

**THE LICENSING TEAM, HOUNSLOW HOUSE, LONDON BOROUGH OF
HOUNSLOW, CIVIC CENTRE, 7 BATH ROAD, HOUNSLOW, TW3 3EB.**

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 Mr AJINDER SINGH KAPOOR & Mr TARIQ MAHMOOD

(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 detail

| | | | |
|--|--------|-----------------|---------|
| Postal address of premises or, if none, ordnance survey map reference or description | | | |
| HOUNSLOW CONVENIENCE STORE AND POST OFFICE 173 HIGH STREET HOUNSLOW | | | |
| Post town | LONDON | Postcode | TW3 1QL |

| | |
|---|------------|
| Telephone number at premises (if any) | [REDACTED] |
| Non-domestic rateable value of premises | £64000 |

Part 2 - Applicant details

Please state whether you are applying for a premises licence as

Please tick as appropriate

- | | | |
|--|--------------------------|-----------------------------|
| a) an individual or individuals * | X | please complete section (A) |
| b) a person other than an individual * | | |
| i as a limited company/limited liability partnership | <input type="checkbox"/> | please complete section (B) |
| ii as a partnership (other than limited liability) | <input type="checkbox"/> | please complete section (B) |
| iii as an unincorporated association or | <input type="checkbox"/> | please complete section (B) |
| iv other (for example a statutory corporation) | <input type="checkbox"/> | please complete section (B) |
| c) a recognised club | <input type="checkbox"/> | please complete section (B) |
| d) a charity | <input type="checkbox"/> | please complete section (B) |
| e) the proprietor of an educational establishment | <input type="checkbox"/> | please complete section (B) |
| f) a health service body | <input type="checkbox"/> | please complete section (B) |

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- 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 (by ticking yes to one box below):

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 checked="" type="checkbox"/> | Mrs <input type="checkbox"/> | Miss <input type="checkbox"/> | Ms <input type="checkbox"/> | Other Title (for example, Rev) | |
| Surname KAPOOR | | | First names AJINDER SINGH | | |
| Date of birth [REDACTED] | | I am 18 years old or over <input checked="" type="checkbox"/> | | Please tick yes | |
| Nationality [REDACTED] | | | | | |
| Current residential address if different from premises address | | [REDACTED] | | | |
| Post town | LONDON | | | Postcode | [REDACTED] |
| Daytime contact telephone number | | [REDACTED] | | | |
| E-mail address (optional) | | [REDACTED] | | | |
| Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service (please see note 15 for information) | | | | | |

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SECOND INDIVIDUAL APPLICANT (if applicable)

| | | | | | |
|---|------------------------------|-------------------------------|-----------------------------|--------------------------------|--|
| Mr <input checked="" type="checkbox"/> | Mrs <input type="checkbox"/> | Miss <input type="checkbox"/> | Ms <input type="checkbox"/> | Other Title (for example, Rev) | |
| Surname MAHMOOD | | | First names TARIQ | | |
| Date of birth [REDACTED] | | I am 18 years old or over | | X Please tick yes | |
| Nationality [REDACTED] | | | | | |
| Where applicable (if demonstrating a right to work via the Home Office online right to work checking service), the 9-digit 'share code' provided to the applicant by that service: (please see note 15 for information) | | | | | |
| Current residential address if different from premises address | | [REDACTED] | | | |
| Post town | [REDACTED] | Postcode | [REDACTED] | | |
| Daytime contact telephone number | | [REDACTED] | | | |
| E-mail address (optional) | [REDACTED] | | | | |

(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.

| |
|---|
| Name |
| Address |
| Registered number (where applicable) |
| Description of applicant (for example, partnership, company, unincorporated association etc.) |
| Telephone number (if any) |
| E-mail address (optional) |

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Part 3 Operating Schedule

When do you want the premises licence to start?

| | | |
|----|----|--------|
| DD | MM | YYYY |
| 1 | 9 | 052026 |

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)

THESE ARE NEWLY OPENED PREMISES THAT ARE TO TRADE AS A POST OFFICE & CONVENIENCE STORE OFFERING A SUBSTANTIAL VARIETY OF NORMAL CONVENIENCE GOODS SUCH AS FRESH PRODUCTS AND HOUSEHOLD ITEMS WITHIN ITS GROCERY RANGES. THIS SHOP IS ALSO TO OFFER A MODEST RANGE OF ALCOHOL PRODUCTS. AS A POST OFFICE IS INCLUDED THE STORE ALSO INCLUDES A BUSINESS SERVICES COUNTER FOR PHOTOCOPYING AND OTHER APPROPRIATE SERVICES.

