

MECO 0014 1515  
E315-00.

WK/201500338

**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 **MORDEN REALTY MANAGEMENT**

*(Insert name(s) of applicant)*

**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**

Morden Hall 21 Morden Hall Road Morden			
<b>Post town</b>	Sutton	<b>Postcode</b>	<b>SM4 5JD</b>

Telephone number at premises (if any)	<b>07766880905</b>
Non-domestic rateable value of premises	<b>£BAND C FOR GROUND FLOOR (£315 FEE)</b>

**Part 2 - Applicant Details**

Please state whether you are applying for a premises licence as

Please tick as appropriate

- a) an individual or individuals \*  please complete section (A)
- b) a person other than an individual \*
  - i. as a limited company  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 in Wales  please complete section (B)
- ga) a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England  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 <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
Post town				Postcode	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**SECOND INDIVIDUAL APPLICANT (if applicable)**

Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other Title (for example, Rev)	
<b>Surname</b>			<b>First names</b>		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
Post town				Postcode	
<b>Daytime contact telephone number</b>					
<b>E-mail address (optional)</b>					

**(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.**

<b>Name</b> Morden Realty Management Ltd
<b>Address</b> 797 Harrow Road Sudbury Town HA0 2LP
<b>Registered number (where applicable)</b> 08067192
<b>Description of applicant (for example, partnership, company, unincorporated association etc.)</b> Limited Company
<b>Telephone number (if any)</b>
<b>E-mail address (optional)</b>

**Part 3 Operating Schedule**

When do you want the premises licence to start?

DD	MM	YYYY
10	05	2015

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

DD	MM	YYYY
+	+	+

Please give a general description of the premises (please read guidance note 1)  
 Morden Hall is a Grade II listed building situated within Morden Hall Park bordered on two sides by walls and two sides by River Wandle. This property is currently owned by the National Trust .  
 Following several years of disuse the current owners Morden Realty Management has acquired the lease . After considerable investment , closely watched by the National Trust , the building is to back into use as a bespoke Function Venue . This application covers phase 1 , which is the development of the Ground Floor . Phase 2 will be the upper floors . The primary function rooms are the main room & a site for a marquee adjacent to it. There are Bars , Kitchens & Lounge Areas . The large picturesque gardens will be used .  
 There is a very large car park .

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

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

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick any that apply

- 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 late night refreshment** (if ticking yes, fill in box I)

**Supply of alcohol** (if ticking yes, fill in box J)

**In all cases complete boxes K, L and M**

**A**

Plays 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</b> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon	07.00	23.00	<b>Please give further details here</b> (please read guidance note 3) This part of the application reflects the multi-facet use of the venue we envisage and therefore the need to cover all potential customer requirements.		
Tue	07.00	23.00			
Wed	07.00	23.00	<b>State any seasonal variations for performing plays</b> (please read guidance note 4) New Years Eve to 02.00		
Thur	07.00	23.00			
Fri	07.00	23.00	<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</b> (please read guidance note 5)		
Sat	07.00	23.00			
Sun	07.00	22.00			

**B**

Films Standard days and timings (please read guidance note 6)			<b>Will the exhibition of films take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>	
Day	Start	Finish		Outdoors	<input type="checkbox"/>	
				Both	<input type="checkbox"/>	
Mon	07.00		<b>Please give further details here</b> (please read guidance note 3) This part of the application reflects the multi-facet use of the venue we envisage and therefore the need to cover all potential customer requirements.			
		23.00				
Tue	07.00					
		23.00				
Wed	07.00			<b>State any seasonal variations for the exhibition of films</b> (please read guidance note 4)		
		23.00				
Thur	07.00					
		23.00				
Fri	07.00		<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</b> (please read guidance note 5)			
		23.00				
Sat	07.00					
		23.00				
Sun	07.00					
		22.00				

C

<b>Indoor sporting events</b> Standard days and timings (please read guidance note 6)			<b><u>Please give further details</u></b> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<b><u>State any seasonal variations for indoor sporting events</u></b> (please read guidance note 4)
Wed			
Thur			<b><u>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</u></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</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Mon			<b>Please give further details here</b> (please read guidance note 3)		
Tue					
Wed			<b>State any seasonal variations for boxing or wrestling entertainment</b> (please read guidance note 4)		
Thur					
Fri			<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)		
Sat					
Sun					



