the performance of live music take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>
				No	<input type="checkbox"/>
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))		
Mon	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Tues	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text"/>	<input type="text"/>	State any seasonal variations for performance of live music (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>			
Thur	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Fri	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			

F

Recorded music Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the playing of recorded music take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>			
				No	<input type="checkbox"/>			
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))					
Mon	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Tues	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Wed	<input type="text"/>	<input type="text"/>				State any seasonal variations for playing recorded music (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>						
Thur	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Fri	<input type="text"/>	<input type="text"/>	Non standard timings. Where you intend to use the premises for the playing of recorded music at different times than those listed, please list (please read guidance note 5 (opens in a new tab))					
	<input type="text"/>	<input type="text"/>						
Sat	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
Sun	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						

G

Performance of dance Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the performance of dance take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>
				No	<input type="checkbox"/>
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))		
Mon	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Tues	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text"/>	<input type="text"/>	State any seasonal variations for the performance of dance (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>			
Thur	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Fri	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text"/>	<input type="text"/>			
	<input type="text"/>	<input type="text"/>			

H

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6 (opens in a new tab))</p>			<p>Please give a description of the type of entertainment you will be providing</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div>														
			<p>Will the entertainment take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))</p>		Indoors	<input type="checkbox"/>	Outdoors	<input type="checkbox"/>									
			Both	<input type="checkbox"/>													
<p>Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?</p>					Yes	<input type="checkbox"/>	No	<input type="checkbox"/>									
Day	Start time	Finish time	<p>Please give further details here (please read guidance note 3 (opens in a new tab))</p>														
Mon	<input type="text"/>	<input type="text"/>	<div style="border: 1px solid black; height: 150px; width: 100%;"></div>														
	<input type="text"/>	<input type="text"/>															
Tues	<input type="text"/>	<input type="text"/>															
	<input type="text"/>	<input type="text"/>															
Wed	<input type="text"/>	<input type="text"/>						<p>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) and (g) (please read guidance note 4 (opens in a new tab))</p>									
	<input type="text"/>	<input type="text"/>						<div style="border: 1px solid black; height: 150px; width: 100%;"></div>									
Thur	<input type="text"/>	<input type="text"/>															
	<input type="text"/>	<input type="text"/>															
Fri	<input type="text"/>	<input type="text"/>											<p>Non standard timings. Where you intend to use the premises for entertainment of a similar description to that falling within (e), (f) or (g) at different times than those listed, please list (please read guidance note 5 (opens in a new tab))</p>				
	<input type="text"/>	<input type="text"/>											<div style="border: 1px solid black; height: 150px; width: 100%;"></div>				
Sat	<input type="text"/>	<input type="text"/>															
	<input type="text"/>	<input type="text"/>															
Sun	<input type="text"/>	<input type="text"/>															
	<input type="text"/>	<input type="text"/>															

I

Late night refreshment Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the provision of late night refreshment take place indoors or outdoors or both? (Please read guidance note 2 (opens in a new tab))		Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>
				No	<input checked="" type="checkbox"/>
Day	Start time	Finish time	Please give further details here (please read guidance note 3 (opens in a new tab))		
Mon	<input type="text" value="23:00"/>	<input type="text" value="00:00"/>	Only activities undertaken will be inside the premises, noise is kept to a minimum with no music playing.		
	<input type="text"/>	<input type="text"/>			
Tues	<input type="text" value="23:00"/>	<input type="text" value="00:00"/>			
	<input type="text"/>	<input type="text"/>			
Wed	<input type="text" value="23:00"/>	<input type="text" value="00:00"/>	State any seasonal variations for the provision of late night refreshment (please read guidance note 4 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>	<input type="text" value="none"/>		
Thur	<input type="text" value="23:00"/>	<input type="text" value="00:00"/>	Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times than those listed, please list (please read guidance note 5 (opens in a new tab))		
	<input type="text"/>	<input type="text"/>			
Fri	<input type="text" value="23:00"/>	<input type="text" value="00:00"/>			
	<input type="text"/>	<input type="text"/>			
Sat	<input type="text" value="23:00"/>	<input type="text" value="00:00"/>	<input type="text" value="none"/>		
	<input type="text"/>	<input type="text"/>			
Sun	<input type="text" value="23:00"/>	<input type="text" value="00:00"/>			
	<input type="text"/>	<input type="text"/>			