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

| |
|--|
| |
|--|

What licensable activities do you intend to carry on from the premises?
(please see sections 1 and 14 and Schedules 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment (please read guidance note 2)

Please tick all 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

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J

| | | | | | |
|--|--------------|---------------|--|------------------|--------------------------|
| Supply of alcohol Standard days and timings (please read guidance note 7) | | | <u>Will the supply of alcohol be for consumption – please tick</u> (please read guidance note 8) | On the premises | <input type="checkbox"/> |
| | | | | Off the premises | X |
| | | | | Both | <input type="checkbox"/> |
| Day | Start | Finish | <u>State any seasonal variations for the supply of alcohol</u> (please read guidance note 5) | | |
| Mon | 09.00 | 22.00 | | | |
| Tue | 09.00 | 22.00 | | | |
| Wed | 09.00 | 22.00 | | | |
| Thurs | 09.00 | 22.00 | | | |
| Fri | 09.00 | 22.00 | | | |
| Sat | 09.00 | 22.00 | | | |
| Sun | 09.00 | 22.00 | | | |
| | | | <u>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</u> (please read guidance note 6) | | |

State the name and details of the individual whom you wish to specify on the licence as designated premises supervisor (Please see declaration about the entitlement to work in the checklist at the end of the form):

| | |
|---|------------|
| Name AJINDER SINGH KAPOOR | |
| Date of birth - [REDACTED] | |
| Address [REDACTED] | |
| Postcode | [REDACTED] |
| Personal licence number (if known) LN000012866 | |
| Issuing licensing authority (if known) LONDON BOROUGH OF EALING | |

K

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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 9).
NONE

L

| | | | |
|--|-------|--------|---|
| Hours premises are open to the public Standard days and timings (please read guidance note 7) | | | State any seasonal variations (please read guidance note 5) |
| Day | Start | Finish | 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 (please read guidance note 6) |
| Mon | 08.00 | 22.00 | |
| Tue | 08.00 | 22.00 | |
| Wed | 08.00 | 22.00 | |
| Thur | 08.00 | 22.00 | |
| Fri | 08.00 | 22.00 | |
| Sat | 08.00 | 22.00 | |
| Sun | 08.00 | 22.00 | |

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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 10)

1. The premises shall install and maintain a comprehensive CCTV system. All entry and exit points will be covered enabling frontal identification of every person entering in any light condition.
2. The CCTV system shall continually record whilst the premises is open for licensable activities and during all times when customers remain on the premises. All recordings shall be stored for a minimum period of 31 days with date and timestamping.
3. The CCTV system shall provide clear images in all lighting conditions. The CCTV system shall continuously record whilst the premises are open for licensable activities and shall be capable of providing frontal identification of customers. All CCTV recordings shall be retained for a minimum of 31 days and shall be date and time stamped. CCTV recordings should be made available for inspection upon receipt of a request by an authorised person (as defined by section 13 of the licensing act 2003), the Police or Home Office Immigration officials. A member of staff shall always be present on the premises whilst they are open, who can operate the CCTV system and able to facilitate immediate viewing of CCTV footage upon the request of an authorised person (as defined by section 13 of the licensing act 2003), the Police or Home Office Immigration officials.
4. An operational daily log report must be maintained endorsed by signature, indicating the system has been checked and is compliant, in the event of any failings actions taken are to be recorded. In the event of technical failure of the CCTV equipment the Premises Licence
5. Viewing of recordings shall be made available upon reasonable request of Police or authorised officer throughout the entire 31 day period.
6. A staff member will be on duty during normal shop hours who is familiar with the CCTV system will be able to show recordings to the Police or other responsible authority officers and if necessary provide copies of the recordings upon request.
7. External cameras will be installed to cover the front of the store and will record 24 hours a day.
8. There will be a minimum of 3 staff on the premises at all times and may be higher at busier times.
9. The area immediately outside the premises shall be swept daily.
10. All alcohol displays will be behind the main counter and no customer self service will be permitted at any time.
11. No high strength beer, lager or cider above 6.5%abv will be displayed or sold.
12. No single cans of beer, lager or cider will be sold in any one transaction.
13. A record shall be kept detailing all refused sales of alcohol. The record should include the date and time of the refused sale and the name of the member of staff who refused the sale. The record shall be available for inspection at the premises by the police or an authorised officer of the City Council at all times whilst the premises is open.
14. All tills shall automatically prompt staff to ask for age verification identification when presented with an alcohol sale.