**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</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3) Live music to be played indoors including inside marquee will be amplified. Live music played outdoors will be unamplified. This part of the application reflects the multi-facet use of the venue we envisage and therefore the need to cover all potential customer requirements.		
Mon	08:00	01:00			
Tue	08:00	01:00			
Wed	08:00	01:00			
Thur	08:00	01:00			
Fri	08:00	01:00			
			<b>State any seasonal variations for the performance of live music</b> (please read guidance note 4) No seasonal variations.		
			<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</b> (please read guidance note 5) Live music outdoors will be limited to 08:00 hours to 20:00 hours.		
Sat	08:00	01:00			
Sun	08:00	01:00			

**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</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3) Recorded music played indoors including inside marquee will be amplified. Recorded music played outdoors will kept to an acceptable level and finished by 23.00. This part of the application reflects the multi-facet use of the venue we envisage and therefore the need to cover all potential customer requirements.		
Mon	08:00	01:00			
Tue	08:00	01:00	<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 4) No seasonal variations.		
Wed	08:00	01:00			
Thur	08:00	01:00	<b>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Fri	08:00	01:00			
Sat	08:00	01:00			
Sun	08:00	01:00			

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of dance take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Day	Start	Finish		Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Mon	08:00	01:00	<b>Please give further details here</b> (please read guidance note 3) This part of the application reflects the multi-facet use of the venue we envisage and therefore the need to cover all potential customer requirements.		
Tue	08:00	01:00			
Wed	08:00	01:00	<b>State any seasonal variations for the performance of dance</b> (please read guidance note 4) No seasonal variations.		
Thur	08:00	01:00			
Fri	08:00	01:00	<b>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat	08:00	01:00			
Sun	08:00	01:00			

# H

<b>Anything of a similar description to that falling within (e), (f) or (g)</b> Standard days and timings (please read guidance note 6)			Please give a description of the type of entertainment you will be providing This part of the application reflects the multi-facet use of the venue we envisage and therefore the need to cover all potential customer requirements.		
Day	Start	Finish	<b><u>Will this entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon	08:00	01:00		Outdoors	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Tue	08:00	01:00	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed	08:00	01:00			
			<b><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u></b> (please read guidance note 4)		
Thur	08:00	01:00			
Fri	08:00	01:00	<b><u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sat	08:00	01:00			
			<b><u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sun	08:00	01:00			

**I**

Late night refreshment 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 (please read guidance note 2)	Indoors	<input checked="" type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish			
Mon	23:00	01:30	<b><u>Please give further details here</u></b> (please read guidance note 3) This part of the application reflects the multi-facet use of the venue we envisage and therefore the need to cover all potential customer requirements.& facilitate Hot Food & Drink before departure		
Tue	23:00	01:30			
Wed	23:00	01:30	<b><u>State any seasonal variations for the provision of late night refreshment</u></b> (please read guidance note 4) No seasonal variations.		
Thur	23:00	01:30			
Fri	23:00	01:30	<b><u>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</u></b> (please read guidance note 5)		
Sat	23:00	01:30			
Sun	23:00	01:30			

**J**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption – please tick</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input type="checkbox"/>
				Both	<input checked="" type="checkbox"/>
Day	Start	Finish	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4) No seasonal variations.		
Mon	07:00	01:00			
Tue	07:00	01:00			
Wed	07:00	01:00			
Thur	07:00	01:00			
Fri	07:00	01:00			
Sat	07:00	01:00			
Sun	07:00	01:00			
			<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) This part of the application reflects the multi-facet use of the venue we envisage and therefore the need to cover all potential customer requirements., including Champagne Breakfasts , Corporate Events etc.		

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

Name Simon Andrew Robson	
Address 3 Chilmead Farm , Chilmead lane , Nutfield , Surrey ,	
Postcode	RH1 4EQ
Personal licence number (if known) RBBC/05/01685/LAPER	
Issuing licensing authority (if known) Reigate & Banstead Borough Council	

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).**  
 No such activities will be allowed.