J

Supply of alcohol Standard days and timings (please read guidance note 6 (opens in a new tab))		Will the supply of alcohol be for consumption: (please read guidance note 2 (opens in a new tab))		On the premises	<input type="checkbox"/>					
				Off the premises	<input type="checkbox"/>					
				Both	<input type="checkbox"/>					
Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?				Yes	<input type="checkbox"/>	No	<input type="checkbox"/>			
Day	Start time	Finish time	State any seasonal variations for the supply of alcohol (please read guidance note 4 (opens in a new tab))							
Mon	<input type="text"/>	<input type="text"/>								
	<input type="text"/>	<input type="text"/>								
Tues	<input type="text"/>	<input type="text"/>								
	<input type="text"/>	<input type="text"/>								
Wed	<input type="text"/>	<input type="text"/>								
	<input type="text"/>	<input type="text"/>								
Thur	<input type="text"/>	<input type="text"/>					Non standard timings. Where you intend to use the premises for the supply of alcohol at different times than those listed, please list (please read guidance note 5 (opens in a new tab))			
	<input type="text"/>	<input type="text"/>								
Fri	<input type="text"/>	<input type="text"/>								
	<input type="text"/>	<input type="text"/>								
Sat	<input type="text"/>	<input type="text"/>								
	<input type="text"/>	<input type="text"/>								
Sun	<input type="text"/>	<input type="text"/>								
	<input type="text"/>	<input type="text"/>								

State the name and details of the individual whom you wish to specify on the licence as Designated Premises Supervisor (DPS).

Title	<input type="text"/>
Forename(s)	<input type="text"/>
Surname	<input type="text"/>
Date of birth	<input type="text"/>
Home address	<input type="text"/>
Postcode	<input type="text"/>
Personal licence number	<input type="text"/>
Issuing licensing authority	<input type="text"/>
	<input type="text"/>

Please complete the 'Consent of individual to being specified as designated premises supervisor' form and have the person specified above confirm the details given.

Consent to being specified as Designated Premises Supervisor

I,

[Full name of designated premises supervisor]

of

[Home address of designated premises supervisor]

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

Type of application

by

[Name of premises licence holder/s]

Relating to a premises licence

[Number of existing licence, if any]

For

Name of premises

Address of premises

Postcode

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

Name of premises licence holder/s

Concerning the supply of alcohol at

Name of premises

Address of the premises

Postcode

Consent of individual to being specified as premises supervisor (cont.)

I confirm that I am entitled to work in the United Kingdom and am applying for, intend to apply for or currently hold a personal licence, details of which I have set out on this form.

Personal licence number

[insert personal licence number, if any]

Personal licence issuing authority (if any)

Name of authority

Address of authority

Postcode

Telephone number of authority

Confirmation

Name

Date

K

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 \(opens in a new tab\)](#))

none

L

Do you intend to apply for ONLY seasonal or non-standard timings for your activities or opening hours?			Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Hours premises are open to the public Standard days and timings (please read guidance note 6 (opens in a new tab))			State any seasonal variations (please read guidance note 4 (opens in a new tab))			
none						
Day	Start time	Finish time	Non standard timings. Where you intend to use the premises to be open to the public at different times than those listed, please list (please read guidance note 5 (opens in a new tab))			
Mon	15:00	00:00				
Tues	15:00	00:00				
Wed	15:00	00:00				
Thur	15:00	00:00				
Fri	12:00	00:00				
Sat	12:00	00:00				
Sun	12:00	00:00				
none						

M – 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 \(opens in a new tab\)](#))

We maintain a professional, clean and safe work environment to ensure we meet all the criteria below. Please read below for a more detailed explanation of each area.

b) The prevention of crime and disorder

Prevention of crime and disorder - the premises has external CCTV that can be monitored remotely and is never left unoccupied during opening hours.

c) Public safety

Public safety - The building is not open to the public, however every effort is taken to keep employees within the building safe through correct safety practices. The building has external motion activated lighting. the office and extra storage room are kept locked when not in use.

d) The prevention of public nuisance

The prevention of public nuisance - A stated the building is not open to the public as we are a deliver kitchen only. The estate we are located in is very quite after around 5:30 in evening due to that nature of most of the businesses surrounding it. Bins are provided inside the premises for staff us and the exterior is kept free from waste.

e) The protection of children from harm

Protection of children from harm - no children are allowed into the building. ID checks are carried out when required on age restricted items such as energy drinks inline with check 25 upon delivery.

I am providing / attaching a the plan of the premises [\(See section 2.9 \(opens in a new tab\) of this guidance\)](#) **X**

Please upload your plan of the premises [20260424_120453.jpg](#)

The nominated Designated Premises Supervisor has completed the consent form contained within this application