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15. A Challenge 25 proof of age scheme shall be operated at the premises where the only acceptable forms of identification are recognised photographic identification cards, such as a driving licence, passport or proof of age card with the PASS Hologram.
16. Notices shall be prominently displayed at all exits requesting patrons to respect the needs of local residents and businesses and leave the area quietly.
17. The Premises Licence Holder shall ensure that all staff employed at the premises whose duties include the sale or supply of alcohol shall undertake and complete a relevant programme of internal training prior to them being authorised to sell or supply alcohol.
18. The premises licence guidance manual will be the basis of alcohol sales training. Records of the training programme shall be maintained and made available to authorised Officers upon request.
19. Written Refresher training will be undertaken for all staff no less than every twelve months.
20. Alcohol displays will be covered with blinds outside of permitted hours.
21. An incident log must be kept at the premises, and made immediately available on request to an authorised person (as defined by Section 13 of the Licensing Act 2002) or the Police, which must record the following:
 - (a) all crimes reported to the venue
 - (b) all ejections of patrons
 - (d) any incidents of disorder
 - (e) seizures of drugs or offensive weapons
 - (f) any faults in the CCTV system or searching equipment or scanning equipment
 - (g) any persons refused entry to the premises
 - (h) any visit by a relevant authority or emergency serviceA copy of the incident log will be retained for a period of at least 12 months

b) The prevention of crime and disorder

1. Please refer to a)

c) Public safety

1. Please refer to a)

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d) The prevention of public nuisance

1. Please refer to a)

e) The protection of children from harm

1. Please refer to a)

Checklist:

Please tick to indicate agreement

- I have made or enclosed payment of the fee. X
- I have enclosed the plan of the premises. X
- I have sent copies of this application and the plan to responsible authorities and others where applicable. X
- I have enclosed the consent form completed by the individual I wish to be designated premises supervisor, if applicable. X
- I understand that I must now advertise my application. X
- I understand that if I do not comply with the above requirements my application will be rejected. [Applicable to all individual applicants, including those in a partnership which is not a limited liability X
- partnership, but not companies or limited liability partnerships] I have included documents demonstrating my entitlement to work in the United Kingdom or my share code issued by the Home Office online right to work checking service (please read note 15). X

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.

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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.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

| | |
|--------------------|---|
| Declaration | <ul style="list-style-type: none"> [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 (please read guidance note 15). The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15) |
| Signature | |
| Date | 20 th APRIL 2026 |
| Capacity | AGENT |

For joint applications, signature of 2nd applicant or 2nd applicant’s solicitor or other authorised agent (please read guidance note 13). **If signing on behalf of the applicant, please state in what capacity.**

| | |
|-----------|--|
| Signature | |
| Date | |
| Capacity | |

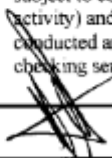
| | | | |
|--|------------|----------|----------|
| Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14) RICHARD BAKER RB RETAIL & LICENSING SERVICES LIMITED 23 MAGISTER DRIVE LEE ON THE SOLENT | | | |
| Post town | PORTSMOUTH | Postcode | PO13 8GE |
| Telephone number (if any) | [REDACTED] | | |

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HOUNSLOW, CIVIC CENTRE, 7 BATH ROAD, HOUNSLOW, TW3 3EB.**

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.