L

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variations</b> (please read guidance note 4) No seasonal variations.
Day	Start	Finish	<b><u>Non standard timings. Where you intend the premises to be open to the public at different times from those listed in the column on the left, please list</u></b> (please read guidance note 5)
Mon	07:00	01:30	
Tue	07:00	01:30	
Wed	07:00	01:30	
Thur	07:00	01:30	
Fri	07:00	01:30	
Sat	07:00	01:30	
Sun	07:00	01:30	

**M** Describe the steps you intend to take to promote the four licensing objectives:

**a) General – all four licensing objectives (b, c, d and e) (please read guidance note 9)**

The property is a Grade 2 listed building owned by the National Trust . The new owners have invested considerable sums in order to re-create the splendour of the building . The nature of the events will be high quality bespoke & private . This will discourage unsuitable groups . The property will be well secured .

**b) The prevention of crime and disorder**

The venue will primarily be used for pre-booked events , eg Weddings , Functions , Corporate Events Full security in line with the events needs will always be provided by SIA qualified staff . Full CCTV coverage inside & outside the property will be installed including recording facility as standard requirements . The maximum number of customers including is 200 within the function room & 350 in the Marquee . The building will continue to have a full time live in Security Guard.

**c) Public safety**

Full CCTV coverage inside & outside the property will be installed including recording facility as standard requirements . The maximum number of customers including is 200 within the function room & 350 in the Marquee . Full fire exit & safety plan provided .

**d) The prevention of public nuisance**

The property has 2 large walls adjacent to the nearest residential properties & considerable gardens & a small river to the other boundary . All external amplified music will be finished by 23.00 , Internally by 01.00 . Staff will assist with prompt dispersal of the customers in a quiet & thoughtful manner.

**e) The protection of children from harm**



We will operate a strict "Challenge 25" policy , Copy attached . All staff involved in the sale of alcohol will be fully trained , records kept and refreshed every 6 months. In addition to the DPS , other Personal License Holders will be employed . No children will be permitted to drink alcohol anywhere on the premises.

**Checklist:**

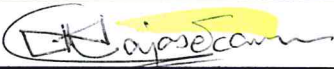
**Please tick to indicate agreement**

- 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 designated 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 SUMMARY CONVICTION TO A FINE NOT EXCEEDING 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	
Date	8 APRIL 2015.
Capacity	GAJAN RAJASEKARAN, DIRECTOR.

**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	

SCHEDULE 11  
PART A

London Borough of Merton  
Merton Civic Centre, London Road, Morden SM4 5DX

Consent of individual to being specified as premises supervisor

I SIMON ANDREW ROBSON of  
[full name of prospective premises supervisor]

3 CHILMEAD FARM, CHILMEAD LANE,  
[home address of prospective premises supervisor]

NUTFIELD, SURREY. RH11 4EQ

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 MORLEN REALTY MANAGEMENT  
[name of applicant]

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

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

MORLEN HALL  
21 MORLEN HALL ROAD, MORLEN

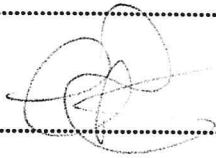
and any premises licence to be granted or varied in respect of this application made by

[name of applicant]

concerning the supply of alcohol at MORLEN HALL  
[name and address of premises to which application relates]

I also confirm that I am applying for, intend to apply for, currently hold a personal licence,  
details of which I set out below. Personal licence number RB26/05/01685/LAPER  
[insert personal licence number, if any]

Personal licence issuing authority REIGATE & BANSTEAD B.C  
[insert name and address and telephone number of personal licence issuing authority, if any]

Signed 

Name SIMON ROBSON  
[please print]

Dated 25TH MARCH 2015



MORDEN HALL  
SALE OF ALCOHOL

AGE RECOGNITION POLICY

IF YOU ARE LUCKY ENOUGH TO LOOK

UNDER **25**

WE ARE GOING TO ASK YOU FOR I.D.  
TO PROVE YOU ARE 18

THE ONLY MEANS OF I.D. WE ACCEPT IS ;  
PHOTO DRIVING LICENSE (PROV &  
FULL)

OR VALID PASSPORT