APPENDIX 4

# Middlesbrough Council

www.middlesbrough.gov.uk

# COMMUNITY PROTECTION SERVICES Licensing

PO Box 65, Vancouver House, Gurney Street, Middlesbrough TS1 1QP Tel: (01642) 245432



### Representations On A Current Application For A Grant/Variation of a Premises Licence Or Club Premises Certificate Under The Licensing Act 2003

Before Completing This Form Please Read The Guidance Notes At The End Of The Form

inside	u are completing this form by hand please write legibly in block capitals. In le the boxes and written in black ink. Use additional sheets if necessary. pleted form for your records.	all cases ensure that you You may wish to keep	ur answers ar a copy of th
l (Inse	PC 1841 Price		
	o make representation about the application for variation/grant for a premises licence/club premises rate (delete as applicable)  1 – PREMISES OR CLUB PREMISES DETAILS  Address of Premises or Club Premises, or if none, ordnance survey map reference or description relands Street,  iown  Post Code  resbrough  TS4 2HP  of premises licence holder or club holding club premises certificate (if known)  er of premises licence or club premise certificate (if known)  2 – DETAILS OF PERSON MAKING REPRESENTATION		
PAR	RT 1 – PREMISES OR CLUB PREMISES DETAILS		
Post	tal Address of Premises or Club Premises, or if none, ordnance surve	y map reference or de	scription
60 B	Byelands Street,		
Post	t Town Post Code		,
Midd	dlesbrough TS4 2HP		
Nam	ne of premises licence holder or club holding club premises certificate	(if known)	
Num	nber of premises licence or club premise certificate (if known)		
PAR	RT 2 – DETAILS OF PERSON MAKING REPRESENTATION		
l am			
			Please Tick ✓
1)	an interested party (please complete (A) or (B) below)	•	
	a) a person living in the vicinity of the premises		
	b) a body representing persons living in the vicinity of the premis	es	
	c) a person involved in business in the vicinity of the premises		
	d) a body representing persons involved in business in the vicini	ty of the premises	
2)	a responsible authority (please complete (C) below)		□х
3)	a member of the club to which this representation relates (please	complete (A) below)	П

(A) DETAILS OF INDIVIDUAL MAKING REPRESENTATION (fill in as applicable)						
Mr Mrs Mrs	liss	Ms	Other Title (for example	e, Rev)		
Surname		First i	Names			
I am 18 years old or over	·		Yes	(Please Tick)		
Current Address		•	•	<u> </u>		
				,		
				•		
Post Town	10 . 10 . 100	<u></u>	Post Code			
Daytime contact telephone number	er	,	<u>;</u>			
E-mail address (optional)		•	· · · · · · · · · · · · · · · · · · ·			
, ,						
	•					
(B) DETAILS OF OTHER PARTY	MAKING RE	PRESENTATION	<b>ON</b> (e.g. Body or Business)	)		
	70.	*-				
Name and Address						
				•		
·		100				
	- "		<del></del>			
Telephone Number (If any)			, 			
E-Mail address (optional)		•	···	-		
·	<u> </u>			****		
(C) DETAIL O OF DECRONOURLE		· • • • • • • • • • • • • • • • • • • •	.=			
(C) DETAILS OF RESPONSIBLE	AUTHORITY	MAKING REF	RESENTATION	· ·		
Name and Address	AND DOLLOS	<u>.</u>	•			
CHIEF CONSTABLE OF CLEVEL						
C/O POLICE SERGEANT 944 HK						
BRIDGE STREET WEST	u,					
MIDDLESBROUGH			,			
TS2 1AB						
		89-4				
Telephone Number (If any)	01642 302	2260	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
	01042 302					
E-Mail address (optional)						