Part 4 – Signatures (please read guidance note 11)

Signature of applicant or applicant’s solicitor or other duly authorised agent (see guidance note 12). **If signing on behalf of the applicant, please state in what capacity.**

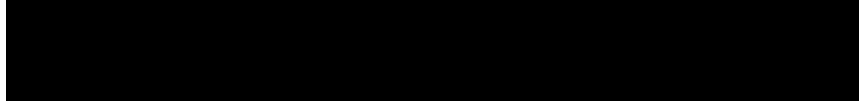
| | |
|--------------------|---|
| Declaration | <ul style="list-style-type: none"> [Applicable to individual applicants only, including those in a partnership which is not a limited liability partnership] I understand I am not entitled to be issued with a licence if I do not have the entitlement to 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 (please read guidance note 15). The DPS named in this application form is entitled to work in the UK (and is not subject to conditions preventing him or her from doing work relating to a licensable activity) and I have seen a copy of his or her proof of entitlement to work, or have conducted an online right to work check using the Home Office online right to work checking service which confirmed their right to work (please see note 15) |
| Signature |  |
| Date | 20 th APRIL 2026 |
| Capacity | AGENT |

For joint applications, signature of 2nd applicant or 2nd applicant’s solicitor or other authorised agent (please read guidance note 13). **If signing on behalf of the applicant, please state in what capacity.**

| | |
|-----------|--|
| Signature | |
| Date | |
| Capacity | |

| | | | |
|--|------------|----------|----------|
| Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 14) RICHARD BAKER RB RETAIL & LICENSING SERVICES LIMITED 23 MAGISTER DRIVE LEE ON THE SOLENT | | | |
| Post town | PORTSMOUTH | Postcode | PO13 8GE |
| Telephone number (if any) | [REDACTED] | | |
| If you would prefer us to correspond with you by e-mail, your e-mail address (optional) | | | |
| [REDACTED] | | | |

RB Retail & Licensing Services Limited



20th February 2026

FOR THE ATTENTION OF THE LICENSING OFFICER

Dear London Borough of Hounslow Council Licensing Officer,

Re: Licensing Act 2003 – Application for a new Premises Licence

We enclose our client's application (Hounslow Convenience Store & Post Office, 173 High Street, Hounslow, TW3 1QL). We trust you will find that everything is in order.

However, should you have any queries with regard to this matter would you please contact us in the first instance rather than reject or return the application.

It may be that we can speedily resolve any query for you by this method.

Please may we have a receipt for the local authority fee included with this application.

Thanking you in anticipation

Yours faithfully

Richard Baker

For and on behalf of RB Retail & Licensing Services Limited

Enclosures:

