LOCAL GOVERNMENT (MISCELLANEOUS PROVISIONS) ACT 1982 (as amended)



APPLICATION FOR A SEX ESTABLISHMENT LICENCE

	SECTION A	A: DETAILS	OF PI	REMISE	S TO BE	LICENSED		
1.	Name and address of premises to be licensed:		Stir 48 High Street Kingston Upon Thames KT1 1HN					
2.	Managers name:			Josh Dickson				
3.	3. Licence applied for (please tick)							
		LIC	ENC	E TYPE				
	Sex Shop		x Cine			xual Entertainment Venue	Х	
				ION TY	PE			
NEW	/ RENEWAL	X Existing (if applic		e number		24/00258/SEXSHP		
		SECTION		PPLICA	NT DET	AILS		
4.	Title & full name of ap Company name:	plicant / Limit	ted		STII	R777 Ltd		
5.	. Under what name are (or will) the premises be known?			STIR77 Ltd				
6.	If a company, please provide a name point of contact for this application:			Damon Wellman				
7.	Telephone Number:							
8.	Email address							
	SECTIO	N B1 – FOR	APPL	ICATIO	NS BY II	NDIVIDUALS		
Applicant date of birth:				Place c	of birth:			
	OF	BY AN UNI				PORATE BODIES MPANY		
9.	. Country in which company incorporated			UK				
10.	·			11409197				

11. Please complete details of the company secretary, the Directors and / or any person involved in the management of the company (continue on a separate sheet if necessary:								
POSITION	in the managemei NAME (including	<u>nt of the comp</u> any former name	oanv es)	(continue on a	a se	HOME ADDRESS		
Director Aleks Perpalaj (Syl Rexhepi)								
Manager	ickson							
	SECTION C: OPERATION OF THE PREMISES							
12. If the application is for a licence for a sex shop, state whether any part of the premises is to be used for the purposes of displaying films, video recordings or other moving pictures. If "yes" state whether cubicles are to be used for viewing and if so how many?						N/A		
13. For all licence types , describe the means taken to prevent the interior of the premises being visible to passersby?			Lobbied front door. 2nd and 3rd floors not visible from the outside of premises (as existing)					
14. Proposed	d opening times: /	All as Existi	ing					
, , , , , , , , , , , , , , , , , , , ,			FROM			ТО		
MOI	22.00		-		03.00 (as existing)			
TUE	22.00		-		03.00 (as existing)			
WEDN	22.00 22.00				03.00 (as existing) 03.00 (as existing)			
FR	22.00			05.00 (as existing)				
SATI	22.00			05.00 (as existing)				
SUI			-		(2.2 29)			

SEASONAL VARIATIONS	New Years Eve terminal hour 05.00
	THEW TEATS EVE terrilliar floar 60.00

DECLARATION

- I enclose 2 copies of a plan of the premises (at scale of 1:50, 1:100 or 1:250) showing:
 - the layout of the premises
 - the location of areas where activities carried out under the licence will be provided (i.e. any shelving, tables, booths, stages, poles etc)
 - the location of all entrances and exits from the premises, showing clearly those intended for use only as emergency exits
 - The nature and location of fire safety equipment
- I enclose drawings showing the proposed elevation, including sign-writing and advertisements, of any external elevation visible to members of the public [scale to be such that drawings are clearly visible on A3 paper].
- I enclose a map showing the location of the premises at scale 1:1250
- I enclose a current copy of my [Employers liability insurance] and [Public liability insurance] *delete as applicable
- I understand that I must now advertise my application on the window of the premises using the form provided by the Council, for a period of 21 days beginning with the day after submission of my application to the Council.
- I understand that I must also publish a notice, in the format specified by the Council for this purpose, in a local newspaper circulating in the Authorities area no later than 7 days after the date of the application
- I enclose the fee of: £1,986,00
- I understand that if I do not comply with all of the above requirements, my application will be rejected
- I confirm the information given above is true and complete in every respect, and I understand any statement made by me which I know to be false in any material respect could result in my application being refused.

Name:	Damon Wellman	_Designation: _	Operations manager
Signature:		Date:	04/03/2025

Address for the submission of completed application forms:

The Licensing Team
Regulatory Services
Guildhall 2
High Street
Kingston upon Thames
KT1 1EU