If suitable, you can upload the completed designated supervisor consent form

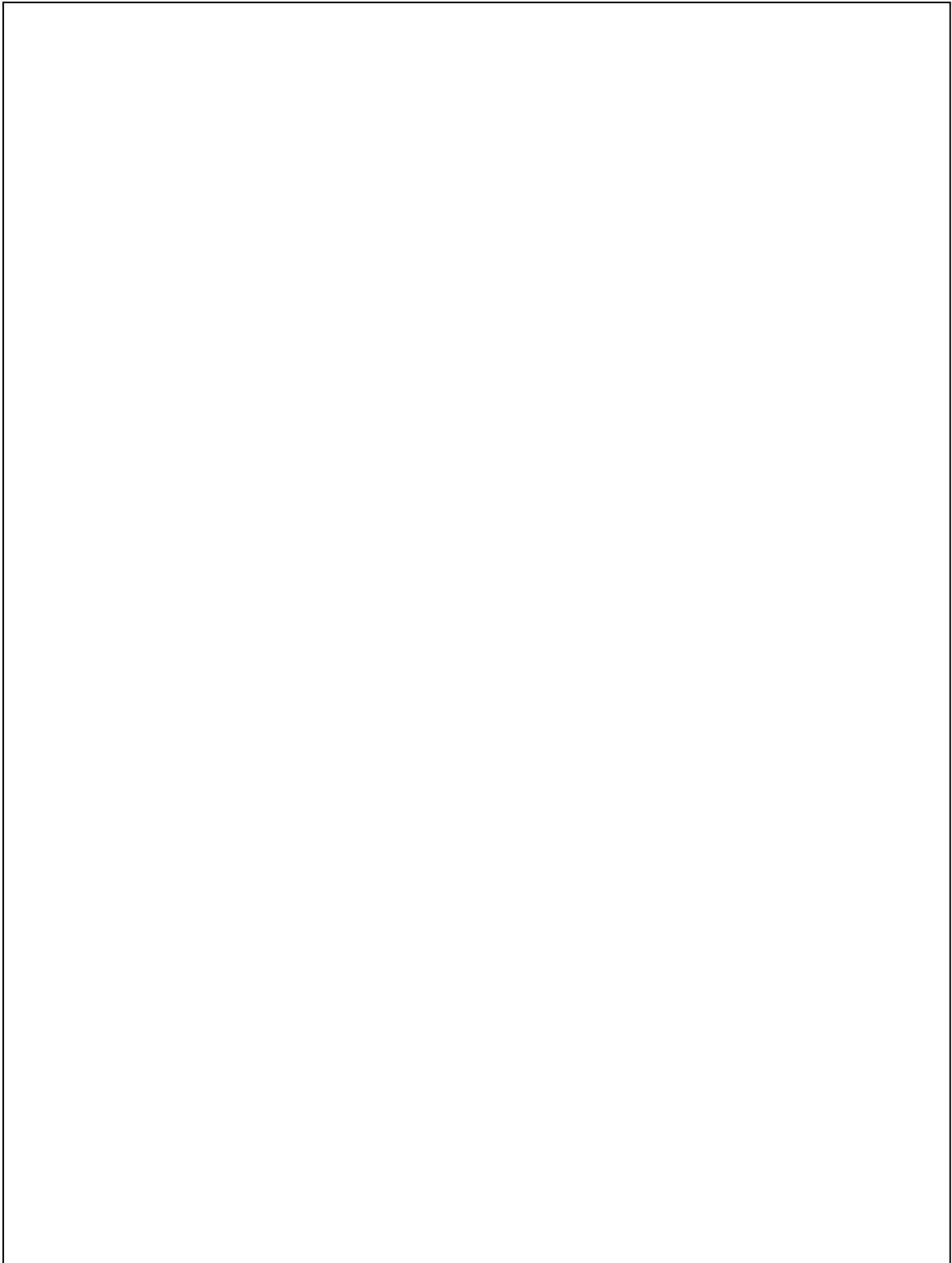
I am applying as an individual rather than a business / limited company and have provided proof of my entitlement to work in the UK (for information on what you can provide as evidence, [please reference our evidence guidance notes \(opens in a new tab\)](#))

Please upload proof of your entitlement to work in the UK (if you have not provided a share code)

I understand that if I do not comply with the above requirements my application will be rejected **X**

I understand that once my application has been formally accepted, I must advertise my application. Please note you should not arrange the advertising of your application until you have specifically received confirmation from the Licensing Authority that your application has been formally accepted and is being processed **X**

Use this page if there is any other information that you think we should know about.

A large, empty rectangular box with a thin black border, intended for providing additional information. The box is currently blank.

Declaration ([please read guidance note 10 \(opens in a new tab\)](#))

[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.

The Designated Premises Supervisor named in this application form is entitled to work in the UK (and is not subject to conditions preventing them from doing work relating to a licensable activity) and I have seen a copy of their proof of entitlement to work, if appropriate.

A person commits an offence if they knowingly or recklessly makes a false statement in or in connection with an application for a premises licence.

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.

Confirmation of applicant or applicant's solicitor or other duly authorised agent ([please see guidance note 11 \(opens in a new tab\)](#)). If confirming on behalf of the applicant please state in what capacity.

Confirmation

Name Hilmi Aksahin

Date 24/04/2026

Capacity (owner, director etc.) Owner

For joint applications, confirmation of 2nd applicant or 2nd applicant's solicitor or other authorised agent ([please see guidance note 12 \(opens in a new tab\)](#)). If confirming on behalf of the applicant please state in what capacity.

Confirmation

Name

Date

Capacity (owner, director etc.)

Contact name (where not previously given) and postal address for correspondence associated with this application ([please see guidance note 11 \(opens in a new tab\)](#))

Name Hilmi Aksahin

Address Unit 8
Elvin Way

Postcode NR3 2BB

Telephone number (if any)

Email address [REDACTED]@com

Confirm email address [REDACTED]