Application for a Premises Licence

DPS consent form

Copy notice

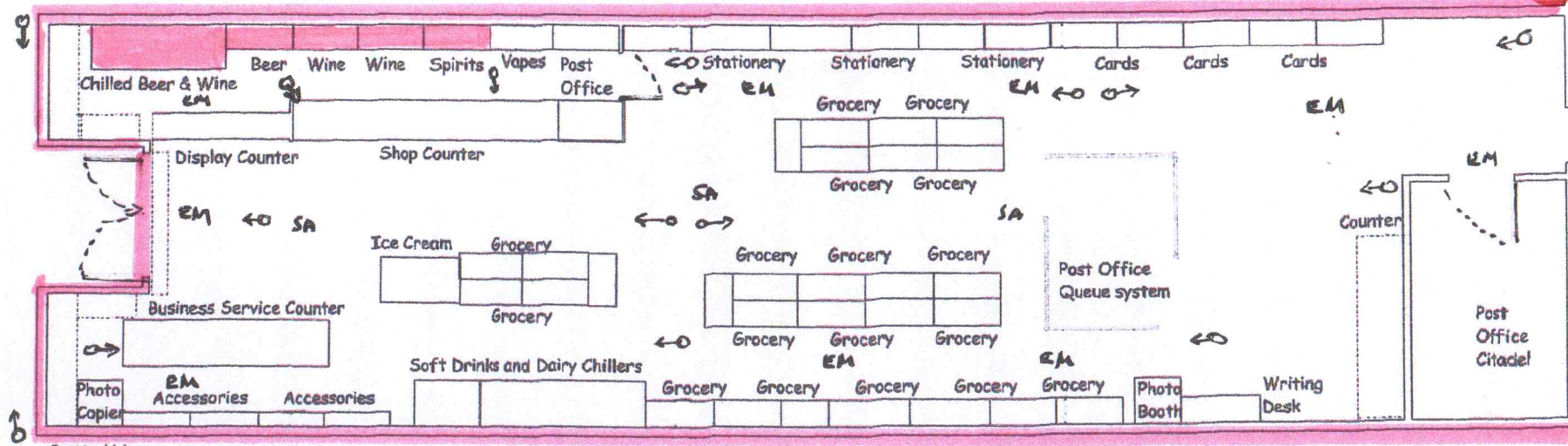
Scale Plan – 1:100

2 X Proof of a right to work in the UK

Fee – to be paid by card

Company registration number – 7390457

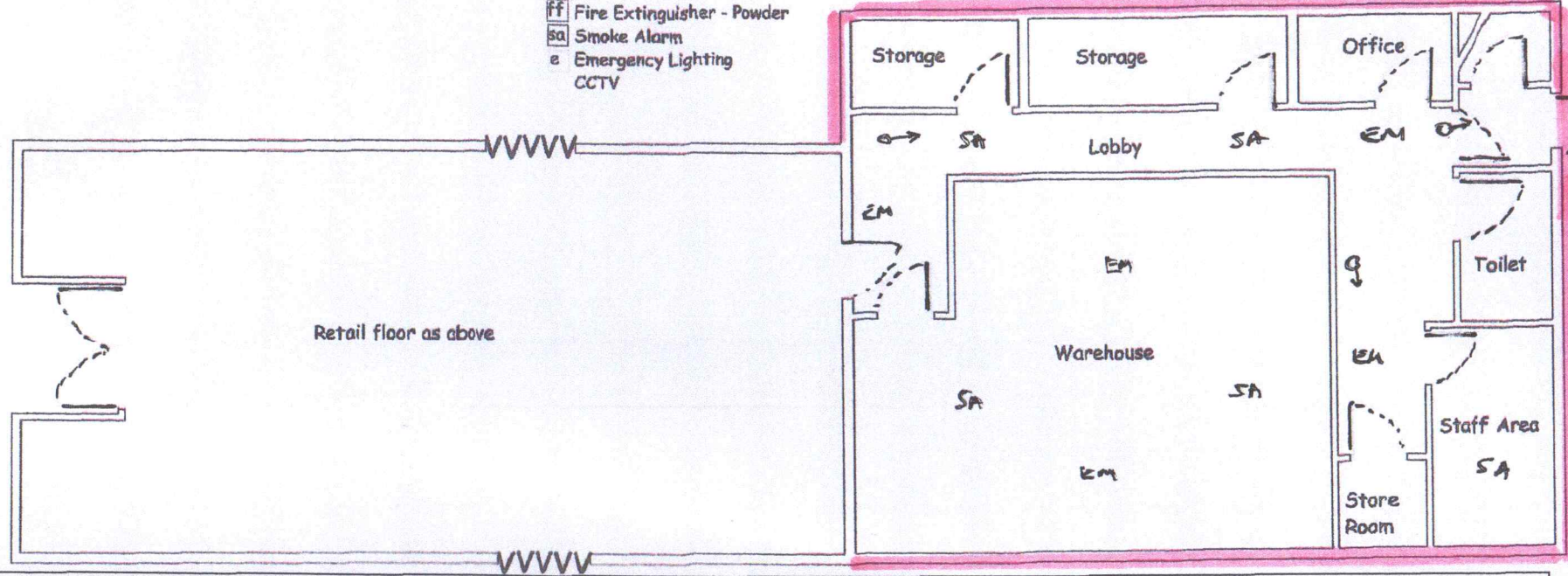
Registered Office – RB Retail & Licensing Services Limited, The Oakley, Kidderminster Road, Droitwich, Worcestershire, WR9 9AY.



Rear areas
As detailed
Below

Dotted Line
represents
Internal Window/
Door Grills

- Key
- ff Fire Extinguisher - Powder
 - sa Smoke Alarm
 - e Emergency Lighting
 - CCTV



Hounslow
Convenience
Store & Post
Office
173 High
Street
Hounslow
TW3 1QL
Scale 1:100
Drawing Ref:-
RB/1994
Drawn By:-
R Baker,
RB Retail
& Licensing
Services
Limited
13th April
2026