

Here's what **Someone** entered into the form:

Previous licence details

Have you previously held a Pavement licence for tables and chairs under the Business and Planning Act 2020?*

Yes

Existing licence number

2023/0731/PVL

Details of the Application site

Name of business / establishment *

Black Sheep Coffee

Application site building number or name*

5-7

Application site postcode*

W1T 2PD

UPRN

5083162

Full Address*

5 7 Goodge Street, London, W1T 2PD

Applicant details

First name*

Annie

Surname*

Whone

Company name*

Black Sheep Coffee

House number or name*



Postcode*



UPRN

16410701

Full Address*

Black Sheep Coffee, 81 Southwark Street, London, SE1 0HX

Telephone*



Email address*



Agent details

Are you an agent applying on behalf of someone?*

Yes

First name

Lucy

Surname

Hodgkinson

Agent's building number or name



Agent's postcode

[REDACTED]

UPRN

16765497

Full Address

[REDACTED]

Agent's telephone

[REDACTED]

Agent's email address

[REDACTED]

Previous licence details

Does your premises hold a premises licence granted under the Licensing Act 2003?*

No

Premises licence number

Application details

Guidance notes

Please note that parasols, barriers, electric heaters or similar furniture may not be permitted in the area designated for the pavement licence depending on the space available and whether it is safe to place such furniture on the street.

Tables*

4

Chairs*

8

Barriers*

2

Umbrellas*

0

Heaters*

0

Other

Upload plan*

Floor plan (3).pdf

Hours during which the tables and chairs will be on the street

Monday start time*

0800

Monday finish time*

18:30

Tuesday start time*

08:00

Tuesday finish time*

18:30

Wednesday start time*

08:00

Wednesday finish time*

18:30

Thursday start time*

08:00

Thursday finish time*

18:30

Friday start time*

08:00

Friday finish time*

18:30

Saturday start time*

08:00

Saturday finish time*

18:30

Sunday start time*

08:00

Sunday finish time*

18:30

Supporting information

Outline how the table and chairs will be managed (i.e. management plan)*

Tables will be cleared and cleaned after the user leaves. Any litter will be collected and thrown away. Tables will be removed at the end of working day and stored inside the unit. The pavement will be swept down and if needed washed.

Outline what measures will be adopted to minimise noise nuisance and disruption to local residents and members of the public (i.e. management plan)*

Staff will monitor the noise level and will ask people to remain speaking at a normal level and noisy or disruptive people will be asked to leave the area or the police will be called

Include a risk assessment for the use of electric heaters*

no heaters are being installed

Have you completed a risk assessment?*

Yes

Upload risk assessment

Managing outside seating RA (1) (1).pdf

Risk assessment not completed

Your application may be invalidated until this is received.

Storage

Specify the place of storage of the tables and chairs and other items when not placed on the highway*

Tables and chairs will be kept in to the store overnight and any times that the store is closed
Attach a valid certificate of public liability insurance of at least £ 2 million that covers the area that you intend to licence

Attach valid certificate of public liability insurance and photograph as evidence showing display*

BSC Insurance Letter 2024.pdf

Proof of public Liability insurance attached*

Yes

Declaration and indemnity

Checklist of documents included with application:*

Plan of area to be licensed, Proof of public liability insurance, Risk assessment

I acknowledge that a public notice must be displayed at the premises and it can be viewed at all times by members of the public for the duration of the consultation period*

Yes

Additional supplementary documentation

Upload additional document

Site Notice notification Aug 24.jpeg

Confirmation email

[REDACTED]

[REDACTED]

Payment page

Description

Pavement Licence

Amount

[REDACTED]

Address Line 1

[REDACTED]

Address Line 2

[REDACTED]

Postcode

[REDACTED]

Name

[REDACTED]

Billing email address

[REDACTED]

Payer Application Reference Number

Payment result

[Click here to access the form](#)