This rep	resentation relates to the following licensing objective(s)	
•	· · · · · · · · · · · · · · · · · · ·	Please Tick ✓
1.	The prevention of crime and disorder	$\Box X$
2. F	Public safety	
3. 7	The prevention of public nuisance	
4.	Γhe protection of children from harm	□ .
Please s	state the ground(s) for representation. (please read guidance note 1)	
-Middlesi the hour	cation has been received for a Premises Licence to be granted for 60 Byelands brough. The application is for the off-premises sale of alcohol Monday. Sunday, is of 10:00- 22:00 hours and the premises opening hours are 08:00-22:00 hours. It is a Miss. Farah Hussain who also proposes to be the Designated Premises Store.	between— The
a specia	mises are located in an area deemed by Middlesbrough Council as saturated and Cumulative Impact Policy is in place; the onus is therefore placed upon the appartments that how the premises will not further impact on this area.	
which is	s Street is an area which already suffers issues with Crime and Anti-Social Beha often fuelled by alcohol consumption. Middlesbrough Council's Statement of Lic self states:	·
North Or licence points of the following of the following states of the follow	dence shows that the wards of Central, Newport, Park, Longlands and Beechwood rmesby have the highest level of crime and antisocial behaviour, the highest number of the highest level of crime and antisocial behaviour. These wards account for: of all crime and disorder of antisocial behaviour of off licence premises	nber of off
Farah H	September 2017 a meeting was held at Middlesbrough Police Office with the appussain and representatives from local Responsible Authorities - Public Health, T	•
objective asked w what iter	ussain offered several conditions which could be implemented to support the four es, by her own admission she has no previous experience of the sale of alcohol; hat lines of alcohol she intended in selling in the store, Miss. Hussain could not on ms would be stocked. It is a concern that with no knowledge or experience of alcohol unwittingly engage in the sales of cheap, high strength alcohol which is attracted	when outline cohol the

dependant drinkers; who would in turn engage in criminal or anti-social behaviour whilst under the

influence.	-
Miss. Hussain highlighted that the stores current layout would be altered; moving fridg	es to behind

be 20-30% of the stores overall floor space.

Cleveland Police believe that should this licence be granted the Prevention of Crime and Disorder licensing objective will be undermined.

a counter area for the alcohol to be sold from. The sales area dedicated to alcohol was planned to

Please provide as much information as possible to support the representation. (Please read guidance note 2)

Should the application not be withdrawn then further evidence will be provided.

Please Tick ✓

Have you made any representation relating to these premises before?

X□

If Yes, please state the date of that representation

Day		Мо	Month Year		Year		
-							

If you have made	representation	before relating	to these	premises	please	state w	hat they	were a	ind when
you made them.	•		-						

## How We Collect And Use Information

By completing this document you give Middlesbrough Council the authority to collect and retain information about you for the purpose of the application. In order to process the application we may need to check this information with other enforcement agencies, local authorities or government departments.

We must protect the public funds we handle and so we may use the information you have provided on this form to prevent and detect fraud. We may also share this information with other enforcement agencies including those organisations which handle public funds. Middlesbrough Council will not disclose information about you unless the law permits.

Middlesbrough Council is the Data Controller for the purposes of the Data Protection Act. If you want to know more about the information the Authority holds about you or the way the Authority uses that information please contact the Information Security Officer, PO Box 17, Melrose House, 1 Melrose Street, Middlesbrough, TS1 2YW.

### Part 3 - Signatures (Please read guidance note 3)

Signature of representative or representative's solicitor or other duly authorised agent. (See guidance note 4) If signing on behalf of the representative please state in what capacity.

Signature		Date	
	PC 1841 Emma Price		29/09/2017
Capacity		····	
	Licensing Support Constable		<b>´</b> -

Contact name (where not previously given) representation. (Please read guidance note 5)	and addr	ess for	correspondence	associated	with	this
Middlesbrough Police HQ, Bridge Street West,		,				
Post Town	Post	Code			1	
Middlesbrough	TS2	1AB				

Telephone Number (if any)	01642 302360		
E-mail Address (optional)	emma.price@cleveland.pnn.police.uk	**,4	•

#### **Notes for Guidance**

- 1. The ground(s) for representation must be based on one of the licensing objectives.
- 2. Please list any additional information or details for example dates of problems, which are included in the grounds for representation, if applicable.
- 3. The representation form must be signed.
- 4. A representative's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
- 5. This is the address, which we shall use to correspond with you about this representation.
- 6. Information on the Licensing Act 2003 is available at <a href="www.middlesbrough.gov.uk">www.middlesbrough.gov.uk</a> and you are advised to read any relevant guidance leaflets before completing this form.

